



Instruments for evaluating public health promotion policies: an integrative review

Instrumentos para avaliação de políticas públicas voltadas à promoção da saúde: uma revisão integrativa

Instrumentos para evaluación de políticas públicas volcadas a la promoción de la salud: una revisión integrativa

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ABSTRACT

Objective: To investigate the assessment tools available to evaluate public policies aimed at health promotion. **Methods:** This is an integrative literature review, using the Scientific Electronic Library Online and Virtual Health Library (Biblioteca Virtual em Saúde) databases, and consulting the gray literature, in English, Portuguese, and Spanish, in the period between 2010 and 2020, with the descriptors being consulted in MeSH and DeCS. **Results:** A total of 828 publications were found, of which 18 met the inclusion criteria. Different methodologies applied to the evaluation process were identified, such as quantitative and multidimensional, although there is a lack of instruments for monitoring and evaluation in health promotion. The development of impact and results assessments stands out, especially in primary health care, however, there was a need to include structures and processes in the methodologies. **Conclusion:** It is extremely important to recognize the importance of intersectorality, participatory methodologies and the development of evaluative models that consider the articulation of quantitative and qualitative methodologies, as well as the inclusion of sociopolitical issues inherent to the different realities where intra-sectoral and intersectoral health promotion policies are developed. However, the complexity of evaluating health promotion policies did not allow the identification of an evaluation standard, making it essential to develop new studies aimed at developing effective evaluation strategies related to health promotion.

Descriptors: Program Evaluation; Intersectoral Collaboration; Public Policy; Health Promotion.

RESUMO

Objetivo: Investigar os instrumentos disponíveis para avaliação de políticas públicas voltadas à promoção da saúde. **Métodos:** Trata-se de uma revisão integrativa de literatura, por meio das bases de dados Scientific Electronic Library Online e Biblioteca Virtual em Saúde, e consulta à "literatura cinza", nos idiomas inglês, português e espanhol, no período compreendido entre os anos 2010 e 2020, sendo consultados os descritores no MeSH e DeCS. **Resultados:** Foram encontradas 828 publicações, sendo 18 aprovados pelos critérios de inclusão. Identificaram-se distintas metodologias aplicadas para o processo avaliativo, tais como quantitativas e multidimensionais, embora haja uma insuficiência de instrumentos para o monitoramento e avaliação em promoção da saúde. Destaca-se o desenvolvimento de avaliações de impacto e de resultados, especialmente na atenção primária à saúde, porém, verificou-se a necessidade da inclusão de estruturas e processos nas metodologias. **Conclusão:** É de suma importância o reconhecimento da importância da intersectorialidade, de metodologias participativas e da elaboração de modelos avaliativos que considerem a articulação de metodologias quantitativas e qualitativas, bem como a inclusão de questões sociopolíticas inerentes às distintas realidades onde são desenvolvidas as políticas intrasectoriais e intersectoriais de promoção da saúde. No entanto, a complexidade da avaliação das políticas de promoção da saúde não permitiu a identificação



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de um padrão avaliativo, sendo fundamental o desenvolvimento de novos estudos visando o desenvolvimento de estratégias de avaliação efetivas relacionadas à promoção da saúde.

Descritores: Avaliação de Programas e Projetos de Saúde; Colaboração Intersectorial; Política Pública; Promoção da Saúde.

RESUMEN

Objetivo: Investigar los instrumentos disponibles para evaluación de políticas públicas volcadas a la promoción de la salud. **Métodos:** Se trata de una revisión integrativa de literatura, por medio de las bases de datos Scientific Electronic Library Online y Biblioteca Virtual en Salud, y consulta a la "literatura gris", en los idiomas inglés, portugués y español, en el período comprendido entre 2010 y 2020, siendo consultados los descriptores en MeSH y DeCS. **Resultados:** Fueron encontradas 828 publicaciones, 18 de ellas aprobadas por los criterios de inclusión. Fueron identificadas distintas metodologías aplicadas para el proceso evaluativo, tales como cuantitativas y multidimensionales, aunque haya una insuficiencia de instrumentos para el monitoreo y evaluación en promoción de la salud. Se enfoca el desarrollo de evaluaciones de impacto y de resultados, especialmente en la atención primaria a la salud, sin embargo, se verificó la necesidad de inclusión de estructuras y procesos en las metodologías. **Conclusión:** Es de suma importancia el reconocimiento de la importancia de la intersectorialidad, de metodologías participativas y de la creación de modelos evaluativos que consideren la articulación de metodologías cuantitativas y cualitativas, como también la inclusión de cuestiones sociopolíticas inherentes a las distintas realidades donde son desarrolladas las políticas intrasectoriales e intersectoriales de promoción de la salud. Sin embargo, la complejidad de la evaluación de las políticas de promoción de la salud no permitió la identificación de un modelo evaluativo, siendo fundamental el desarrollo de nuevos estudios objetivando el desarrollo de estrategias efectivas relacionadas a la promoción de la salud.

