

### Screening

Screening acts as a selection process during which policies, programmes and projects are quickly assessed for their potential to affect the health of the population. It offers a systematic way of deciding whether a health impact assessment is worth doing.

### Scoping

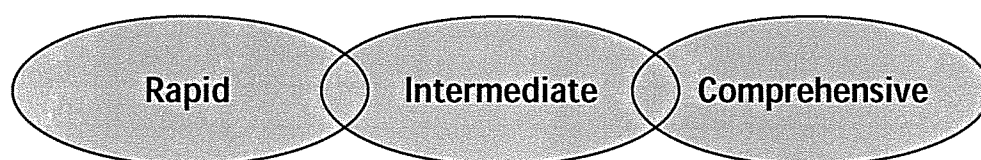
If, during the screening step, you decide that further investigation of health impacts is necessary, you are then ready to embark on scoping, the step that establishes firm foundations for the appraisal. Many organisations, especially when they are working in partnership, find it helpful at this point to set up a steering group to manage the HIA. Key tasks involved in scoping are: setting the boundaries for the appraisal of health impacts; agreeing the way in which the appraisal

will be managed; allocating responsibility for decision-making; and agreeing how to monitor and evaluate the HIA process and outcomes for health.

### **Appraisal of the potential health effects/impacts**

Appraisal is the 'engine' of health impact assessment, moving the whole process along towards practical outcomes. Key activities during this step are: analysing the policy, programme or project; profiling the affected population; identifying and characterising the potential health impacts; reporting on the impacts; and making recommendations for the management of those impacts.

There are broadly three types of appraisal within HIA:



Many organisations use rapid appraisal as an entry point to HIA.

### **Decision-making**

The decision-makers for any proposal may or may not regard health as a central issue. For example, they may prioritise economic benefits over health. And the decision-makers may or may not be part of the steering group for the HIA – it all depends on who agreed to take part during the scoping step of the HIA process. But, whether or not it has the power to make direct decisions on the proposal being considered, the steering group will be in a position to make recommendations to the decision-makers on the potential changes that can be made to a proposal to minimise its harmful impacts and maximise the health gain.

### **Monitoring and evaluation**

Monitoring and evaluation provide valuable insight into the ways in which it is possible to:

- improve the process of HIA
- modify future proposals so as to achieve health gain
- assess the accuracy of predictions made during appraisal.

## ■ What can HIA be used for?

HIA is a tool designed to bring public health issues into the foreground of policy- and decision-making – in short, to make public policy healthy. It serves as a support to decision-making, not a substitute for it. Complex judgements still have to be made; arguments have to be developed and presented; and difficult decisions have to be taken.

However, a core strength of HIA as a tool is that its recommendations can be based on the participation of a wide range of stakeholders, working on an equal footing to provide a fully considered view on issues affecting the health of the local community. HIA has both intellectual and democratic legitimacy.

HIA is particularly useful to managers in the public, not-for-profit and private sectors who are concerned with the following activities and areas of work:

- policy development and analysis
- strategy development and planning
- commissioning or providing services
- resource allocation and capital investment
- community participation/service user involvement
- community development and planning
- preparing or assessing funding bids (for example, SRB, NDC).

## ■ Why is HIA important?

Some of the core reasons have already been mentioned – for example, bringing the public health agenda into mainstream decision-making. But there are also several specific drivers for introducing HIA into the work of organisations and partnerships.

### **Responding to public concern about health**

Poll after poll makes it clear that the public are deeply concerned about their health. Accordingly, the organisation or partnership carrying out HIA as an integral part of its work programme can transmit a clear message that it cares about its population and is able to respond constructively to concerns.

### **Demonstrating health gain as added value**

As you have seen, HIA is designed to help organisations make sure, at the very least, that their policies and programmes do not actively damage health. In favourable circumstances, the approach can be used to promote health gain for the local population and to reduce health inequalities. With a social renewal or regeneration programme, for example, health gain is increasingly viewed as an important outcome rather than as a by-product of the programme.

In a situation too where public sector services are provided on a basis of value for money, health gain from non-health policies represents added value from the resources invested.

### **Responding to Government priorities - and those of London**

Central Government has made a commitment to assess major new Government policies for their impact on health. Clear messages have also been sent to decision-makers at a local level that:

- health impact assessment should be used to inform policy- and decision-making at a local level not only within organisations but also within partnerships
- health and local authorities are to act as champions for health when working or liaising with other organisations – one implication of which is the promotion of the use of health impact assessment.

