Chapter 4 Developing Evaluation Questions: Beyond the Technical Issues

Ligia de Salazar and Mary Hall

This chapter is a contribution to the evaluation debate in health promotion. It explores the strategies for, and main concerns in, identifying and formulating relevant and answerable evaluation questions. Unlike many previous texts discussing what is involved in developing evaluation questions, in this chapter we argue that a wide range of contextual and highly political factors contribute to the framing of evaluation questions. Furthermore, we strongly believe that the same intervention can lend itself to a variety of different evaluation questions depending upon the stage of intervention development at which the evaluation is conducted. Finally, we contend that the evaluation question or set of questions should reflect the ever-changing context of the intervention, as well as the stage if the intervention, if evaluation is to be truly useful for health promotion.

The Cochrane Collaboration defined the relationship of health promotion and public health in this way: "health promotion and public health encompasses the assessment of the health of populations formulating policies to prevent or respond to health problems promoting healthy environments and generally promoting health through the organized effort of society. Public health promotes societal action to invest in living conditions that create, maintain and protect health. This covers an extremely wide range of interventions aimed at improving health, with various levels and types of interventions included" (EPPI – Centre, 2006). Health Promotion expands upon the definition of health by addressing the complexity of social changes, reiterating the importance of acting not only on the issue of demedicalization and reorientation of health services and practices, but especially in the sphere of local development and empowerment. Carvalho, Bodstein, Hartz, and Matida (2004) discussed political and economic determinants of the health-disease process, reaffirming health as an ethical imperative and a citizen's right.

There are many elements common to the numerous different definitions of evaluation available in the literature. These include describing, comparing and assessing the value of programs and interventions in the pursuit of specific aims and, increasingly, incorporating lessons learned into the decision-making process (OECD, 1998). Other authors conceive of evaluation as a process of systematic and

L. de Salazar Universidad del Valle, Cali, Colombia

objective appraisal of a project, program or policy (Shadish, Cook, & Leviton, 1995). According to Hawe, Degeling, Hall, and Brierley (2003) evaluation is a judgement about something. These authors assert that the way in which these judgments are made depends upon expectations, past experiences, and what relevant actors believe to be important. For (Battista et al., 1999), evaluation reinforces the critical link between science and policy, and attempts to reconcile those two worlds, which operate within different paradigms. While Western science often adopts a positivist paradigm that assumes the existence of truth, policy-making is an interpretive process oriented toward the integration of various factors into operating decisions.

In addition to assessing interventions' success, evaluations are also oriented toward obtaining information in order to interpret what has happened in interventions, particularly through participatory processes and techniques. They take various forms, including process evaluation, participatory evaluation, formative evaluation, empowerment evaluation, and illuminating evaluation (MacDonald, Veen, & Tones, 1996).

Effectiveness evaluation has been highly debated in recent years, and the term is loaded with many connotations. As a particular type of outcome evaluation (Weiss, 1998) effectiveness evaluation is increasingly considered to be an accepted standard for health promotion evaluation (McQueen & Jones, 2007). Issues and criticism regarding effectiveness evaluation are often related to the question: Do we need evidence of effectiveness to make decisions in order to accomplish health-promotion objectives?

Potvin, Haddad, and Frohlich (2001) have discussed the fact that evaluation questions need to reflect a comprehensive understanding of health promotion programs they are intended to address. This paper takes this argument a step further and discusses the wide range of other factors that influence and shape the process by which evaluation questions are identified and formulated.

Many issues related to evaluation in health promotion have been raised over the years. Discussions pertaining to the definition of the subjects and objects of the evaluation, the criteria for selecting and developing appropriate evaluation questions; the variables and indicators for measuring and rating success; the various methodological approaches to data collection; and the relationship between evaluators and decision-makers or between policy and research, can all be found in the health promotion literature. In this chapter our aim is to bring together new and old arguments in favor of focusing health promotion evaluation on a variety of relevant aspects of health promotion interventions in order to strengthen health promotion theory and practice.

The issue of where to focus the evaluation is often perceived as simply a matter of the stage of the intervention, or decision-makers' needs for information. Developing and formulating an evaluation question goes far beyond the technical aspects of formulating an answerable question. We argue that it is essentially a practical issue; it is a complex process, iterative in nature, which involves negotiation among the various stakeholders. This negotiation is most often political in nature, and requires tradeoffs and compromises on the scope of the evaluation, the methodological approaches required and the political relevance of the information produced by the evaluation.