Descritores: Evaluación de Programas y Proyectos de Salud; Colaboración Intersectorial; Promoción de la Salud.

INTRODUCTION

Public Policies correspond to a multidisciplinary field of knowledge, which includes theories built on Sociology, Political Science and Economics, among others. Due to the economic and social repercussions, its theories seek to explain the interrelationships between the State, politics, economy and society. In this sense, through the formulation of public policies, democratic governments translate their purposes into programs and actions that will produce results in the real world⁽¹⁾. In this field, currently, the term "healthy public policies" represents integrated approaches, seeking to improve health and reduce health disparities in decisions related to policies, programs and projects carried out in the public and private sectors⁽²⁾.

Health promotion constitutes an international movement and a promising strategy for tackling the multiple health problems that affect human populations, based on a broad conception of the health-disease process and its determinants. Furthermore, it proposes the articulation of technical and popular knowledge, as well as the mobilization of institutional and community resources, public and private, to confront and resolve it. It foresees a combination of strategies related to State action, through "healthy public policies", developed from complementary mechanisms, which include legislation, fiscal measures, taxation, organizational changes and coordinated intersectoral actions that aim for equity in health, more equitable distribution of income and social policies⁽³⁾. In this sense, health promotion actions consider that political, economic, social, cultural, environmental, behavioral and biological factors can favor or harm health⁽⁴⁾.

The National Health Promotion Policy (PNPS) was established through Ordinance MS/GM No. 687, of March 30th, 2006, ratifying the Brazilian State's commitment to expanding and qualifying health promotion actions in services and in management of the Unified Health System (SUS). It then began to be included in the strategic agenda of SUS managers and in National Health Plans, expanding the possibilities of existing public policies. Between 2013 and 2014, it was revised, in a process initiated by the Ministry of Health and coordinated by the Health Surveillance Secretariat, through the Policy Steering Committee, in partnership with the Pan American Health Organization (PAHO) and the Group Health Promotion Theme of the Brazilian Public Health Association (ABRASCO)⁽⁵⁾.

The new version of the PNPS was the result of a review process, carried out in a broad, democratic and participatory manner, which points to the need for intrasectoral and intersectoral articulation with other public policies, and social participation, due to the impossibility of the health sector respond alone to facing the determinants and conditions of health⁽⁶⁾.

After the decision-making process, a public policy does not end with its implementation and execution, being subject to monitoring and evaluation systems⁽¹⁾. The evaluation aims to ensure compliance with the principles and

guidelines of public policy, seeking to verify its effectiveness. In other words, it seeks to verify the result on the health of individuals, which impacts the quality of life of the population⁽⁷⁾.

In the management process, evaluation has the role of providing elements that support decision-making, contributing to increasing the effectiveness and efficiency of the activities carried out. Therefore, health assessment must be directed to the main needs, respecting the constitutional principles of the country's health policy, and its development must be conducted in order to build the viability of implementing actions resulting from the decisions taken⁽⁸⁾.

The current version of the PNPS points out, as the responsibility of all spheres of management in the health sector, the establishment of instruments and indicators for the planning, monitoring and evaluation of programs, plans, projects and actions related to health promotion^(6,9). However, it is essential to combine different methods and approaches for the evaluation of health promotion strategies, which allow the analysis of their theoretical foundation as a social practice, the implementation process, impacts and results⁽⁹⁾.

However, evaluation approaches have been limited⁽¹⁰⁾, with few studies identifying currently existing instruments to evaluate health promotion actions⁽¹¹⁾. Given the above, the objective of the present study was to investigate the instruments available for evaluating public policies aimed at health promotion.

METHODS

This is an integrative literature review, as this method allows the inclusion of a wide variety of study designs, and makes it possible to synthesize the results obtained in research on a given topic or issue, in a systematic, orderly and comprehensive manner, combining data from theoretical and empirical literature, providing a more complete understanding of the topic of interest⁽¹²⁾.

"Integrative review is a research method that allows the search, critical evaluation and synthesis of available evidence on the topic investigated"⁽¹³⁾. The six phases of the integrative review were followed⁽¹⁴⁾: elaboration of the guiding question; literature search or sampling; data collection; critical analysis of included studies; discussion of results; and presentation of the review.

Initially, the study question was created: "What are the health promotion assessment instruments aimed at public policies?", based on the acronym PICO⁽¹⁵⁾: Population (P): Public Policies; Interest/phenomenon of interest (I): Health Promotion; Context (Co): assessment instruments. To locate the terms and search strategy, the descriptors were consulted in the Medical Subject Headings (MeSH) and Health Sciences Descriptors (DeCS) – Table I, in English, Portuguese and Spanish.

