



Research Report Series

HOW CAN RHP&EO BEST CONTRIBUTE TO THE IUHPE MISSION, GOALS AND OBJECTIVES, GIVEN THE STRATEGIC DIRECTIONS FOR 2007-2013?¹

Torill Bull

**Research Centre for Health Promotion
University of Bergen
Norway**

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¹ This report was commissioned by the IUHPE Vice President for Communications, as a background document to assist in developing the Communications Work Plan for the period 2007.2010. Since this report was completed, publishing of RHP&EO has been discontinued and the production of a new online discussion forum, Views of health Promotion Online, is in process. Details are available at www.iuhpe.org.

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1. INTRODUCTION

What was RHP&EO intended to be, how does the journal of today meet the intentions and in which direction could the journal be developed to help the IUHPE meet its goal? Addressing these questions, the outgoing editorial team produced a very useful evaluation of RHP&EO with a focus on content, visitor web trends, user satisfaction, and editorial challenges [1]. The present report evaluates RHP&EO in the context of the overall online offerings in the fields of health promotion and health education. Together, these two reports are complementary in providing IUHPE with a basis from which to make strategic decisions.

This report addresses the question, *how can RHP&EO best contribute to IUHPE mission, goals and objectives, given the strategic directions for 2007-2013?*

2. RHP&EO

2.1 What was the RHP&EO intended to be?

The RHP&EO is ‘dedicated to international knowledge development and dissemination on health promotion and health education’ (<http://www.rhpeo.org/newfrontpage.html>). The purpose and aim of RHP&EO was initially stated to be ‘to improve the quality of health promotion and health education by publishing regularly *a rating of recent articles* that are relevant for its development, implementation and evaluation’ (italics added) [2]. The initial focus on quality papers was later expanded to include ‘all types of resources’ [2]. The revised terms of reference [2] show that initial ambitions for RHP&EO were high:

‘RHP&EO will be presented as the global contribution of IUHPE and its members to the critical analysis of resources available in the field. It will also be connected to the IUHPE website, considerably improving the profile of the IUHPE. (...)

the specificity of RHP&EO (...) will be to offer a global location where **all types of resources** (...) useful to health promotion and health education practice are critically reviewed by experts from all over the world.’ (Bold face type added).

Another expansion followed: ‘promoting exchanges among IUHPE members on current issues in the field’ [1]. So, intentions were twofold – a review of resources, and a forum for exchange.

2.2 What is the RHP&EO of today?

The content has been organised around four series of contributions by Editorial Board members and readers. The two first series invited selected reviewers to present resources that had been of importance to them as health promoters, the first series looking back and the second series focusing on current resources. The two last series were open to all IUHPE members, publishing opinion papers and reader comments on the following two themes:

- Ottawa 1986-Vancouver 2007: should the Ottawa charter be revisited?
- Renewal of the leadership in health promotion

The RHP&EO has drifted from its aim to provide critical analysis of resources available in the field. A content analysis shows that activity in the journal lately has centred on the open series ‘Ottawa 1986-Vancouver 2007’. The RHP&EO of today is a forum for opinion papers and discussion, which is in harmony with the added purpose: ‘to promote exchange among members on current issues’. The journal of today thus succeeds in meeting the aim of being a forum for exchange, but does not, lately at least, meet the intention of being a review of resources.

The content of the journal is of high quality and the contributors are internationally renowned as resources within the field. Also, web trends show that there is a stable and high number of visitors to the journal, with an average of 5500 per month [1]. A Google search on 'health promotion' from North America on June 11th 2007 returned RHP&EO as the 9th of 115,000,000 entries. It must be added, though, that the same search performed on Google from Norway on Sept 6th 2007 returned RHP&EO as number 118.

An online survey with 70 respondents assessed user satisfaction [1]. Of three options (somewhat satisfied – satisfied – very satisfied), the majority of respondents reported to be 'satisfied' with

- Quality of papers
- Frequency of new publications
- Overall look of website
- Easiness to navigate through website

While being a positive evaluation, there is obviously room for improvement. Comparing the RHP&EO website to other resources on the internet, RHP&EO could gain quality by improving its layout to the highest standards. This is of importance, as the IUHPE communication plan specifies 'image-making' as one of the functions of IUHPE communications. The communication plan states 'recognition and leverage' as objectives of enhanced IUHPE communication, specifically 'positioning of the IUHPE as a major force for global health promotion in all settings' [8]. Also, the terms of reference for RHP&EO state that one function of RHP&EO is to be improve the profile of the IUHPE[2]. Thus, one of the conclusions of this report is that IUHPE should improve the layout of the RHP&EO site with regard to overall appearance and ease of navigation, to strengthen the image of the IUHPE as a modern and serious actor in the field of health promotion online.

