HEALTH PROMOTION PLANNING

PLANNING PROCESS

- Planning is a process which ends up with a plan
- A plan should give you answers to three questions:
  - What am I trying to achieve?
  - What am I going to do?
  - How will I know whether I have been successful?

1. What am I trying to achieve?

Concerned with identifying needs and priorities and being clear about specific aims and objectives

2. What am I going to do?

Can be broken down into smaller steps:

- selecting the best way of achieving aims from a variety of possible ways
- identifying the resources you are going to use
- setting a clear action plan of who does what and when

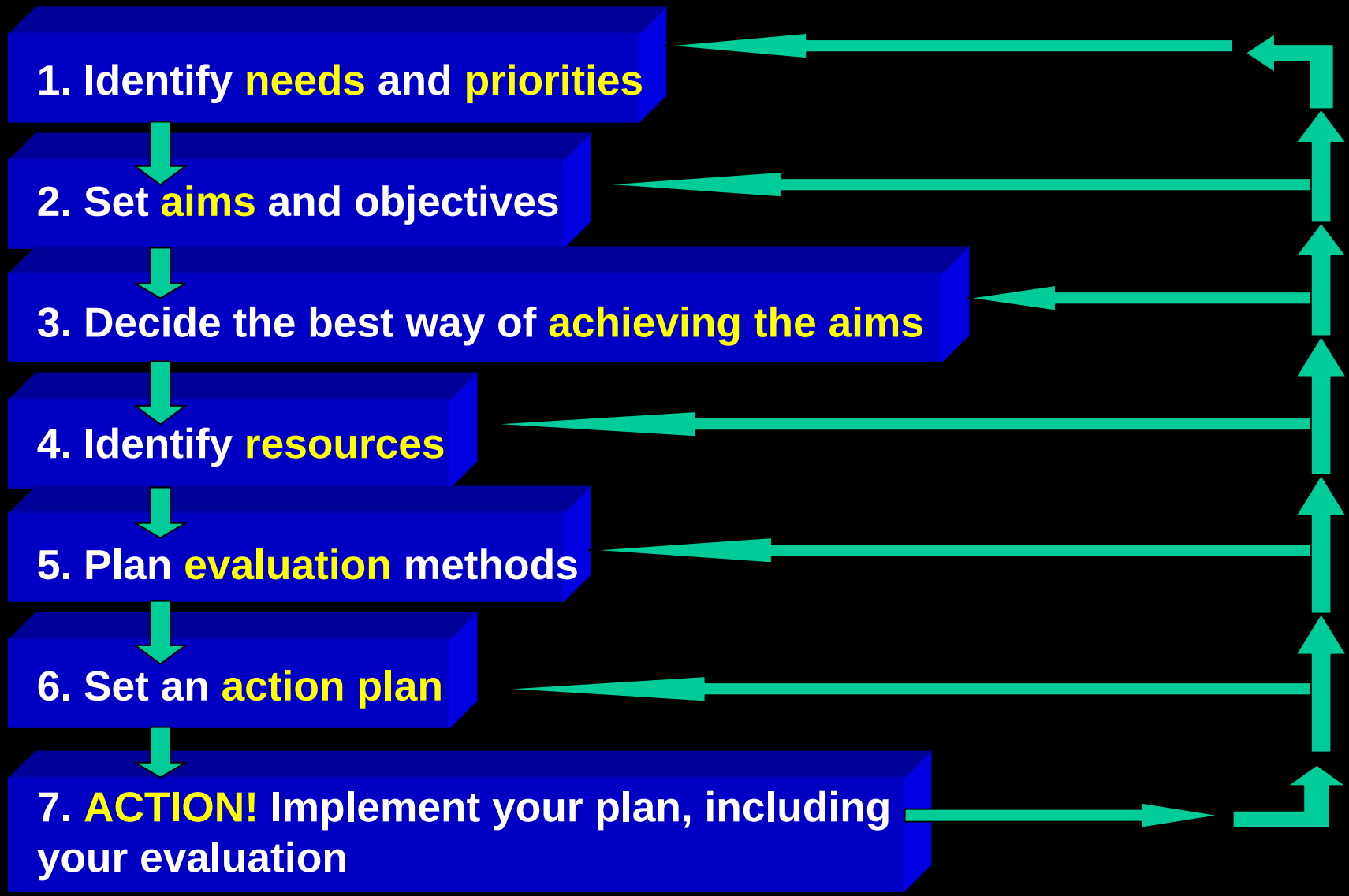
3. How will I know whether I have been successful?