Table I – Descriptors used and related terms

| | MeSH | DeCS – english/espanish/portuguese | Synonyms – english/portuguese |
|-----------|--------------------|--|---|
| P | Public Policy | Public Policy Política Pública Política Pública | Public Policies Políticas Públicas |
| I | Health Promotion | Health Promotion Promoción de la Salud Promoção da Saúde | Promotion of Health Health Promotions Promoção em Saúde |
| Co | Program Evaluation | Program Evaluation Evaluación de Programas y Proyectos de Salud Avaliação de Programas e Projetos de Saúde | Program Evaluations Program Effectiveness Avaliação de Programa Avaliação de Programas Avaliação de Projetos Avaliação |

Source: The authors.

MeSH – Medical Subject Headings; DeCS – Health Sciences Descriptors.

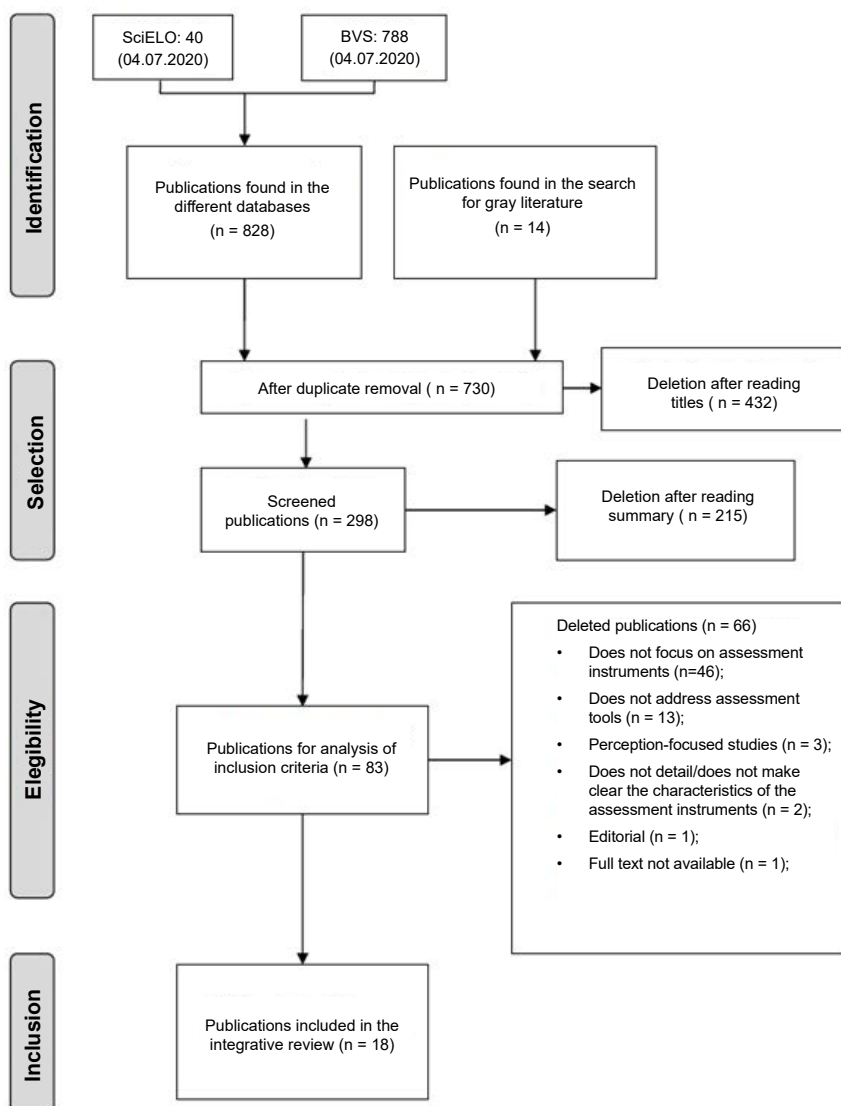
P – Population; I – Interest/phenomenon of interest; Co – Context.

The search, carried out in the Scientific Electronic Library Online (SciELO) and Virtual Health Library (VHL) databases (which includes LILACS, MEDLINE, among other databases), in July 2020, considered scientific articles and other documents published between the years 2010 and 2020. In addition, searches were carried out in “gray literature”, by consulting Google Scholar. The search strategy terms were adapted to suit the indexes of each database.

The inclusion criteria defined for the selection of publications were: publications that make it possible to indicate instruments, mechanisms or evaluation strategies in health promotion, focused on public policies; that include impact assessment tools for health promotion programs; studies that present evaluations of intersectoral actions; case studies; and articles available in full, in English, Portuguese and Spanish. Duplicate studies, letters, editorials and studies evaluating specific actions were excluded.

The data was exported to EndNote Web, and duplicate publications were excluded, as well as publications that did not meet the inclusion criteria, as well as those that met the exclusion criteria. First, exclusion was carried out by titles, by two independent reviewers, followed by exclusion after reading the abstracts. Subsequently, the publications were read in full, ending with the selection of studies to be included in the integrative review. The study selection process was compiled in a flowchart according to PRISMA – *Preferred Reporting Items for Systematic Reviews and Meta-Analyses*, (<http://prisma-statement.org/PRISMAStatement/FlowDiagram>), as demonstrated in Picture 1.