The iterative aspect of identifying and formulating an evaluation question reflects the constantly changing context of the intervention, and consequently, the evaluation. Different questions can be formulated during the life cycle of the healthpromotion intervention, which are influenced by the context, the evolution and the changing nature of the intervention, as well as by the demands of decision-makers or other stakeholders. This point is illustrated in Chapter 12 of this book in the discussion of the challenges of evaluating intersectoral initiatives.

Practical Isssues in Formulating an Evaluation Question

Fomulating an evaluation question is a practical, rather than a technical issue. Developing the evaluation question or questions is not solely a matter of fitting a research question with available data collection methods. It is rather an inherently political matter affected by, and impacting numerous factors. Those factors that shape the process of developing the evaluation question include: the purpose of the evaluation, the interests of the various stakeholders, their beliefs and representations about the intervention, and the criteria for success or failure. Furthermore, developing evaluation questions has to do with the improvement of health promotion interventions as well as the use of results to improve health conditions and promote population health. A poorly formulated question could have negative impact on present and future health; therefore this activity bears political, ethical and economic consequences.

The evaluation of health promotion interventions has traditionally been driven by academic interest rather than by the information needs of those responsible for managing and allocating resources or by community people who benefit from those decisions. Whose point of view should be considered when defining evaluation questions? Is it feasible to reach an agreement, and if so, how?

Several factors drive the process of identifying relevant evaluation questions. These are: (1) the theoretical and operational definition of the intervention being evaluated, (2) the meaning and scope of evaluation for the health promotion practitioners involved, (3) the purpose of the evaluation, (4) the criteria by which stakeholders will judge intervention effectiveness, (5) the decision-making context and (6) the feasibility of producing the expected results within a reasonable timeframe. Each of these factors presents different challenges to the evaluation of health promotion, and may carry different weight depending on the intervention and the persons involved. A discussion of the impact each has on selecting the evaluation question follows.

Theoretical and Operational Definition of the Intervention Being Evaluated

One of the key aspects to keep in mind when evaluating health promotion interventions is the changing nature of the context in which they are implemented and

the effects these transformations have on interventions and their potential outcomes. Interventions can, and must, be adjusted to real situations according to demands and needs, even those that were not foreseen when planning the intervention. Therefore, it is of utmost importance to define, in practical terms, what is the intervention that is going to be evaluated, and to achieve agreement on this matter among the various stakeholders, including those who are responsible for the evaluation. Context, defined as the characteristics of the setting into which the health promotion intervention is implemented, can act both as a factor influencing the implementation of the intervention and as an effect modifier of the intervention.

The elements and parameters that constitute the operational definition of the intervention (the way it is implemented) vary according to the sociopolitical context in which the intervention is implemented, the availability of certain conditions to make implementation feasible, and the beliefs and values of practitioners involved. Conducting evaluation of those projects is also dependent on these factors. The principles and values that support health promotion action are not always in agreement with the political system in which they operate, making it difficult to find appropriate implementation strategies.

An example of how the definition of the intervention can impact the evaluation is provided by the issue of equity, a key principle of health promotion. Unequitable distribution of resources in a community, and the way it affects both risks and outcomes, are important issues to be considered in the evaluation. It has been recognized (Waters, Doyle, & Jackson, 2006) that inequities are related not only to the risk of developing an adverse condition but also with the effectiveness of the intervention. Therefore, if socioeconomic status is associated with the implementation of the intervention, and if socioeconomic status is unevenly distributed among the population targeted by the intervention, these probabilities affect the effectiveness of the intervention.

We recognize that the task of characterizing and simplifying what are actually complex multi-component interventions is often very difficult and challenging. This is made even more difficult by the need to think of causes not as properties of agents, but as results of systems in which the population phenomena of health and disease occur, and to conceive of populations as organized groups with relational properties rather than mere aggregates of individuals (Loomis & Wing, 1990). However challenging the task, a clear description of the intervention must be achieved before formulating evaluation questions in order to draw any meaningful conclusions from the evaluation.

Meaning and Scope of Evaluation in Health Promotion Interventions

Evaluation in health promotion should consider, among other things, the fact that health promotion initiatives respond to dynamic processes that are participatory, multifactorial, political and multidimensional. Health promotion involves

concomitant and diverse interventions oriented to reach specific but complementary objectives. It focuses on groups and communities rather than individuals. It has short and long-term effects, as well as intangible benefits. It is articulated toward development and intersectoral planning more than the health sector alone. These distinctive characteristics of health promotion are important, as they influence the conduct of evaluation. Because of these characteristics there is a need to articulate knowledge stemming from political, social and biologic sciences in the analysis and interpretation of evaluation results. Also related is the challenge of defining in measurable terms the health promotion principles and values that are effective in an intervention. Finally, the potential need for, and difficulty in, generalizing evaluation results can also be linked to these unique characteristics.