In London, HIA will prove extremely useful to the Mayor and Greater London Assembly who have a responsibility to promote health, equality and sustainability. Members of the Coalition for Health and Regeneration, which is helping to take forward the London Health Strategy, will also find HIA very useful in their individual areas of concern.

### **Developing effective partnership working - inside and outside the organisation**

The core activity of HIA – working together for a common purpose with people from different backgrounds and with different perspectives – gives rise to significant opportunities for joint learning and co-operation. Many organisations and individuals have already learned a great deal through involvement in partnerships like Health Improvement Programmes (HIMPs) and Health Action Zones (HAZs). HIA presents a further way of developing and building on this learning and networking.

## How can you get started?

HIA has a great deal to offer – to the community, to partnerships, to organisations, and to individuals working within these organisations. But there can be sometimes be an understandable hesitation from some senior managers about introducing the approach into their organisations. They might point to the following factors, for example:

- limited resources – not enough time, money, personnel or facilities
- an already overcrowded agenda (for public sector agencies in particular)
- in some areas and for some sectors, a tradition of minimal public or community involvement
- lack of expertise or skills in health impact assessment.

It is important, therefore, to prepare carefully for the introduction of HIA. This will help reduce risks and maximise tangible outcomes. Steps to consider include:

- identifying learning points from the experience of others – the case-studies in **A Resource for Health Impact Assessment** will give you a flying start here
- raising awareness about HIA
- identifying expertise that already exists within the organisation/ partnership and could be deployed in support of HIA
- deciding on an appropriate entry point for carrying out HIA.

### **Raising awareness about HIA**

HIA is a relatively new approach and, as such, has attracted a fair amount of myth and misconception. Several organisations have found it helpful to begin their work by holding an introductory seminar or workshop. Presentation of accurate and interesting information about HIA can be followed up by free discussion on the potential benefits and barriers associated with the approach.

It is important that elected members and non-executive directors as well as staff have the opportunity to explore the HIA approach. Indeed, in at least one case, an open session with council members led to further development events and then to the passing of a council motion to carry out HIA on important policies.

### Identifying and using existing expertise

One of the basic principles of HIA is that all stakeholders' views are accorded the same respect, regardless, say, of the funding of the proposal or of the assessment itself. Indeed, much of the value and creativity of the assessment lies in bringing different voices together and creating a new sound.

However, the prospect of setting up and working through an assessment can be daunting. At the appraisal stage, one chief executive of a PCG commented in a worried fashion, 'I can't do this. I need an epidemiologist.' In fact, she went on to offer incisive insights into the different scenarios that emerged during the stakeholder workshop. It was also true, however, that the public health specialists there offered valuable 'framing' information and suggested fruitful lines of inquiry.

The moral is that a public health specialist is not needed to set up HIA – but it is very helpful, and confidence building for everyone, to be able to draw on public health skills during assessment. These skills, of course, can come from a wide range of people – community nurses, for example, as well as public health physicians.

### Entry points for HIA

#### - rapid appraisal and policy review

Because it can be undertaken in a short space of time and does not require the intensive use of resources, **rapid appraisal** offers many organisations and partnerships a real and appealing opportunity to make a practical start in HIA.

Like rapid appraisal, **policy review** can be undertaken in a short space of time and does not require the intensive use of resources. Another potential advantage it offers to those undertaking HIA for the first time is that it does not require the participation of all stakeholders. Policy review is usually undertaken by the officers employed in an organisation or working for a partnership.

## Finding out more

If you want to explore health impact assessment in more depth, you'll find it useful to check out the fuller HIA resource:

### **A Resource for Health Impact Assessment**

This is available on the London's Health website [www.londonhealth.gov.uk](http://www.londonhealth.gov.uk) and you can dip into and print out different parts as you need them.

It is a substantial resource, containing three main parts. At the start of the sections in the first two parts, an overview highlights the main issues covered; while at the end of each of these sections, review questions support you in exploring the potential relevance of the key points to your own organisation and/or partnership.

#### **Part I Introducing health impact assessment**

Key terms and concepts have been used in rather different ways by different writers and practitioners. Accordingly, Part I of the resource aims to:

- draw together the key terms and the range of current usage so that you can be clear what writers and practitioners means by terms like 'stakeholder', 'community', or 'qualitative evidence'
- present an overview of the subject – both of the health impact assessment framework/ process as a whole and of its constituent parts and how they fit into the framework/ process.