Picture 1 – Study selection flowchart



Source: The authors. Model adapted from the PRISMA flowchart.

RESULTS

After the duplicates removal stage, 730 titles remained; with 83 texts retrieved for the full reading stage, and 18 articles included for the preparation of this integrative review.

Table II presents the articles selected for the study. The authors, year of publication, title of the article and information about the study carried out were identified.

Table II – Articles selected for the integrative review

| Author(s), year of publication | Title | Study information |
|--|--|---|
| Álvarez Castaño et al., 2015 ⁽¹⁶⁾ | Methods for evaluating large-scale nutritional programs in Latin America: an integrative review | Analysis of 92 evaluations of 40 programs, with the objective of identifying the methodological designs with which nutritional programs in Latin America are being evaluated. Generally, the dimensions assessed include the impact and results of programs and, to a lesser extent, their structure and processes. The types of studies most used to measure impact are quantitative in nature, however, in most cases, the methodological designs were not explained or the evaluation was carried out without an established design. In cases where there was a project related to evaluation, three schemes were found: consistency and results evaluation, multidimensional model and triangulation of methods |
| Alves et al., 2016 ⁽¹⁷⁾ | Health promotion, disease prevention and use of services: evaluation of the actions of a Brazilian health plan operator | Case study, with the objective of exploring the association between carrying out health promotion actions and preventing cardiovascular diseases, with the use of health services and their respective costs, developed by a Brazilian health plan operator, belonging to self-management modality, which adopted the Family Health Strategy (ESF) |
| Barata, 2013 ⁽¹⁸⁾ | Epidemiology and public policies | Discusses the importance of epidemiology in the formulation, implementation and evaluation of public health policies |
| Bhatia and Corburn, 2011 ⁽¹⁹⁾ | Lessons from San Francisco: health impact assessments have advanced political conditions for improving population health | The health impact assessment (HIA) in San Francisco (California, United States) was addressed. Through AIS, the Department of Public Health has enhanced its experience in analyzing and communicating the impacts of public policies, and developed new knowledge about how to engage with and influence diverse sectors. Among the steps followed in impact assessments, the following stand out: screening; definition of scope and which analytical approaches to be used; assessment; communication; and monitoring |
| Bueno et al., 2013 ⁽¹¹⁾ | Governance, sustainability and equity in the health plan of São José dos Pinhais, Brazil | A theoretical-conceptual model for human development and health promotion, developed by the authors, was applied to evaluate the municipal health policy formulated in the health plan of São José dos Pinhais/PR (Brazil). The model encompasses the concepts of governance, sustainability and equity. Furthermore, it correlates three possible interfaces between the concepts covered, categorized as: 1) Government and State policies; 2) balance of power; and, 3) inclusive processes and impactful results |
| Guzmán-Barragán et al., 2020 ⁽²⁰⁾ | Evaluation of the implementation of the healthy school strategy in the Ibagué neural zone: case study | Evaluation of the implementation of the Healthy School Strategy, in rural educational institutions in the municipality of Ibagué (Colombia), through the construction of a logical model and the definition of evaluative criteria in relation to healthy environments, public policies and plans for healthy schools, participation social, empowerment and health education |