Evaluation in health promotion also involves a trade off between credibility, opportunity, relevance, replicability of evaluation results, as well as diverse, and at times, conflicting interests of stakeholders. It is important to keep in mind that, as health promotion interventions are inherently dynamic and are the product of a permanent reflection-action process, the risk of evaluating something other than what was supposed to be evaluated, remains significant.

Evaluation Purpose

In addition to defining the intervention to be evaluated, those conducting the evaluation must reach agreement concerning the purpose for the evaluation. The reasons for engaging in health promotion are highly varied, and depend to a great degree on the interest of the stakeholders. Questions about the intervention and goals for the evaluation must therefore be explicitly addressed.

What exactly should be evaluated? Should the focus be on the design, process (implementation), impact or results of intervention? What are the variables and indicators of success for each of these components? Answers to these questions drive the types of evaluation questions to be asked, and have significant impact on the success of health promotion evaluation projects.

Evaluators often face conflicting situations when they have to decide on the type of evaluation, bearing in mind the need to produce timely, accessible and relevant information according to technical, managerial, and political considerations. Defining the right question, at the right time, within a particular context, depends on several factors, some of which have already been mentioned. It is important to include also: the availability of technical and financial resources, access to reliable sources of information, the requirements of the funding agencies and planners, and the decisions that will be made using the evaluation results.

There exist a variety of reasons for which we conduct evaluation, including scientific interest, and the need for information to decide how or whether to improve, expand, extend or replace a determined intervention. Evaluation questions orient the selection of the appropriate evaluation study design. Two categories of questions will be considered in the following discussion. The first one pertains to the process

and intermediate results of the implementation of the intervention. The purpose in this type of inquiry is to identify the characteristics of the intervention life cycle, the interrelations among actors, the strengths and limitations, the changes or intermediate results, and their contributing factors. It responds to questions as to what and how social changes occur within the intervention. The second category addresses the need for decision-makers to determine whether the intervention should be extended expanded or replaced, and answers the question whether the intervention produced the desired outcomes.

Process evaluation is a means to strengthen health promotion practice, and to improve intervention planning and execution. When integrated within intervention planning, implementation and follow up, process evaluations significantly improve interventions. In this cycle, planning, implementation, follow-up and evaluation are not independent events but are designed to continually feed back and provide new information inputs in the process. As stated earlier, the dynamic nature of health promotion intervention requires that questions and evaluation designs take this dynamic process into account, and more importantly, make explicit the mechanisms that produce those transformations. This is achieved through a monitoring system that constantly documents and analyzes the intervention as implemented. Such a system can be achieved by conducting a systematization analysis (de Salazar, 2002), using qualitative research methods appropriate to understand complex phenomena.

Systematization requires that process oriented questions are asked, so that the intervention can be continually improved. Did public opinion change over time? Did changes in opinion, if any, have an impact on policymaking? What was the media opinion as reflected in news coverage? How feasible is it to measure values? (Diez-Roux, 1998) These are the kind of questions addressed in this type of evaluation.

Another type of evaluation, in which the purpose is to make sound recommendations for decision-making, requires that we ask the question: how much do we know about the intervention we are evaluating? And if the intervention is not well defined, then what are we going to recommend? These types of evaluation questions are also useful to identify the necessary conditions for the intervention to produce the desired effect and that constitute requirements for future intervention deployment.

What is at stake in this type of evaluation is whether the intervention produces the desired effects. The emphasis is on identifying what changed as a result of the intervention and how much. Although these two types of evaluation – process and effectiveness – respond to different interests and purposes, they are complementary.

Criteria to Judge Effectiveness

Effectiveness evaluation has been conceived in this chapter as the description and measurement of intervention indicators of success or failure and the establishment of empirical associations between their variations and the intervention. In effectiveness evaluation there is interest in establishing whether the intervention worked and if it achieved the outcomes for which it was designed. It responds to what, how much, and how questions regarding changes produced by the intervention.