#### **Part II Applying health impact assessment**

HIA is a tool designed to support policy- and decision- making. It is well suited to fulfilling many of the requirements set down by central Government and called for by London's Coalition for Health and Regeneration. But, as with the successful use of any tool, careful preparation is rewarded. Part II explores the work that needs to be done before embarking on HIA – and outlines some suitable entry points.



### Part III Resources for health impact assessment

Much work, academic and practical, has been done on HIA; much remains to be done – and on a continuous basis. Part III offers you a starting point for finding out more. You have the opportunity to explore the range of models and approaches currently used in HIA. You are referred to relevant websites and bibliographies which can help you deepen and extend your understanding of HIA. And made available to you is a unique **collection of case-studies** which describe the use of HIA in a wide range of situations -- a rich source of learning points for anyone embarking on HIA.

#### Contents of fuller HIA resource

##### *Part 1 Introducing health impact assessment*

Section 1, What is HIA?

Section 2, The process of HIA

##### *Part II Applying health impact assessment*

Section 3, Understanding why HIA is important

Section 4, Preparing to introduce HIA into your organisation/partnership

Section 5, Embarking on HIA

##### *Part III, Resources for health impact assessment*

Section 6, Models of HIA

Section 7, Sources of further information

Section 8, Case-studies.

#### Websites for further information on HIA

London's Health website: [www.londonhealth.gov.uk](http://www.londonhealth.gov.uk)

Our Healthier Nation website: [www.ohn.gov.uk](http://www.ohn.gov.uk)



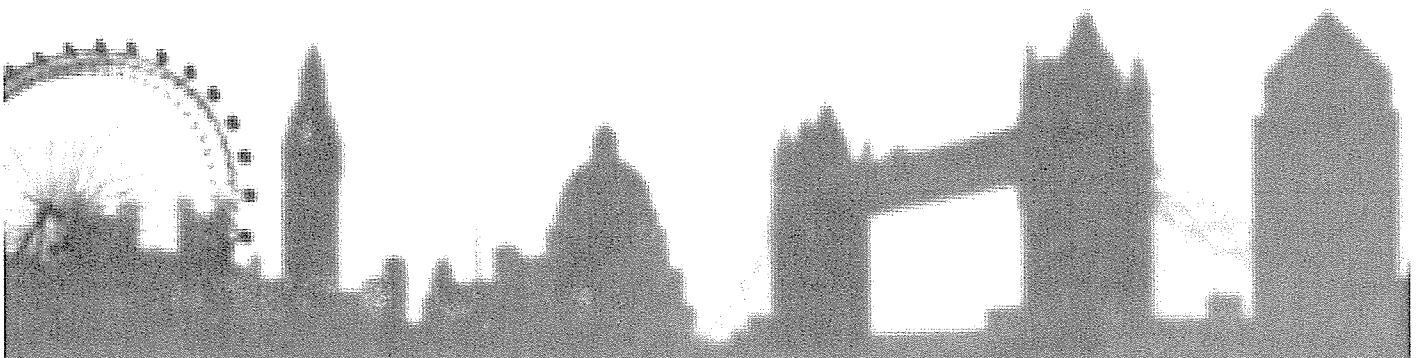
I am pleased to support this Short Guide to Health Impact Assessment (as well as the fuller supporting resource) developed by the London Region NHS Executive as a contribution to improving London's Health. I said in my manifesto that 'improving the health of Londoners is a central objective of all the Mayor and Assembly's policies.' This guide will be a vital tool in helping to ensure health is a central element to all our strategies. It will also be of particular value to members of the new London Health Commission which will be helping drive through improvements in health for all Londoners.

**Ken Livingstone**  
*Mayor of London*



I want to see this guide used to improve the health of everyone in the capital, and the health of the worst off in particular. Nationally, the government is reinvigorating and transforming our health services into a new NHS. Let us play our part in London – it will be vital in assessing our policies at the Greater London Assembly to ensure that public money is invested to promote and support healthier Londoners.

**Trevor Phillips**  
*Chair of the Greater London Assembly*



# A Guide to Health Impact Assessment:

A Policy Tool for New Zealand



Public Health Advisory Committee

Te Rōpū Tohutohu i te Hauora Tūmatanui

June 2005

2nd Edition

# **A Guide to Health Impact Assessment:**

## **A Policy Tool for New Zealand**

Public Health Advisory Committee

Te Rōpū Tohutohu i te Hauora Tūmatanui

June 2005

2nd Edition



**Public Health Advisory Committee**  
Te Rōpū Tohutohu i te Hauora Tūmatanui

A sub-committee of the National Health Committee

The Public Health Advisory Committee is a subcommittee of the National Health Committee. It provides the Minister of Health with independent advice on public health issues, including the factors underlying the health of people and communities.