| | | |
|---|--|--|
| Hoehner et al., 2012 ⁽²¹⁾ | Page Avenue health impact assessment: Building on diverse partnerships and evidence to promote a healthy community | Case study on AIS, carried out on Page Avenue (Missouri, United States), with the objective of describing the process of a comprehensive evaluation, led by an interdisciplinary academic team, with community partners, in addition to discussing lessons learned and unexpected results |
| Kusma et al., 2012 ⁽⁹⁾ | Health promotion: evaluative perspectives for oral health in primary health care | In addition to carrying out a systematization of the literature in the field of evaluating the effectiveness of oral health promotion strategies, the authors proposed a theoretical model and a matrix of descriptors contextualized in primary health care (PHC) practices, exploring the referential basis of the pillars and values of health promotion, considering practices with the potential to reduce situations of fragility in population groups, combat inequities and incorporate participation in health management |
| Lima and Vilasbôas, 2011 ⁽²²⁾ | Implementation of intersectoral social mobilization actions to control dengue fever in Bahia, Brazil | Evaluative research, through a single case study, of an exploratory nature, with the objective of analyzing the process of implementing intersectoral actions of the State Committee for Social Mobilization for the Prevention and Control of Dengue in Bahia (Brazil). A logical model was developed to guide the construction of criteria used to estimate the degree of implementation of these actions (implemented, partially implemented or not implemented) |
| Magalhães, 2014 ⁽²³⁾ | Implementation of multi-strategic programs: a proposal for an evaluation matrix | Proposal for a methodological matrix, developed from the analytical framework of theory-based evaluation, which seeks to analyze the validity of the concepts that link processes and results, and an exploratory, qualitative case study of the federal income transfer program Bolsa Família, with the aim of contributing to the evaluation of the implementation of interventions aimed at promoting health, food security and poverty reduction |
| Malta et al., 2014 ⁽²⁴⁾ | National Health Promotion Policy, description of the implementation of the physical activity and body practices axis, 2006 to 2014 | With the aim of describing the implementation of the body practice/physical activity axis, information contained in ordinances, institutional documents, websites, books and published articles was consulted, to analyze the actions implemented according to the following axes: strengthening health promotion in the SUS; intersectoral coordination and partnerships; promotion of physical activity/body practices in the territory; evaluation and monitoring |
| Malta et al., 2014 ⁽²⁵⁾ | The implementation of the priorities of the National Health Promotion Policy, a review, 2006 to 2014 | Analysis of the PNPS regarding the implementation of its priority agenda, through a review study that sought to answer the scope (or not) of the actions and activities registered in the PNPS, in relation to the themes defined as priorities in 2006 |
| Oliveira et al., 2017 ⁽²⁶⁾ | Assessment matrix for health promotion programs in socially vulnerable territories | Cross-sectional, qualitative and quantitative study, through participant observation, interviews and census, in 559 households registered with the ESF in the municipality of Laje do Muriaé/RJ (Brazil), aiming at the development and application of an evaluation matrix for programs aimed at health promotion in territories of social vulnerability |
| Silveira Filho et al., 2016 ⁽²⁷⁾ | Potential effectiveness of oral health promotion strategies in primary health care: comparative study between capitals and regions of Brazil | Application of the Tool for Assessing the Effectiveness of Oral Health Promotion Strategies ⁽⁹⁾ , through the assessment of the potential effectiveness of oral health promotion strategies, developed by PHC teams in Brazilian capitals and macro-regions |

| | | |
|---|---|---|
| Sosa García et al., 2019 ⁽²⁸⁾ | Indicators for evaluating the impact of health promotion for older adults in primary care | Bimodal study, through document analysis and information triangulation technique, with the objective of determining indicators for impact assessment in health promotion interventions with elderly people in PHC |
| Suárez Álvarez et al., 2018 ⁽²⁹⁾ | Tools for evaluating the health impact of public health programs and community interventions from an equity perspective | The methodology used in the design and application of two tools to assess the impact on the social determinants of health and equity in health programs and community interventions in the Principality of Asturias (Spain) was described. |
| Thomson and Thomas, 2012 ⁽³⁰⁾ | External validity in healthy public policy: application of the RE-AIM tool to the field of housing improvement | Application of an external validity item assessment tool, developed by Green & Glasgow, in 39 studies that evaluated the impacts of improving housing on health. The tool was adapted to the topics, and criteria were developed to define the level of the report (to a large extent, to some extent, unclear, not at all) |
| Venancio et al., 2016 ⁽³¹⁾ | Association between the degree of implementation of the Amamenta Brasil Network and breastfeeding indicators | Evaluation of the implementation of the Amamenta Brasil Network and its impact on breastfeeding indicators, through the analysis of the relationship between different levels of implementation and some breastfeeding indicators, in children under one year of age, including 56 Basic Health Units (UBS) of three Brazilian municipalities |

Source: The authors.

DISCUSSION

Unlike most clinical studies, the theory, goals and objectives of a public policy are not always clear⁽³²⁾. Many studies omit follow-up assessments, in addition to not discussing the implications of the results for public policies⁽³³⁾. According to the authors⁽³⁴⁾, in the field of evaluation, there is a lack of studies and information that is useful and accessible to professionals on the effectiveness of health promotion interventions.

Among the fields of action for epidemiology, the evaluation of health systems, policies, programs and services stands out, in addition to the health impact of services, technologies and other actions⁽³⁵⁾. For the elaboration, implementation and evaluation of public health policies, it is important to remove the focus from individuals, understanding the complexity of mediations between the different dimensions of social life⁽¹⁸⁾.

In the assessment process, epidemiological knowledge can be useful in analyzing predicted and achieved impacts. The evaluation of public health policies can be carried out through three different modalities: adequacy assessment, plausibility assessment and probability assessment. Furthermore, in the impact assessment stage, epidemiology can contribute to the improvement and application of new methodologies, such as the development of scenarios that assist the decision-making process, projecting possible consequences of adopting different courses of action. Furthermore, the author⁽¹⁸⁾ highlights the need to articulate epidemiological knowledge with other knowledge, with the aim of guaranteeing better health conditions for the population.

Among the studies that presented potential evaluation instruments, the Conceptual Model for Human Development and Health Promotion⁽¹¹⁾ can be used as an instrument for evaluating public policies aimed at human development and health promotion. Successful promotion occurs at the intersection between the six categories of concepts (governance, sustainability and equity) and interfaces (Government and State policies; balance of power; inclusive processes and impactful results) between these concepts⁽³⁶⁾.