The outgoing editorial team has pointed to several important editorial challenges. The most serious of these seems to be the labour-intensiveness of the present journal. To cite the outgoing Editor-in-Chief: 'If no active

recruitment, no publications...' [1]. Also, there still seems to be some way to go before RHP&EO offers linguistic equity for the three official languages of the IUHPE.

3. METHODS AND RESULTS

3.1 Health promotion and health education on the internet

Decisions about what path the RHP&EO should take in the future should be made based on a consideration the overall context of health promotion and education offerings on the internet. What does the World Wide Web offer? In preparation for this report, much effort was expended on assessing and classifying relevant internet resources. The starting point for the assessment of internet resources in the arenas of 'health promotion' and 'health education' was the entering of these keywords in Google searches in English, French and Spanish. All links on at least the first five pages of returned sites were accessed and the content was examined systematically. Next, links were followed from these first websites to other sites. The offerings that were examined are rich and varied. There are many excellent resources, offered by serious actors in the field, in all three languages.

The resources were classified using these 11 variables:

- Global, regional or national
- Trilingual or multilingual, bilingual, one language
- Profit or non-profit
- Government, NGO, INGO
- Pay access or free access
- General or theme specific
- Discussions, newsletters
- Journals of various types (online only, online-paper, free or pay access, general or theme specific, etc.)
- Sites providing tools for help in planning, implementation and evaluation
- Link collections for health promotion and education resources

- Knowledge bases, for instance Cochrane and EPPI

Many of the internet actors can invest far more, financially, in Internet resource development than can an INGO like the IUHPE. The IUHPE can and should leave large fields of online resource establishment to providers who already do an excellent job, while striving to fill empty (or poorly filled) niches that are important from the perspective of fulfilling the IUHPE Mission, goal, objectives and strategies.

3.2 IUHPE mission, goals, objectives and strategies

The figure below depicts the relationships amongst key elements in the IUHPE strategic directions document [6], and the table below provides a breakdown of IUHPE goals and strategies related to knowledge and networking/communication.

Figure 1. Relationships amongst key elements in the IUHPE strategic directions document



Table 1. IUHPE goals and strategies related to knowledge and networking/communication

	KNOWLEDGE	NETWORKING/COMMUNICATION
GOALS AND OBJECTIVES	<ul style="list-style-type: none"> • Broadly accessible evidence-based knowledge and practical experience • Development, translation and exchange of knowledge • Wide dissemination of knowledge • Strong and universally accessible knowledge base for effective, quality health promotion and health education 	<ul style="list-style-type: none"> • Effective alliances and partnerships to produce health promotion and health education outcomes • Strong alliances and partnerships among all sectors based on agreed ethical principles, mutual understanding, and respect. • Improved mechanism for exchange • Global forum for mutual support
STRATEGIES	<ul style="list-style-type: none"> • Carry out, sponsor and publish international reviews of evidence of effectiveness in health promotion and health education – with particular emphasis on drawing together evidence across the world • Proactively seeking research needs from our members who are health promotion and health education practitioners 	<ul style="list-style-type: none"> • Disseminate new learning and knowledge through publications, conferences, training and mentoring • Facilitating interchange among members and regions to further the sharing of lessons learnt across settings, countries and regions • Strengthening the networks of people and institutions involved in health promotion and health education throughout the world, and creating new ones when the need arises.

In the ‘knowledge’ arena, there is focus on having a quality knowledge base that includes both evidence of effectiveness and practical experience, and furthermore draws together evidence from across the world. This knowledge is meant to be disseminated, and the knowledge base needs to be ‘broadly’ and ‘universally’ accessible.

In the ‘networking/communication’ arena, the phrase ‘facilitating interchange’ has high relevance for RHP&EO.

4. DISCUSSION

4.1 Unmet need for a knowledge base that integrates evidence of effectiveness, practical experience, and globally-produced knowledge

According to the above analysis of IUHPE priorities, there is a need for a knowledge base that integrates evidence of

effectiveness, practical experience, and globally produced knowledge. The analysis of current resources on the internet reveals no offering that meets this need. Certainly there are good knowledge bases that are relevant for the IUHPE priorities [e.g.15, 16-19]. These knowledge bases do not meet the IUHPE needs fully, though, as they do not reflect the IUHPE view of what is valued knowledge. The above-mentioned knowledge bases have a strong western perspective and are predominantly, though not totally, based on randomised controlled trials (RCTs). Several of the bases provide their services with a specific goal of supplying evidence of effectiveness to policy-makers in the US and UK.