### **Members of the Public Health Advisory Committee for the production of the first edition of this Guide**

Kevin Hague (Chair until February 2004)  
Geoff Fougere (Chair from February 2004)  
Robert Logan (Chair of the National Health Committee)  
Lynette Stewart  
Neil Pearce  
Cindy Kiro (until August 2003)

### **Acknowledgements**

The Public Health Advisory Committee would like to acknowledge the significant contribution of the Health Impact Assessment Advisory Group to the first edition of this Guide:

Martin Ward  
Jennifer Dixon  
Alistair Woodward  
John Hohapata-Oke  
Gillian Durham  
Louise Signal

The first edition of this Guide was printed in March 2004. Peer review of the first edition was provided by John Kemm, Lea den Broeder, Nick Taylor and Lesley Woudberg.

The Committee would like to thank Mary Mahoney, Deakin University, Louise Signal, Wellington School of Medicine and Health Sciences, Martin Ward, Environmental Advisor, and Robert Quigley of Quigley and Watts Ltd for their support for and contribution to this second edition.

This second edition has been revised based on feedback from users, comments received by people attending health impact assessment training courses, and from the experiences of Barbara Langford, Robert Quigley (Quigley and Watts Ltd), Louise Signal and Martin Ward.

Barbara Langford and Louise Thornley provided the secretariat support for this project.

ISBN 0-478-25342-7 (printed document)

ISBN 0-478-25341-9 (web version)

Public Health Advisory Committee (a sub-committee of the National Health Committee)  
Wellington  
New Zealand  
June 2005  
2nd edition

This document is available on the NHC's website <http://www.nhc.govt.nz/phac.htm>.

Copies are available by phoning 04 496 2277 or e-mailing [moh@wickliffe.co.nz](mailto:moh@wickliffe.co.nz).

This document can be freely quoted, copied and circulated with appropriate acknowledgement.

# FOREWORD

---

It is now widely accepted that the factors that have the greatest effect on people's health and wellbeing lie outside and beyond the control of the health sector. Income, housing, education and employment are factors that play a major part in the ill-health people experience during their lifetime.

It is therefore in the interests of population health for policy-makers in local and central government to think seriously about the impacts – both positive and negative – that policies in these areas will have on people's health and wellbeing. By doing so, local, regional and national agencies can direct their investment to policies that indicate likely beneficial effects and away from policies that indicate likely adverse effects.

Health impact assessment (HIA) is a formal approach used to predict the potential health effects of a policy, with particular attention paid to impacts on health inequalities. It is applied during the policy development process in order to facilitate better policy-making that is based on evidence, focused on outcomes and includes input from a range of sectors. This Guide is for use – largely but not exclusively – by policy-makers in sectors other than health. Those likely to be affected by policy may also use it. We recommend that people who are using this Guide, or HIA for the first time, should attend an HIA training course and/or work alongside an experienced HIA practitioner.

In New Zealand the economic implications of policy proposals are routinely analysed before policies are finalised. The Public Health Advisory Committee (PHAC) believes that policies at central and local government level should also be routinely analysed for their potential effects on human health and wellbeing.

For example, if the health impacts of the introduction of market rates to state housing rentals in the 1990s had been assessed, this may have highlighted implications for health resulting from overcrowding, which is strongly associated with infectious diseases such as meningococcal disease.

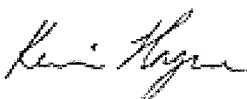
Policy HIA takes place in a complex political and administrative environment. HIA does not strive to make health and wellbeing considerations paramount over other concerns such as economic or environmental. Rather, it enriches the policy-making process, providing a broader base of information to make trade-offs between objectives where necessary, and makes explicit the health implications of those trade-offs.

The PHAC believes that the values that should underpin HIA in New Zealand include commitment to the principles of Treaty of Waitangi, sustainable development, equity, public participation and working cross-sectorally.

The Government has made a strong commitment to HIA, listing it as an objective of the New Zealand Health Strategy. HIA is a valuable tool for local government when delivering on the expectations of the Local Government Act 2002, and delivering the outcomes desired by communities. The Public Health Advisory Committee has developed this Guide for use by policy-makers in any sector – and at both central and local level – to assist in assessing policies for their impact on human health.