In the model proposed by a group of researchers⁽⁹⁾, applied through a tool for evaluating the effectiveness of oral health promotion strategies, the pillars of health promotion include equity, participation and sustainability, and form the basis theoretical guidelines for indicating assessment values. Values, which comprise the moral anchor for health promotion strategies, include autonomy, empowerment, integrality, intersectorality and governance.

When applying the same tool⁽²⁷⁾, they highlight that the framework for constructing the matrix of evaluation indicators is supported by a theoretical model, which emphasizes the pillars and values of health promotion, applied to oral health. The tool is made up of 23 indicators that are grouped into three dimensions (oral health, healthy public policies and human and social development), and allows you to indicate the potential of a given strategy in promoting oral health⁽³⁷⁾.

To prepare the evaluation matrix⁽²³⁾, the following steps were carried out: systematization of information from a qualitative exploratory case study; analysis of the main theoretical elements, program components and operationalization strategies present in local dynamics; elaboration and organization of analysis dimensions and evaluative questions in a methodological matrix. The interview scripts were based on the following dimensions: program theory; implementation, monitoring and evaluation; intersectoral experiences and participatory dynamics. The analysis of documents and normative instruments made it possible to identify the causal models adopted, and conducting interviews made it possible to get closer to the perceptions, interests and motivations of the professionals involved.

By applying an evaluation matrix for programs aimed at promoting health in socially vulnerable territories, the authors⁽²⁶⁾ highlight that the instrument, constructed through qualitative and multidimensional indicators, has the potential to boost quality management, in addition to favoring the internalization of good public management practices and the continuous improvement of work processes, with a view to confronting situations of exclusion and inequities, based on the identification of the determinants of the health-disease process. Descriptors that meet the PNPS Principles were established, as well as a diagram of the process of constructing instruments for evaluating health promotion programs.

After reviewing and systematizing the foundations of health promotion of national and international reference, and the ideas expressed in legal documents and Cuban public policies, Sosa García et al.⁽²⁸⁾ identified that there is a lack of methodological instruments for evaluating the impact of community intervention strategies related to promoting the health of elderly people in primary care. Still in relation to impact assessments, Bhatia and Corburn⁽¹⁹⁾ highlight that AIS can be seen as opportunities to build new governance arrangements that can make public decisions that have a positive impact on health. According to the authors, the inclusive and meaningful involvement of stakeholders in the evaluations created opportunities to affect private organizational networks and enabled greater trust between community organizations. In this way, the combination of an inclusive HIA process and transparency, in presenting the strengths and weaknesses of the evidence, increased awareness of the social determinants of health among government institutions and the population.

Hoehner et al.⁽²¹⁾ highlight, in relation to the AIS case study, that the Page Avenue impact assessment was the first known assessment to be carried out in the Midwestern United States, focusing on the remodeling plan for a major public road. This plan included the construction of a new supermarket, followed by residential and commercial remodeling, as well as improvements to the road infrastructure. The primary objective of the impact assessment was to influence project plans to improve safety, mobility, and access to recreational facilities and healthy foods for families and youth, as well as facilitate cross-sector partnerships aimed at promoting health, as well as increase awareness among decision makers and stakeholders regarding the numerous factors that affect health.

The AIS is a tool that makes it possible to identify impacts and outline measures to minimize certain impacts, enhancing opportunities for improvements in health through development processes. The tool can support decision makers on issues related to measures for projects, policies, plans and programs that aim to prevent, mitigate and monitor significant impacts on human health. In Brazil, at each stage, the actions proposed in the methodology must be linked to the SUS tools. Thus, the steps for applying the methodology include: screening, scope/coverage, identification/data collection, situational analysis, decision making and recommendations, and monitoring⁽³⁸⁾.

An AIS can generate evidence that supports or opposes a specific decision, or provides support for an alternative decision that is more favorable to health. By participating in an assessment, officials and interest groups can learn about dominant and competing policy objectives, interests of decision makers, concerns of involved communities, limitations of available scientific methods, alternative sources of knowledge, and the operation of government institutions. The San Francisco experience suggests that SIAs can influence public policy, but their effects are mediated in complex ways⁽¹⁹⁾. Although SIA can help move towards healthy public policies, in some situations it can be a less effective tool than alternative approaches. In some contexts, the ideal may be to carry out the SIA after having put in place the preconditions, such as joint goals and definition of priorities, legal agreements or even informal arrangements. These agreements can provide funding, identify needed expertise, and improve access to data⁽²⁾.

To assess the level of implementation of the Amamenta Brasil Network, Venancio et al.⁽³¹⁾ created a score for each UBS, according to compliance with the Ministry of Health's certification criteria. In this sense, implementation evaluations are important, and can estimate positive or negative impacts. For example: low levels of program implementation can impact the proposed results and, consequently, the quality of the services offered, which can raise questions regarding the maintenance (or not) of the investment in a given program⁽³⁹⁾.