- Means that you will need to include plans for evaluation in your overall plan
- Evaluation should be an integral part of your overall plan, not tacked in as an afterthought - otherwise you will not be able to capture the information you need

WHAT DOES PLANNING ENTAILS?

- An assessment of need
- Setting aims - what is it you intend to achieve
- Setting objectives - precise outcomes. Objectives should be SMART: Specific, Measureable, Achievable, Realistic, Timescale
- Deciding which methods or strategies will achieve your objectives
- Evaluating outcomes in order to make improvements in the future

A FLOWCHART FOR PLANNING AND EVALUATING HEALTH PROMOTION



STAGES OF PLANNING AND EVALUATION FLOWCHART

STAGE 1:

IDENTIFY NEEDS AND PRIORITIES

STAGE 1: IDENTIFY NEEDS AND PRIORITIES

- How do you find out what health promotion is needed?
- If you think you already know, what are you basing your judgement on?
- Who has identified the need: you, your clients or someone else?
- How do you establish your priorities?

CONCEPT OF NEEDS

Four kinds of needs:

- Normative need - defined by the expert
- Felt need - need which people feel (wants)
- Expressed need - what people say they need (demands)
- Comparative need - need defined by comparison between similar group of clients in terms of what they have

ASSESSING HEALTH PROMOTION NEEDS -1

Can be approached systematically by asking a series of questions:

1. What sort of need is it?

   Is it normative, felt, expressed or comparative need?

2. Who decide that there is a need?

   Whose decision is it: the health promoter's, the client's or both

ASSESSING HEALTH PROMOTION NEEDS -2

3. What are the grounds for deciding that there is a need?

   Is there any evidence of need in the form of objective data, such as facts and figures

4. What are the aims and the appropriate response to the need?

   Health promotion cannot solve all problems or meet all health needs. We need to be clear what the need is, then what our aims are for meeting that need, then the appropriate way to meet it

SETTING HEALTH PROMOTION PRIORITIES -1

- Huge workload of health promotion needs which should be met - not always possible because of constraints of time, resources and energy
- Concentrating effort on priority areas is more effective and rewarding
- Before attempting to set priorities it is helpful to analyse current ‘real life’ practice and recognize the wide range of criteria which will affect such decisions

SETTING HEALTH PROMOTION PRIORITIES -2

- Possible to consider two broad approaches to tackling a health issue (such as CHD) called the ‘high-risk’ and the ‘whole population’ approaches

- Generally, both approaches need to be taken and complement each other

STAGE 2:

SET AIMS AND OBJECTIVES

STAGE 2: SET AIMS AND OBJECTIVES

- This is the point where we ask ourselves “what exactly am I trying to achieve?”
- We go on asking until we have the answer very clearly defined
- A whole gamut of words are used to describe statements of ‘what I am trying to achieve’ - aims, objectives, targets, goals, mission, purpose, achievement, result product, outcome

SETTING OBJECTIVES -1

- A key stage in planning
- Objectives are the specific goals to be achieved and the measurement of the extent to which this happens in evaluation
- There is a balance to be struck between setting objectives which are realistic but also challenging
- Educational objectives should be relevant, realisable and measureable

SETTING OBJECTIVES -2

Ewles and Simnett (1992) identify 3 types of educational objectives.