Kevin Hague

Chair, Public Health Advisory Committee until Feb 2004



# TABLE OF CONTENTS

---

<b>GLOSSARY OF TERMS</b>	<b>2</b>
<b>EXECUTIVE SUMMARY</b>	<b>3</b>
<b>WHAT IS IN THIS GUIDE?</b>	<b>5</b>
<b>WHAT IS HEALTH IMPACT ASSESSMENT?</b>	<b>7</b>
<b>WHY DO HEALTH IMPACT ASSESSMENT?</b>	<b>9</b>
<b>WHO SHOULD DO HEALTH IMPACT ASSESSMENT?</b>	<b>11</b>
<b>WHAT ELSE DO YOU NEED TO KNOW?</b>	<b>13</b>
<b>HOW TO DO HEALTH IMPACT ASSESSMENT</b>	<b>19</b>
STAGE ONE: SCREENING	23
STAGE TWO: SCOPING	27
STAGE THREE: APPRAISAL AND REPORTING	33
Introduction	33
Identifying the relevant determinants of health	35
Appraisal Tools	40
– The Health Lens	41
– The Health Appraisal Tool	45
– Impact assessment	54
Reporting	57
STAGE FOUR: EVALUATION	61
<b>FURTHER READING ON HEALTH IMPACT ASSESSMENT</b>	<b>63</b>
<b>SUPPORT AVAILABLE</b>	<b>66</b>
<b>REFERENCES</b>	<b>67</b>



## GLOSSARY OF TERMS \*

---

<b>Concept of health</b>	The conceptual framework used in health impact assessment. This Guide recommends the use of the Whare Tapa Wha model of health (see section 'What else do you need to know?')
<b>Determinants of health</b>	Health is determined by a continuum of influences ranging from age, sex and hereditary factors, through individual behaviours, to the social, cultural and economic contexts in which people live their lives.
<b>Health impact assessment (HIA)</b>	A combination of procedures, methods and tools by which a policy may be assessed and judged for its potential effects on the health of the population, and the distribution of those effects within the population. <sup>1</sup>
<b>Health outcomes</b>	The health status of individuals, groups within the population, or the population as a whole, eg, diabetes, asthma, injuries or the achievement of a level of physical fitness.
<b>Policy</b>	A course of action through which the Government aims to achieve its objectives. Health impact assessment can be used at both central and local government levels.
<b>Prospective health impact assessment</b>	Health impact assessment that takes place before a policy proposal is finalised, at a stage early enough to give input to the decision-making process, but late enough so that proposals are firm enough to assess. This Guide recommends the use of prospective health impact assessment.
<b>Public health</b>	"The science and art of preventing disease, prolonging life and promoting health through the organised efforts of society." <sup>2</sup>

---

\*See also Mindell J, Ison E and Joffe M. 2003. A glossary for health impact assessment. *J Epidemiology and Community Health* 2003;57:647-651.





## EXECUTIVE SUMMARY

---

This Guide introduces health impact assessment (HIA) as a practical way to ensure that health and wellbeing are considered as part of policy development in all sectors. Policy-makers in any sector, at both central and local level, could use this Guide. Those who may be affected by policy may also find the Guide useful.

Health impact assessment is a formal activity that aims to predict the potential effects of policies on health and health inequalities. It is used to help analyse policy alternatives during the policy development process. Where this Guide and the HIA approach is used by policy-makers who have little health experience, we recommend using public health specialists as advisors, participating in an HIA training course, and/or employing the support of an experienced HIA practitioner.

Health impact assessment is based on the recognition that the health status of people and communities is greatly influenced by factors that lie outside the health sector, for instance in areas such as housing, employment or transport. HIA can be applied at the 'project' level (eg, when a new road is being built in a particular community), but this Guide focuses on the policy level (eg, public transport policy, housing assistance policy, student loans policy).

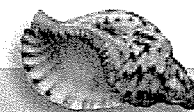
The main purpose of HIA is to enhance the policy-making process. It is a practical aid to help facilitate better policy-making that is based on evidence, focused on outcomes and encourages collaboration between a range of sectors and stakeholders. The use of HIA is part of wider moves towards sustainable development, cross-sectoral collaboration and a 'whole of government' approach. It is undertaken when there are policy alternatives being considered but before commitment has been made.