4.2 Evidence in health promotion and education

According to McQueen [12], evidence does not exist as ‘a thing in it self’, it may be defined in several ways. The search for

evidence depends on, among other things, one's view of science and knowledge, context and one's way of working. In health promotion, the search for evidence has expanded beyond that available only from RCTs (which dominates in online evidence-bases). According to McQueen, every design has strengths and limitations, RCTs are often not appropriate or feasible, and many other interventions and research approaches may prove to be more appropriate. For a global organisation like the IUHPE, with cultural diversity and with equity as a fundamental value, several contexts and ways of working are represented, giving varying views of science and knowledge. This is reflected in the IUHPE goals, objectives and strategies, and should be reflected in the type of evidence collected in a knowledge base.

This is expressed in the Global Programme on Health Promotion Effectiveness' (GPHPE) [10-14]. The GPHPE brochure states that 'The rationale of the Global Programme on Health Promotion Effectiveness is to focus on the principles, models and methods that relate to best health promotion practice, taking regional and cultural diversity into consideration' [10]. It also states 'The GPHPE aims to raise the standards of health promoting policy-making and practice world-wide by:

- *Reviewing and building evidence of effectiveness in terms of health, social economic and political impact*
- *Translating evidence to policy makers, teachers, practitioners, researchers;*
- *Stimulating debate on the nature of evidence of effectiveness*

4.3 How can RHPEO best contribute to IUHPE mission, goals, and objectives, given the strategic directions for 2007-2013?

This report concludes by suggesting two different approaches for the RHP&EO to contribute to IUHPE mission, goals, and objectives, given the strategic directions for 2007-2013. The approaches may be combined or applied individually.

The location of a knowledge base

The IUHPE priorities call for a knowledge base that includes both evidence of effect and practical experience, and furthermore draws together evidence from across the world. The RHP&EO might become the location of a strong knowledge base gradually built by the GPHPE and other IUHPE initiatives. Such a knowledge base might be a practice-to-research and a research-to-practice link. Furthermore, it might provide evidence to policy-makers. It can be argued that the IUHPE as a leading world organisation should be at the forefront in providing a strong knowledge base of evidence on effectiveness. Such a development would be in harmony with the mission of RHP&EO, 'dedicated to international knowledge development and dissemination on health promotion and health education'[3]. This development would also be in harmony with the revised terms of reference adopted by the Board of Trustees [2]:

*'RHP&EO will be presented as the global contribution of IUHPE and its members to the critical analysis of resources available in the field. It will also be connected to the IUHPE website, considerably improving the profile of the IUHPE. (...) the specificity of RHP&EO (...) will be to offer a **global location** where all types of resources (...) useful to health promotion and health education practice are critically*

reviewed by experts from all over the world. (Bold face type added).

As to content, a future RHP&EO might contain GPHPE publications in online versions. Other relevant publications could be disseminated from the site in form of, for instance, abstracts. The site could contain best practices libraries, and it could lead readers to other knowledge bases with different services. In that way, the IUHPE could provide a global portal for evidence of health promotion and education effectiveness, being the natural place to turn to for the best health promotion knowledge. The site could be organised around themes, around regions, or around user groups, for instance policy-makers, practitioners and researchers.

A site for exchange on current issues

A key IUHPE priority is that of 'facilitating interchange among members'. This is also in harmony with the RHP&EO terms of reference of 'promoting exchanges among IUHPE members on current issues in the field' [1]. The RHP&EO of today mainly has this function. New series could be organised around, for instance, themes like the nature of evidence of effectiveness, thus responding to one of the GPHPE strategies of 'stimulating debate on the nature of evidence of effectiveness' [10].

4.4 Knowledge base or forum for exchange?

There are several questions for the IUHPE to consider when deciding on the future direction of RHP&EO. The IUHPE priorities as reflected in its goals, objectives and strategies call for a strong, universally accessible knowledge base *and* a forum for exchange of ideas, experience and support. The RHP&EO needs to fit into an overall strategy for IUHPE online. Where to disseminate knowledge, and

knowledge produced how, by whom, for whom? Where to create a forum for exchange? RHP&EO could fill both roles, but might be best served with one clear profile, making it easier to market the journal. If the exchange in the journal was focused on the nature and challenges of evidence and knowledge proper for health promotion and education, the website could unite both knowledge base and exchange forum within one clear profile. A knowledge base of health promotion evidence seems to be the largest void online. This might also be the future direction which contributes the most to profiling the IUHPE as a central actor within health promotion, both online and 'offline'. The knowledge base direction thus seems to be both the most ambitious and strategically directed option.

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