1. Cognitive objectives concerning increased level of knowledge
2. Affective objectives concerning attitudes and beliefs
3. Skills in psycho-motor objectives concerning skills acquisition and competence

SETTING OBJECTIVES -3

Health promotion objectives may in addition include:

4. Behaviour change objectives - concerning changes in lifestyle and increased take-up of services
5. Policy objectives - concerning changes in policy
6. Process objectives - concerning increase in participation and working together
7. Environmental objectives - concerning changing the environment to make it more healthy

DIFFERENT LEVELS OF OBJECTIVES -1

There are several levels of objectives associated with programme planning and they are sequenced or placed in a hierarchical order:

1. Process/Administrative Objectives

- Are the daily tasks, activities and work plans that lead to the accomplishment of all other levels of objectives
- Focus on all programme inputs

DIFFERENT LEVELS OF OBJECTIVES -2

2. Learning Objectives

- Second level of objectives
- They are the educational or learning tools that are needed in order to achieve the desired behaviour change
- Includes 4 types of objectives - awareness, knowledge, attitude and skill development

DIFFERENT LEVELS OF OBJECTIVES -3

3. Action/Behavioural and Environmental Objectives

- Action/behavioural objectives describes the behaviours or actions in which the target population will engage (e.g. adherence to regular exercise, coping with stress, taking preventive actions etc)
- Environmental objectives outline the non-behavioural causes of a health problem that are present in the social, physical or psychological environment (e.g. state of the physical environment, the social environment or the psychological environment)

DIFFERENT LEVELS OF OBJECTIVES -4

4. Programme Objectives

- The ultimate objectives of a programme and are aimed at changes in health status, social benefits, or quality of life
- Are outcome or future oriented
- If these objectives are achieved, then thr programme goal is achieved
- Commonly written in terms of reduction of risk, physiologic indicators, sign and synptoms, morbidity, disability, mortality or quality of life measures

ELEMENTS OF AN OBJECTIVE -1

- To ensure that an objective provide direction and be useful in the evaluation process, it must be written in such a way that it:
  - can be clearly understood
  - states what is to be accomplished, and
  - is measureable

ELEMENTS OF AN OBJECTIVE -2

- To ensure that an objective is useful, it should include the following elements:
    1. The outcome to be achieved, or what will change
    2. The conditions under which the outcome will be observed, or when the change will occur
    3. The criterion for deciding whether the outcome has been achieved, or how much change
    4. The target population, or who will change

ELEMENTS OF AN OBJECTIVE -3

First Element: Outcome *(what?)*

- defined as the action, behaviour, or something else that will change as a result of the programme
- in a written objective the outcome is usually identified as the verb of the sentence
- thus words such as *apply, build, compare, demonstrate, evaluate, exhibit, judge, perform* and *test* would be considered outcomes
- not all verbs would be considered appropriate outcomes for an objective - must be measureable and observable
- avoid verbs like *appreciate, know, internalize* and *understand*

ELEMENTS OF AN OBJECTIVE -4

Second Element: Conditions *(when?)*

- the conditions under which the outcome will be observed, or when it will be observed
- typical conditions found in objectives might be:
  - "upon completion of the exercise class"
  - "by the year 2020"
  - "after reading pamphlets and brochures"
  - "orally in class"
  - "when asked to respond by the facilitator"
  - "one year after the programme"
  - "by May 15th"

ELEMENTS OF AN OBJECTIVE -5

Third Element: Criterion *(how much?)*

- criterion for deciding when the outcome has been achieved, or how much change will occur
- the purpose of this element is to provide a standard by which the programme planner can determined if an outcome has been performed in an appropriate and /or successful manner
- examples might include:
  - "to no more than 105 per 1,000"
  - "with 100% accuracy"
  - "according to the criteria developed by the Malaysian Heart Assocation"

ELEMENTS OF AN OBJECTIVE -6

Fourth Element: Target Population *(who?)*

- last element that needs to be included in an objective is mention of the target population or who will change
- examples are:
  - "1,000 teachers"
  - "all employees of the company"
  - "those residing in Subang Jaya"

STAGE 3:

DECIDING THE BEST WAY OF ACHIEVING THE AIMS

STAGE 3: DECIDING THE BEST WAY OF ACHIEVING THE AIMS -1

There is no one best way for health promotion as a whole. Some factors to consider include:

- Which methods are the most appropriate and effective for your aims and objectives?
- Which methods will be acceptable to the consumers?