The political and ethical issues raised by effectiveness evaluation have been discussed by Ray and Mayan (2001). They raise questions such as who determines what counts as evidence, and what are the right indicators and appropriate standards in effectiveness evaluation research? Another concern is how different stakeholders, with vastly different expectations, can reach an agreement about criteria to establish effectiveness of an intervention that benefits them in different ways and to varying degrees.

For health promotion interventions, it is essential not only to inquire about the effectiveness of a given intervention, but about the process through which the intervention achieved the desired outcomes in the short, medium, and long term. This is paramount in order to understand how interventions work, and to increase their relevance and responsiveness to local conditions and contexts (WHO, 2001).

One important aspect in judging intervention effectiveness is the integration of the evidence yielded by evaluation into health promotion theory and practice. The evaluation purpose must be made clear at the outset, in order to determine how it can contribute to health promotion theory and practice. Being aware of whether the evaluation is seen as a contributor to strengthen health promotion theory or practice, or as a research tool to support decisions, or as merely a means to justify decisions already made will help put the evaluation results into a proper perspective.

Another important issue in judging an intervention's effectiveness is related to the type of information valued by the relevant stakeholders. Depending on the rationale supporting the decision-making process and the definition of evidence held by stakeholders what is judged as relevant knowledge varies. According to Lomas (WHO, 2005) scientific evidence can be categorized into context free (absolute truth), and context sensitive but conversely, Oxman (WHO, 2005) argues that all evidence is context sensitive since all observations are made in a specific context. Both science-based and non-scientific information, when properly translated, have potential strategic value. Interventions in which the change process has been documented and a permanent reflexive process has been implemented in order to understand the nature of the changes occurring and the factors that facilitate those changes as well as the influence of various actors on those processes, provide examples of the usefulness of various types of evidence.

The above implies that "evidence is plural and that the implementability of good global evidence must be triangulated with local knowledge" (WHO, 2005). This raises other issues, such as how useful, generalizable and amenable to standardization should health promotion evidence be? Should the criteria for judging effectiveness be adjusted according to the type of inquiry, to the context where decisions will be made? Or is evidence, by definition, not suited to the judgement of effectiveness of complex social interventions and to the information needs of decision-makers?

The critical issue raised by such questions pertains to the contextual factors that influence evidence of effectiveness. Are they the same in health promotion as in other types of public health interventions? It is expected that context-sensitive evidence is influenced by political and social factors, whereas personal and institutional factors are more associated with scientific evidence. Although most definitions of evidence cover qualitative and quantitative indicators, the term evidence is often

restricted to quantitative facts derived from large-sample, randomized experimental studies that are ill-equiped to capture the inherent complexity of health promotion (McQueen & Anderson, 2000). Madjar and Walton (2001) argue that a broad notion of evidence also includes qualitative evidence in the form of lived experiences, case histories and stories. This kind of evidence is important because it enhances the understanding of human behaviour; it promotes holistic thinking, offers contextual qualitative data, and is more than just mere opinion because it is generated in a systematic way.

Our purpose here is not to debate about the meaning of evidence in health promotion, as many authors have discussed this issue elsewhere (Kemm, 2006; Madjar & Walton, 2001; Marmot, 2004), but rather to mention the theoretical and practical underpinnings of the term evidence as linked to effectiveness in the context of decision- making.

If evaluation is considered a means to strengthen health promotion practice, it should be accepted that the evaluation studies should not only document intervention effects but they should also contribute to a better understanding of, and make explicit, the mechanisms that produce them (de Salazar, 2002). These two goals require that different types of questions are formulated, and it is important to make these explicit at the outset of the evaluation.

Health promotion interventions are supposed to be adapted according to stake-holders' needs and expectations and to the context in which they are developed. Thus, beyond etiological explanations obtained in controlled situations, evaluation in health promotion must account for changes occuring in real situations. Evaluation questions should therefore be oriented toward identifying, quantifying and explaining these changes, and also understanding the processes that produce them, giving meaning to the associations between intervention and changes.

Decision-Making Context

A precise and profound knowledge about the context in which interventions are being implemented and evaluated is necessary to define appropriate and relevant evaluation questions as well as the manner in which those questions should be answered. Information about context includes: information related to the life cycle of the intervention; degree of intervention acceptance among stakeholders, decision-makers, and beneficiaries; the current policies and programs influencing the intervention; and the interests of decision-makers and practitioners regarding terminating or extending the intervention.

