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| **Health promotion planning and evaluation in public health units in New Zealand** |
| **Background/Objectives**Health promotion operates in an environment marked by funding constraints, prioritisation and high performance, highlighting the demands on health promoters to demonstrate evidence of effectiveness in planning and evaluation. The objective of the study was to investigate how health promoters in public health units (PHU) in NZ plan and evaluate their programmes. PHU are the largest employer of health promoters in NZ making the findings of this study significant to our understanding of practice in NZ. **Methods**Semi-structured interviews were conducted with health promotion managers (N=9) and senior health promoters (N=8) from 10 PHU in NZ, to investigate their planning and evaluation practice. Interviews were audio recorded, transcribed, coded and thematically analysed. **Results**Health promoters reported a variety of approaches to planning ranging from settings based, community development, intersectoral action to issues-based portfolios. Some health promoters voiced concern about programmes that continued to place responsibility on the individual, others raised the issue of reconciling planning with the realities of practice, specifically in relation to the reduction of health inequalities. Participants appeared less confident discussing evaluation. The various barriers to conducting evaluation were identified as: funding and resource constraints, lack of time, short-term planning and reporting cycles, workforce capacity, lack of access to expertise, gaps in access to locally relevant data and the challenge of evaluating more complex programmes. The general consensus was that practice and support for evaluation could be improved; accordingly, health promoters sought operational and organisational support to strengthen evaluation capacity including more general recognition from funders and clinicians of the value of health promotion. Finally, interviews revealed the tacit expectation that Māori health promoters act as cultural competency advisors and facilitate connections and networks in the community, adding a layer of complexity to their day-to-day responsibilities. **Discussion**Interviews revealed the complexity of negotiating top down and bottom up priorities, multiple needs and a demanding environment that is not always conducive to health promotion values, time frames or approaches. PHUs appeared to largely lack a culture of evaluation at organisational level. Despite this, health promoters demonstrated enthusiasm and professionalism.**Keywords**Health promotion, planning, evaluation |