STAGE 3: DECIDING THE BEST WAY OF ACHIEVING THE AIMS -2

- Which methods will be easiest?
- Which methods are cheapest?
- Which methods are the most acceptable to the people involved?
- Which methods do you find comfortable to use?

STAGE 4:

IDENTIFY RESOURCES

STAGE 4: IDENTIFY RESOURCES -1

- What resources are you going to use?
- You need to clarify:
  - what resources are already available
  - what you are going to need
  - what additional resources you are going to have to acquire, and
  - whether you need money

STAGE 4: IDENTIFY RESOURCES -2

A number of different kinds of resources can be identified:

1. **You:**

Your experience, knowledge skills, time, enthusiasm and energy are a vital resource

2. **People who can help you:**

Identify all the people with something to offer.

STAGE 4: IDENTIFY RESOURCES -3

3. Your client or client group or ex-client:

Clients may have knowledge, skills, enthusiasm, energy and time which can be used to build upon.

STAGE 4: IDENTIFY RESOURCES -4

4. **People who influence your client or client group:**

   These may include clients' relatives, friends, volunteers, patients associations and self-help groups. It may also also be possible to harness the help of significant people who are regarded as opinion-leaders or trendsetters (political figures, religious leaders or pop stars)

STAGE 4: IDENTIFY RESOURCES -5

5. Existing policies and plans

Find out if there is already an existing policy promoting the health problem you are going to work with. If there is, you can use it to back up the work you plan to do. Also find out whether your work fits into national strategies for health

STAGE 4: IDENTIFY RESOURCES -6

6. Existing facilities and services

Find out what facilities already exist and whether these are fully utilized.

7. Material resources

These might include leaflets, posters, display/publicity materials, rooms, space, seats, audio-visual materials and teaching/learning materials.

STAGE 5:

PLAN EVALUATION METHODS

STAGE 5: PLAN EVALUATION METHODS -1

- How will you know whether your health promotion is successful?
- And how will you measure success?
- On a large scale, sophisticated research is required but modest methods of evaluating everyday practice of health promotion can, and should, be used routinely

STAGE 5: PLAN EVALUATION METHODS -2

- Evaluation means making a judgement about the value of a health promotion activity
- Evaluation is the process of assessing what has been achieved and how it has been achieved
- It means looking critically at the activity or programme, working out what was good about it, and how it could be improved

STAGE 5: PLAN EVALUATION METHODS -3

- The judgement can be about outcome (what has been achieved): whether you achieved the objectives which you set
- Judgement can also be about the process (how it has been achieved): whether the most appropriate methods were used, whether they were used in the most effective way, and whether they gave value for money

Why Evaluate? -1

- To improve your own practice: next time you do something similar, you will build on your successes and learn from any mistakes

- To help other people to improve their practice: if you tell people about your experiences, it can help them to improve their practice as well. It is vital to publicise failures as well as successes, to prevent other people re-inventing square wheels

Why Evaluate? -2

- To justify the use of resources that went into the work, and to provide evidence to support the case for doing this work in future
- To give you the satisfaction of knowing how useful or effective your work has been
- To identify any unplanned or unexpected outcomes that could be important

Assessing The Outcome

Achievement of objectives in terms of specific changes stipulated:

- Changes in health awareness
- Changes in knowledge or attitude
- Behaviour change
- Policy changes
- Changes to the physical environment
- Changes in health status

ASSESSING THE PROCESS

- This means looking at what when on during the process of implementation, and making judgements about it
- Three key for assessing the process:
    - Measuring the input
    - Self-evaluation
    - Feedback from other people

STAGE 6:

SET AN ACTION PLAN

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- Having known or identified:
  - what we are trying to achieve
  - the best way to go about it
  - how to evaluate it
  - what resources we need
- A detailed plan of action can be worked out specifying who will do what, with what resources and by when

STAGE 7:

ACTION!