The health promotion literature reflects a growing interest in linking knowledge, policy and action. There is, however, little discussion on how such linkage can be accomplished (Stivers, 1991). It is only recently that public health researchers in developing countries have become aware of the importance of working more closely with policy-makers and the public to implement their findings into policy arenas. Brint (1990) illustrates how scientific studies may stimulate new ways to

conceive policy problems and solutions. A number of ancillary questions can guide the exploration of the decision-making context.

Who Are the Decision-Makers?

The interests of the main users of evaluation help define the scope of the evaluation, so their identification is important, as well as the identification of their interests, needs and perceptions with regard to the intervention. There are different users of evaluation results. Stakeholder is the label for those groups whose interests are, or are perceived to be affected by a change in interventions and policy. Stakeholders include elected or bureaucratic officials as heads of committees, parties, and bureaus as well as commercial, scientific, medical and voluntary nonprofit entities, including public interest groups (Feldstein, 1996; Jasanoff, 1993).

Evaluation results have the potential to influence the agenda of policy makers when they respond to their needs and interests in a timely manner. Should health promotion evaluation therefore be driven by policy-makers' needs, given the political nature of health promotion endeavors? What is at issue here is how to combine the interests of different parties, given that most of the time interventions involve a variety of people at different levels and from various sectors.

What Are the Needs and Interests of Decision-Makers and Other Stakeholders?

It is important to inquire about what results are needed and by when, and to determine how to formulate evaluation questions that correspond to users interests without losing relevance and accuracy. The rationale and perspectives with which evaluators appraise interventions do not necessarily correspond to those of decision-makers, so evaluators are well advised to ask themselves whether the information required by decision-makers to take action can be translated into a researchable question. Evaluators must also ask if, in fact, scientific research is the most appropriate manner to obtain evidence, or if evidence is needed at all for policy-makers to take action.

It is important to ask and find answers to questions such as: What do we want to know? Which information do we hope to obtain with the evaluation? For what purposes are we evaluating this intervention? What will we do with the information? Who requires the evaluation? This information is of great utility in defining the scope of the evaluation, the degree of precision needed, and the most appropriate evaluation study design.

There are significant differences in the type of questions deemed relevant by those implementing the intervention, the sponsors, the public and the intervention staff. Implementers may be more interested in the performance of the intervention and in understanding the implementation process in order to make adjustments.

Sponsors funding agencies and staff may have greater interest in knowing the outputs and the benefits to special groups. Funders' evaluation questions tend to pertain to the worth of society to allocate financial, human or other resources to particular interventions (PAHO, 2007).

How Is the Evaluation Perceived?

According to CIID (2001), evaluation is an integral part of program and project management. It is an organizational learning tool oriented toward strengthening institutional responsibility. Milio (1990), on the other hand, argues that policy evaluation studies seek to assess the gaps between what is, and what ought to be, in terms of policy objectives and results, between means and ends (Brewer & de Leon, 1983).

Evaluation is considered a multidisciplinary and applied field intended to address real-world issues in a timely fashion. Its audiences include a wide range of non-scientific groups, such as policy-makers in legislatures and administrative bodies, advocacy groups, and organizations' governing bodies (Benjamin, Perfetto, & Greene, 1995).

How to Adapt Evaluation Questions to the Interests of Users Without Losing Relevance and Accuracy?

The answer to this question is: through negotiation. But to do this, good information must be available. Evaluation is conducted in a political environment, a fact that is sometimes not fully recognized by evaluators. In some instances, insufficient, untimely, and irrelevant information is provided to decision-makers and the public. Such unfortunate evaluation outcomes can be attributable to various causes such as: the way evaluation studies are designed, the type of questions formulated, the manner in which evaluation results are presented, insufficient knowledge about the context, deficiencies in evaluator's abilities to deal with decision-makers and insufficient management and negotiation skills from the evaluator.

It is well known that decisions are supported not only by information about effectiveness, but also by information about when and how the intervention works, and the conditions that influence the intervention effects. Additional information required for decision-making includes the characteristics of the life cycle of the intervention, the interrelations among actors, the strengths and limitations of the evaluation study design, and factors that are responsible for outcomes. In addition to those evaluation related factors, evaluators should be cognizant of what is at stake for the various stakeholders affected by the decision. In other words, context-bounded knowledge is necessary to judge the replicability or extension of an intervention (Milio, 1990). Even when policy analyses show health benefits, the decision to support an intervention may be negatively influenced by factors related to the environment in which the evaluation and negotiations were conducted.