A logical model can enable the identification of resources, activities, products and goals of a given program, which can contribute to restructuring in the face of possible management demands⁽⁴⁰⁾. The logical model, developed

by Guzmán-Barragán et al.⁽²⁰⁾, applied in the evaluation of the implementation of the Healthy School Strategy (Ibagué – Colombia), made it possible to understand the structure and architecture of the strategy, identifying the actors, objectives, components, lines of action and expected result. Four criteria were selected from the logical model to evaluate the implementation of the strategy: the school as a healthy environment; public policies and healthy school plans; social participation and empowerment in health; and health education. The assessment of healthy environments at school addressed several aspects, such as environmental risks, infrastructure, hygiene conditions, food, water quality, sanitation, presence of vectors on the premises of educational institutions, and social participation. Thus, considering the multidimensional perspective of health promotion, the authors highlight the importance of intersectoral coordination and governance to act in response to determinants, with the aim of overcoming socioeconomic, political and cultural barriers.

Multiple simultaneous movements were used as a participatory mobilization strategy, which allowed the collective elaboration of the PNPS review in Brazil. However, these movements did not constitute a policy evaluation process, but rather a review process widely debated within the scope of the PNPS Management Committee⁽⁴¹⁾. Regarding PNPS assessments, Malta et al.⁽²⁴⁾ identified that a specific budget line was created, related to health promotion within the scope of the SUS, the inclusion of health promotion in the Multi-Year Plan and the monitoring of indicators in federative pacts. According to the authors, the organization of surveillance of risk and protective factors for chronic diseases made it possible to monitor indicators of physical activity practice, through population surveys, with advances in the evaluation of the effectiveness of physical activity programs, counting on intersectoral partnerships, with emphasis on coordination with the sports/leisure and education sectors. Given this intersectoral perspective, the involvement of different sectors stands out as a way of expanding the scope of the PNPS beyond the health sector, aiming to combat inequities, considering social determinants⁽⁴¹⁾.

Among the PNPS action priorities, themes such as: healthy eating; body practice and physical activity; smoking prevention and control; reduction in morbidity and mortality due to the abusive use of alcohol, other drugs and traffic accidents; preventing violence and encouraging a culture of peace; and promoting sustainable development⁽²⁵⁾. The authors identified initiatives from the Ministry of Health, with the aim of evaluating the effectiveness of health promotion actions, such as evaluations of physical activity programs and the evaluation of the Life in Traffic Project, which provides for intersectoral coordination and integration of networks of urgency and emergency in the territory, in the production of care and in the reduction of morbidity and mortality in traffic.

However, another study⁽⁴²⁾ highlights the lack of formalized indicators for health promotion actions in Brazilian municipalities, as well as the insufficiency of instruments for monitoring and evaluating the PNPS, which may contribute to the invisibility of some results. Given this scenario, there is a need to carry out studies that can contribute to the development of instruments related to the evaluation of health promotion policies, as a way of filling this knowledge gap.

Monitoring and surveillance data constitute an important basis for all stages of the development of actions related to public policies, including the definition of priorities⁽⁴³⁾. Qualitative approaches, which can motivate participation and intersectorality, can contribute to understanding how, why and for whom actions work and produce effects, as well as the capacity of actions and strategies in response to social inequalities that manifest themselves in health⁽³⁴⁾. Intersectorality corresponds to the articulation of different sectors, with the aim of bringing together strengths, potential and resources to solve a common problem. However, despite the coherence between the intersectorality proposal and the expanded conception of the health-disease process, there is little accumulated knowledge about experiences related to intersectoral practices⁽²²⁾.

There are many difficulties in expanding intersectoral actions, such as the fragility of public service teams accessible to communities, as well as the low capacity of primary health care professionals in planning integrated actions with other sectors⁽³⁴⁾. Despite advances, in the face of countless intersectoral proposals, the hegemony of biomedical discourse in the design of health policies still persists⁽⁴⁴⁾. Health promotion can contribute to relativizing this hegemony, as the biomedical, normative, hygienist and authoritarian model holds individuals accountable and blames them, in isolation, for risky behaviors. In this way, individual and community empowerment can be seen as a valid strategy to promote health⁽³⁴⁾, bearing in mind the need to rethink the predominant status of the biomedical model, which has roots in health interventions, in the training of professionals, in the organization of the care network and in the way of conceiving the concept of health⁽⁴⁵⁾. Therefore, the reorientation of health services requires changes in the education and training of professionals⁽⁴⁾, in a process that must also involve continuing education actions.

Teixeira et al.⁽³⁴⁾ reaffirm the importance of evaluation methodologies in the area of health promotion, especially those that can promote greater participation and integration between different sectors and public policies. The feasibility of intersectorality depends on the ability to create and maintain groups and networks that have a shared and cohesive understanding of the social needs of different population segments⁽⁴⁶⁾. Therefore, when implemented

with the aim of strengthening community autonomy, intersectoral actions can contribute to addressing vulnerabilities and improving quality of life. However, the need to advance intersectoral actions constitutes a challenge in the search for the articulation of actions aimed at specific audiences, for example, in the work environment, in the community, in projects aimed at improving urban mobility, as well as the inclusion of people disabled and elderly⁽²⁵⁾.