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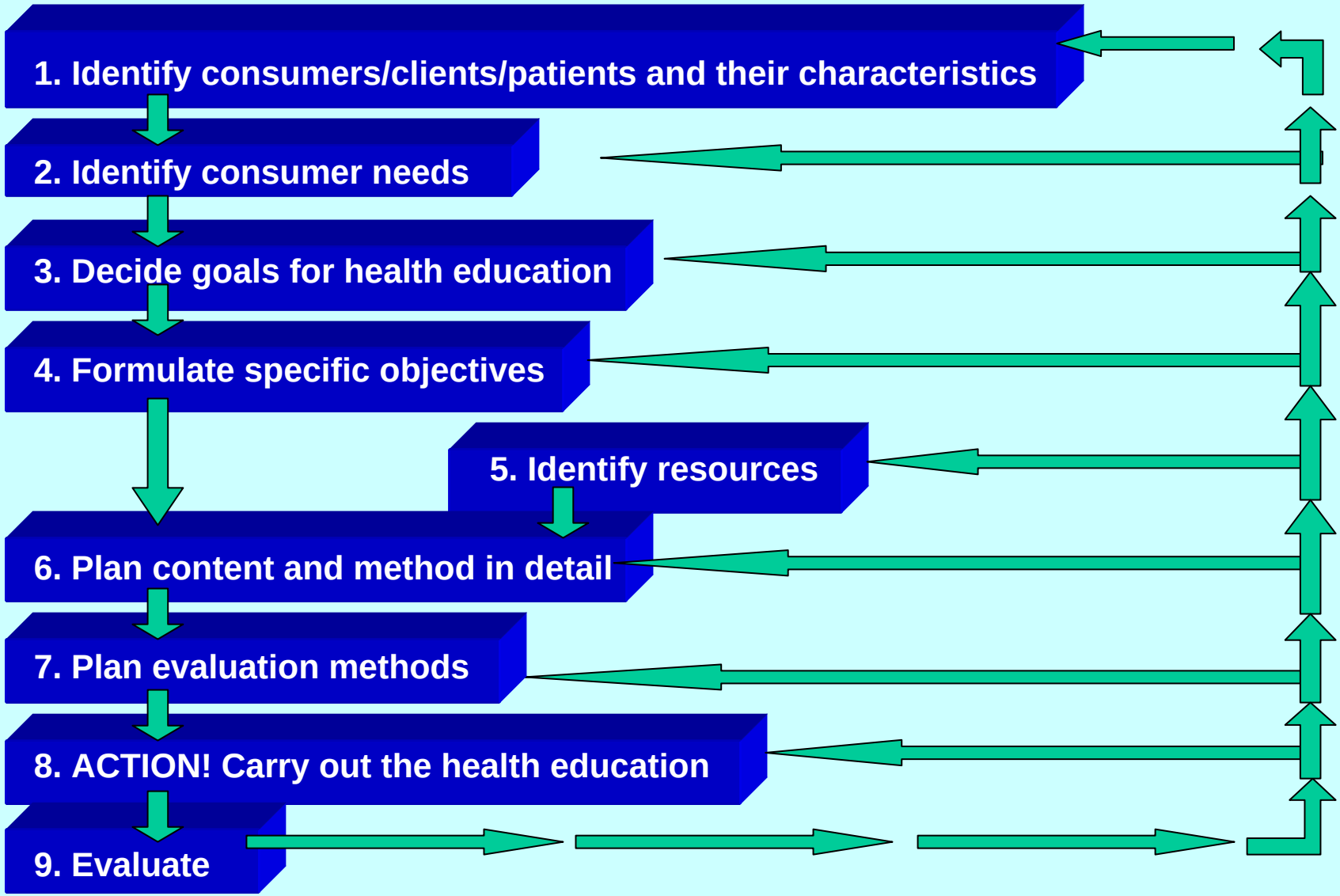
This is the stage in which the actual health promotion work is done, remembering to evaluate the process as we go along

EWLES AND SIMNETT PLANNING MODEL (1992)



TONES' PLANNING MODEL (1974)