Evaluators must be aware of the conditions and context in which evaluation is required and conducted. Evaluators often face conflicting situations when they must decide on the type of evaluation question to be pursued, considering the need to produce timely, accessible and relevant information according to technical, managerial, and political conditions. They should consider the trade-offs between the validity and utility of evaluation results and between evidence of effectiveness versus evidence of social profitability. To respond to information needs in an opportune and accurate manner, the process of developing and formulating an evaluation question and deciding on the scope of the evaluation has to be conducted with the decision-making context in mind.

The Feasibility of Producing the Expected Evaluation Results Within a Reasonable Timeframe

Evidence of effectiveness is also bound by time considerations. For those implementing an intervention, it is rather counterproductive to wait until the end of the intervention before obtaining evaluation results. So, questions related to intermediary results are often appropriate and constitute important input for making decisions regarding intervention implementation.

Type of Questions and Methodological Issues Practical Issues in Defining Evaluation Questions

In social and complex phenomena, like in most health promotion interventions where adaptations to specific conditions could mean significant changes in the conceptual framework, implementation and scope of the intervention, there is a big risk in attempting to evaluate plans that have not in fact been implemented. On the other hand, if the evaluation is conceived of as contributing to intervention improvement and a political tool to induce intervention changes through negotiation, this should be taken into account in the formulation of the evaluation questions.

Different methodological approaches support the definition of appropriate and sound evaluation questions. In general there are two interrelated categories of questions: those related to understanding social changes, or changes in social practices of social agents, including the relationships among actors within the intervention; and those that account for the results and effects of interventions.

There is a wide range of foci and methodologies to assist or orient the identification and definition of evaluation questions, and therefore also a range of study designs that can be implemented. The first category of questions is supported by the practice of documentation and systematization of interventions, and by practices such as responsive and participatory evaluation and outcome mapping (Jara, 2000; Francke & Morgan, 1995; Chilean Government, 2004, de Salazar, 2004; de Salazar, Diaz, & Magaña, 2002).

Undertaking the development of evaluation questions with the following principles in mind may facilitate the evaluator's task.

- Recognize the complexity of developing a theoretically sound series of questions
 that relate the multiple levels of action in health promotion interventions. This
 complexity is likely to be a better reflection of reality than the simpler multicausal
 models prevalent today (Loomis & Wing, 1990). Evaluations that are guided by
 complex sets of questions provide information to understand the process, enhance
 the understanding of human behaviours, promote holistic thinking, offer contextual information and bring to the forefront the perspectives and preoccupations
 of the community or target groups;
- Develop questions that are oriented to identifying and understanding the processes of change, and the intermediary results of those changes. Even when questions are derived from the goals and intentions of policy-makers, they should pertain to issues relevant to as many stakeholders as possible, including policymakers, managers, practitioners, community and target groups (Guba & Lincoln, 1981, 1989; Lincoln & Guba, 1985; Stake, 1975; Stake & Abma, 2005).
- Develop permanent procedures that facilitate communication among the various interventions' stakeholders. The interface between knowledge and practice should be facilitated as well as with the context, that is the social, organizational, and political settings in which the intervention is implemented. Such a procedure is vital to identify the meaning and scope of the intervention in the real world; the needed changes in protocol design, and their justifications.
- The evaluation questions should address the preoccupations and interests of the people that are close to the intervention (Chilean Government, 2004; Earl, Carden, & Smutylo, 2001; Jara, 2000, de Salazar, 2004; de Salazar et al., 2002).
 Evaluation questions are ideally derived through a process of documentation-reflection that involves intervention stakeholders. It is a product of the dynamics and interests present within the intervention.
- Interest and evaluation questions are associated with intervention's success. They
 increase the probability of learning about how to improve the effectiveness of
 an intervention. In this case the danger of not discovering the hidden contribution is eliminated, when feedback is focused on improving rather than proving,
 understanding instead of making responsible, and creating knowledge instead of
 contributing merits for itself (Smutylo, 2001).
- Ideally, evaluation criteria used to asses interventions' effectiveness are not only derived from the goals and intentions of policy-makers, but include a wide range of issues from as many stakeholders as possible, including policy-makers, managers, practitioners, community and target groups. Evaluation questions are formulated through partnerships among the sectors and actors committed to the intervention, contributing to an active and permanent participation into the evaluation, picking up perceptions, interests, contributions and points of agreement.
- Negotiation of the evaluation questions and study design has to be undertaken considering the overall intervention complexity. Ideally, the evaluator takes on

the role of facilitator, interpreter and creator of conditions for the interaction and negotiation between participants in a sharing and learning environment.

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