

Summary of Day:
Moving Forward on Economic
Evaluation and Healthy Public Policy

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NCCHPP Workshop on Economic Evaluations
and Healthy Public Policy

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The logo for Simon Fraser University (SFU) is located in the bottom right corner. It consists of a dark red rectangular background with the letters "SFU" in a white, bold, sans-serif font.

Reality #1: Decision-Makers

- Economic reality
 - Accentuated by dominance of health budget
- Decision-makers ask for business case
- Economic evaluation used to terminate programs as well as begin programs
- Prevention versus cure
 - Bias against healthy public policy
 - Bias against health

Reality #2: Field

- Programs are complex
- How get models to approximate complexity?
 - Incorporate qualitative measures
- False competition of prevention vs. cure
- Lacking evaluation expertise and funding, ad hoc
- Recognition that budgets & ROI are essential
- Not everything can be measured in an economic evaluation
- Fear, need to defend

Competing Values

- Expense vs. investment
- Cost neutral (or \$ producing) vs equity (weath redistribution)
- Quality of life
- Economic evaluation as paramount vs. economic evaluation as just one tool
- Quick (and sufficient) vs. long (and thorough)

Needs, Next Steps

- Support field in understanding economic evaluation
- Support field in arguing against economic evaluation
 - Particularly as sole means of evaluation
- Support field in conducting economic evaluation
 - Particularly smaller organizations

Future Report

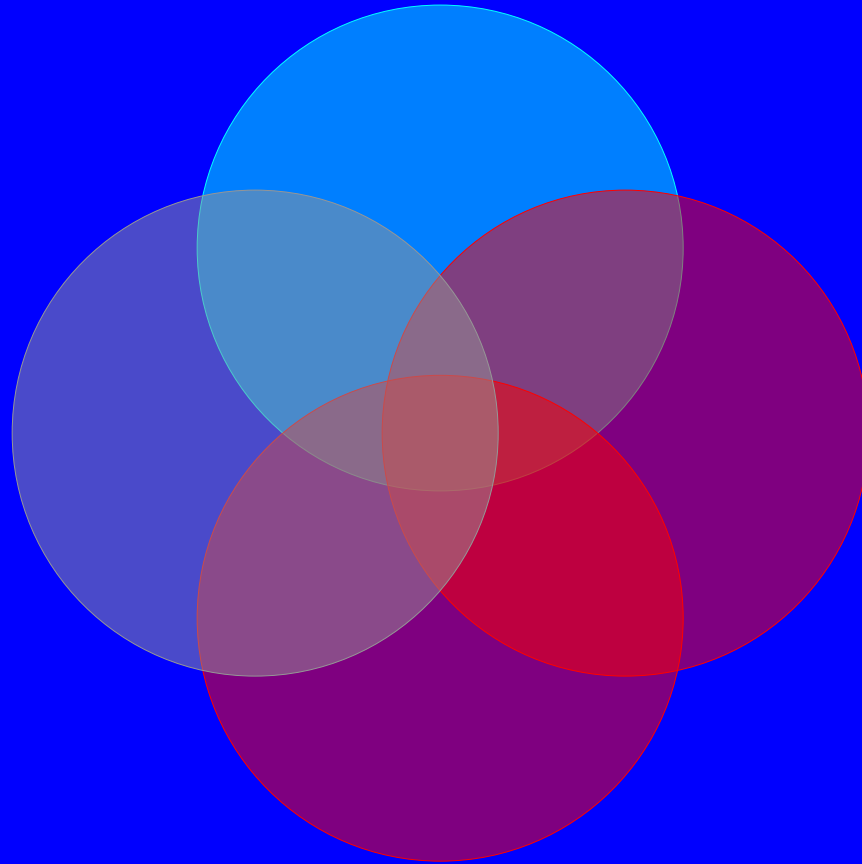
- Definitional issues
- Include current federal, provincial and municipal policies
- How to get health valued as health not as cost neutral?
- How make sufficient decision without being perfect? Rapid assessment?
- Emphasis on relevance for practice
- Review limitations of economic evaluation

Pressing Issues For Economic Evaluation

- Not helpful – not wanting to single out particular areas
- Wary of pitting prevention against cure

Workshop #1 Summary

Tools



Decision-Making
Context

Boundaries

Values

Tools

- Need for capacity building
 - How collect evidence?
 - How assess evidence?
 - How define boundaries?
- Use and misuse of economic evaluation
- Recognizing and working around limitations
- Need to use same tools as others

Decision-Making Context

- Still Prevention vs. Cure
- Disease focus vs. policy focus
- \$ as a form of cross-communication
- Money talks, talking point
- Speak to loud voices
- Evidence only one input to decision-making
- Inherently complex

Values

- What is asked?
- Who is asked? Who gives input?
- What counts? Who counts?
- Keep doing vs. Stop doing

- Economic benefit of healthy public policy
- Investment in evaluation

Boundaries: Many “Multi”s

- Multi-level, multi-intervention
- Multi-objective
- Multi-jurisdictional
- Multi-perspectives

More Boundaries

- Definitions
- Scope
 - Generalizability vs. Local Applicability
- Simplicity vs. Complexity
- Precision vs. Balance
- Full economic evaluation vs. pieces
- Public vs. private (cost-shifting)

What's Missing

- Mental health issues
- Poverty reduction
- Early childhood interventions
- Different methods of delivering public health interventions
- Health disparities
- Social inequities

Pressing Issues

- Obesity
- Diabetes
- Injury
- Social determinants of health
- Healthy birth outcomes
- Addiction

Where To Go?

- Work on definitions
- Address emerging issues
 - Policy
 - Methodological
- Review countries using economic evaluation for health public policy
- Environmental scans
 - What has been done (burden of program)
 - What are policy makers thinking of doing?

Where To Go? (2)

- Immediate focus on quick win, strong case
- Also use historical examples to make case
- Focus on building cross-sector collaborations

- Elaborate on interventions and categories in tables
- Consider costs and benefits in tables