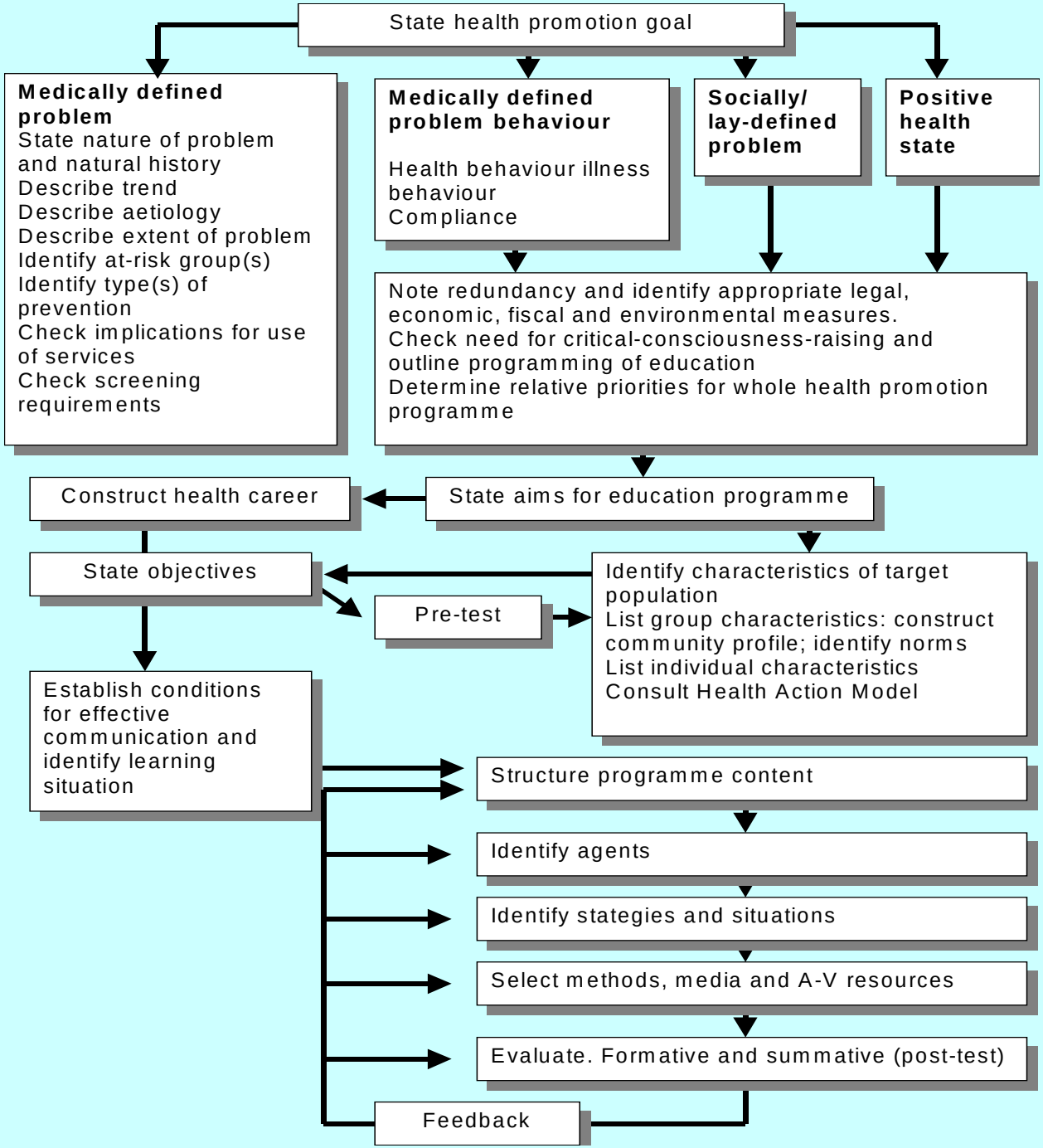