Despite recognizing the importance of articulations, as strategies to effectively respond to complex problems that impact individual and collective well-being, intersectorality ends up limited to partnerships, with fragile agreements made through referrals, sharing of material and human resources. These factors constitute a challenge for the sustainability of practices, both punctual and short-term, and related to structural issues⁽⁴⁷⁾. To overcome this challenge, the need for legitimized agreements and social participation in controlling the process stands out, manifested through participatory forums, with articulation between public authorities and society, in search of the development of activities that reach different dimensions and political sectors^(3,4).

In relation to the evaluation of programs, the most used method continues to be the quantitative one and, although the evaluation of impact and results continues to be the main objective, most experiences seek to evaluate structures, resources, administrative aspects and processes that support implementation of programs, since, in many cases, they explain or contextualize their results⁽¹⁶⁾. However, the authors maintain that the new reality of social policies in Latin America requires new evaluation approaches, specifically related to the articulation of quantitative and qualitative methodologies, as well as the inclusion of sociopolitical aspects of the processes. Furthermore, the incorporation of actors' perceptions makes it possible to consider the assumption of the effects of programs on the relationship between citizens and the State, considering rights and social empowerment.

In view of the above, the focus on intersectoral actions constitutes a fundamental aspect for tackling complex health problems, in addition to being a privileged object of evaluation in health promotion. The need to overcome the existing dichotomy between two predominant approaches in the field of health promotion is highlighted. One approach focuses on transforming individuals' behaviors and their lifestyles, through educational actions aimed at behavioral risk factors that can be changed, such as smoking, diet and physical activity. On the other hand, the other approach considers health as a result of multiple factors and determinants that are related to quality of life, influenced by the social determinants of health, which include sanitation, good working and housing conditions, education, social support for families, responsible lifestyle, among others. In this approach, health promotion actions are aimed at the community, groups and environment, and not just focused on the individual in isolation. However, the convergence between the two approaches must be observed, through the understanding that lifestyles and individual options are structurally determined by the social context in which individuals are inserted⁽³⁴⁾.

For effective action by those responsible for public health promotion policies to occur, all programs should be evaluated for their effectiveness, efficiency and effectiveness⁽⁴⁸⁾. However, an obstacle to expanding evaluation in decision-making in health services is the fact that its implementation requires resources and time, which makes it difficult to apply to problems that require immediate solutions. In this sense, the ability of evaluation to contribute to the improvement of the decision-making process in health is confronted with the complexity of the field, characterized by multiple conditioning and determining factors⁽⁸⁾. Given this scenario, the existence of accumulated knowledge, resulting from past or previously planned assessments, can contribute to decision making.

Recognition of social groups, which tend to be most affected by interventions, is crucial for expanding the reach of evaluation strategies. In this way, evaluative questions can contribute to the recognition of the limits of the process of integrating actions and obstacles, stimulating the collective appropriation of relevant information, the review of strategies and incremental changes. When considering evaluation as a reflective, contextualized and continuous process, it may be necessary to adapt the questions included in the instruments to local demands and priorities⁽²³⁾.

As limitations of the study, due to the large number of publications identified in the search strategy, Latin American literature was privileged, when considering the SciELO and BVS databases. Therefore, the inclusion criteria may have acted as a limiting aspect in the inclusion of relevant studies on the topic addressed.

FINAL CONSIDERATIONS

Summarizing the findings of this integrative review made it possible to identify the different instruments used to evaluate public policies aimed at promoting health, although a lack of tools for monitoring and evaluation was found. Although the definition of PNPS evaluation mechanisms is foreseen in Brazil, by the three spheres of government, it presents a complexity for the evaluation of public policies aimed at health promotion, inherent to the multiple conditioning and determining factors. Therefore, an evaluative standard was not identified, and it is essential to recognize the importance of intersectorality, participatory methodologies, triangulation of methods, among other

strategies. Impact and results assessments have been developed, however, it is necessary to include structures and processes in the methodologies.

Therefore, the complexity of the evaluation process requires new studies, aiming at the development of effective evaluation strategies related to health promotion, with the development of evaluation models that consider the articulation of quantitative and qualitative methodologies, as well as the inclusion of inherent sociopolitical issues. to the different realities where intrasectoral and intersectoral health promotion policies are developed.

CONFLICTS OF INTEREST

The authors declare that there are no conflicts of interest in carrying out this research.

CONTRIBUTION

Rodrigo Noll Gonçalves and **Jéssica Rodrigues da Silva Noll Gonçalves** contributed to the preparation, study design, data collection, analysis, interpretation and writing and review of the manuscript. **Rafael Gomes Ditterich** and **Roberto Eduardo Bueno** contributed to the preparation, study design, writing and review of the manuscript.

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