Key reasons to undertake HIA are:

- to help policy-makers use a sustainable development approach
- to assist policy makers meet public health requirements of legislation and policy direction, such as the Local Government Act (2002) and the Land Transport Management Act (2002)
- to help policy-makers incorporate evidence into policy-making
- to promote cross-sectoral collaboration
- to promote a participatory, consultative approach to policy-making
- to improve health and wellbeing, and reduce inequalities in health
- to help policy-makers consider Treaty of Waitangi implications.

The Guide defines health broadly using the 'Whare Tapa Wha' model, which includes physical, mental, spiritual and family/community aspects. Concepts of public health including determinants of health, inequalities in health, and health outcomes are discussed. Health inequalities are of particular concern in New Zealand. For instance, people on low incomes tend to experience worse health than those financially better off.

The Guide sets out four stages and two different appraisal tools for HIA (adapted from overseas models). Guidance is provided on how to apply the tools. The Public Health Advisory Committee (PHAC) intends the Guide to be primarily used by policy-makers in central and local government (with the support of public health specialists) but believes it could also be applied more widely.



The tools were originally tested on two case studies – policies on public transport funding and the patenting of human DNA – and revised in light of these applications. It has been revised a second time for this version based on feedback from users and people trained in the HIA approach.

The PHAC believes in continuous improvement and anticipates feedback from users for further refinement and improvement of the Guide. Users are encouraged to adapt and refine the tools as they apply them and to give feedback to the PHAC so that the Guide may be enhanced over time.

The four key stages in the health impact assessment process are:

- 1) screening
- 2) scoping
- 3) appraisal and reporting
- 4) evaluation.

Each stage is described as distinct. However, in practice they may be revisited and repeated once new information becomes available.

- 1) **Screening** is the initial selection process to assess a policy's suitability for health impact assessment. A checklist and guidance notes are provided for this process. At this stage some thought is given to which of the determinants of health are relevant to the policy.
- 2) **Scoping** highlights the key issues that need to be considered to define and shape the HIA. At the end of this stage, policy-makers will have written a project plan (that identifies the parameters of the HIA, its objectives, and who will be involved) and decided on the appropriate depth of HIA.
- 3) The **appraisal and reporting** stage first identifies the relevant determinants of health and uses specific tools to identify potential health impacts. It then assesses the significance of these impacts (the 'impact assessment' phase) and draws out the practical changes to the policy that will enhance the positive and mitigate the negative effects on health and wellbeing.

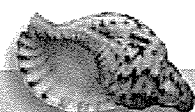
Two appraisal tools are described in the Guide:

- the Health Lens (a concise list of questions)
- the Health Appraisal Tool (which includes assessing the impacts on health determinants, health inequalities, and a Treaty of Waitangi appraisal)

One of these appraisal tools is chosen by the HIA team in light of the information considered in the scoping stage.

Following on from whichever appraisal tool is applied, users of the Guide develop recommendations to adjust the policy proposal to maximise the benefits to health and wellbeing.

- 4) **Evaluation** of both the process of HIA and its impact is important. The HIA can be evaluated by assessing how the process was undertaken (process evaluation), and the extent to which the recommendations were taken up by the policy-makers (impact evaluation). Questions for evaluating the process and impact of HIA are provided in this section.



# WHAT IS IN THIS GUIDE?

---

## 1) Introduction

The first section introduces health impact assessment (HIA) and answers these key questions:

- What is health impact assessment?
- Why do it?
- Who should do it?
- What else do you need to know?

## 2) How to do health impact assessment

The rest of this document sets out guidance for how to do health impact assessment. It covers the following:

- Each of the four stages of health impact assessment:
  - screening
  - scoping
  - appraisal and reporting
  - evaluation.
- Two appraisal tools to choose from for the appraisal and reporting stage – the Health Lens and the Health Appraisal tool. Users select **one** of these tools.
- ‘Impact assessment’, which is part of the appraisal and reporting stage, prioritises potential impacts on health and wellbeing, and assesses their significance.
- Making recommendations to amend the policy proposal in light of the health impact assessment at the end of the appraisal and reporting stage.
- A set of questions to evaluate both the process and impact of HIA is provided.
- A separate response form is provided for users to evaluate the Guide itself and give feedback to help develop it further.
- Further reading and references are provided at the end of the Guide.

Illustrations of the use of different parts of the process from public transport policy and a policy allowing the patenting of human DNA are provided throughout the Guide.



# What is Health Impact Assessment?