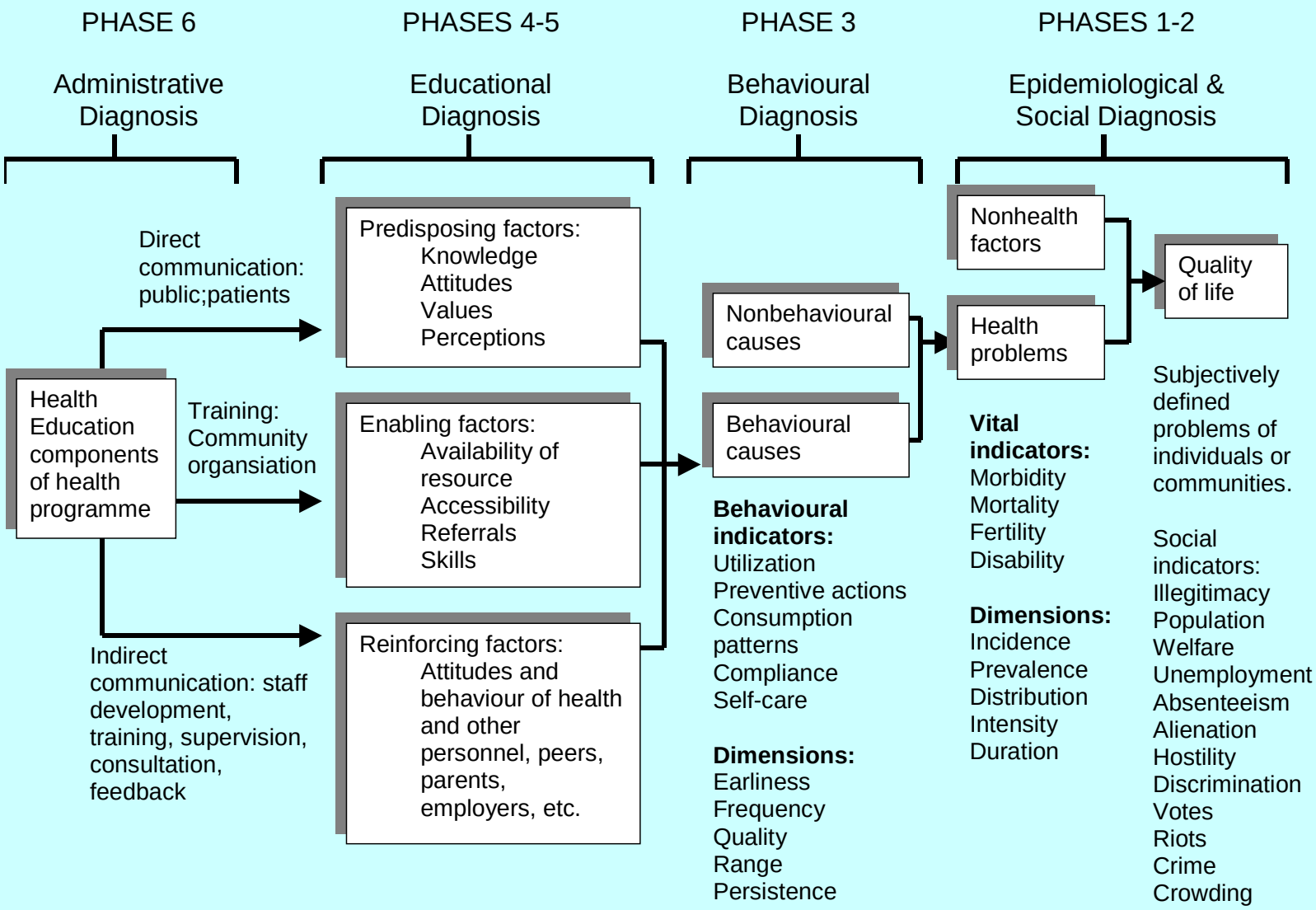


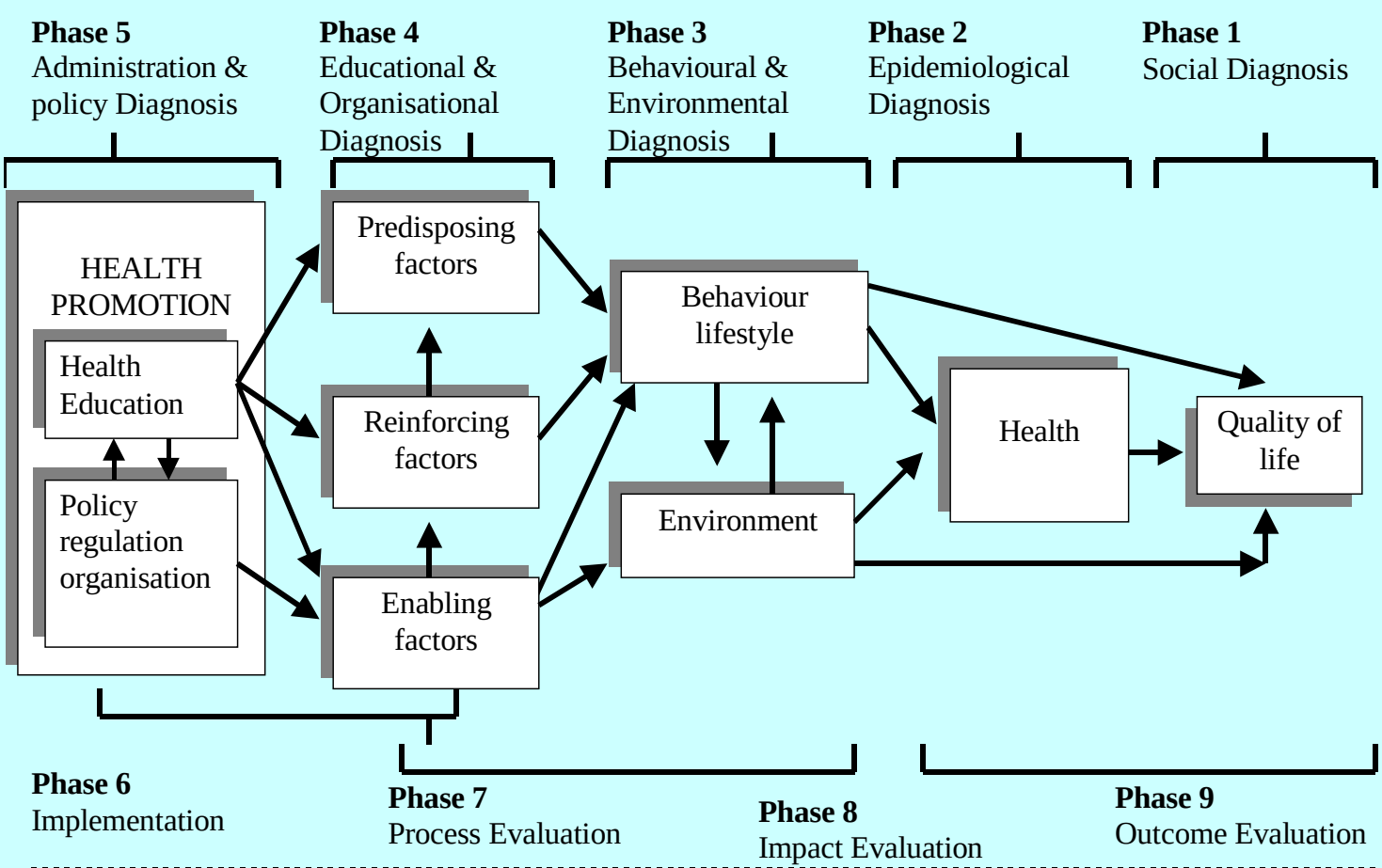
DIAGRAM OF PRECEDE MODEL



Source: *Theory and Practice in Health Education* bry H.S. Ross and P.R. Mico, p.207

From PRECEDE to PROCEED

PRECEDE



PROCEED

Source: *Health Promotion Planning: An Educational and Environmental Approach* by Lawrence W. Green and Marshall W. Kreuter.