

13 Health impact assessment

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Health impact assessment (HIA) is increasingly seen as a useful tool with which health impacts of policies, programmes and interventions, and their distribution across the population can be assessed in order to enhance the positive and reduce negative health impacts identified.

HIA is the term given to the process by which the health impacts of certain plans, policies or actions are judged. The World Health Organisation has succinctly defined an HIA as “a combination of procedures, methods and tools by which a policy, programme or project may be judged as to its potential effects on the health of a population and the distribution of those effects within the population”. In HIA a social model of health is applied which acknowledges the influence of economic, political, social and environmental factors on population health. HIA considers the health impacts of a specific proposal on a defined population, usually over a specified time interval. There is an explicit focus on health inequalities by giving specific consideration to whether impacts of a proposal fall disproportionately on vulnerable or minority groups. For example, there are now a considerable number of HIAs of road transport policies and interventions (APHO 2009).

HIA methodologies vary, with some utilising similar approaches to that of Environmental Impact Assessment (EIA) and Strategic Environmental Assessment (SEA) (Mindell 2003a and 2003b). Integrating HIA with such assessments can lead to more informed and rounded assessments.

Importantly, recent Local Transport Plan 3 (LTP3) guidance states that consideration of human health is a legal requirement in SEA and HIA is an integral part of SEA to identify and inform health issues in plans (Department of Transport 2009). Consequently, all highway authorities in England now have to undertake HIAs of their LTP3s as these are developed and then replace LTP2s from April 2011.

The HIA process involves collecting a wide range of evidence in order to interpret health risks and potential health gains. It presents this information, along with recommendations, to decision makers. It has been noted that HIA is a process that:

- considers the scientific evidence about the relationships between a proposed policy, programme or project and

the health of a population

- takes account of the opinions, experience and expectations of those who may be affected by a proposed decision
- highlights and analyses the potential health impacts of proposals
- enables decision makers to make more informed decisions and to maximise positive and minimise negative health impacts
- enables consideration of effects on health inequalities.

Prospective HIAs undertaken alongside policy development afford the greatest opportunity to influence and to change draft policies, so that any potential negative health impacts can be avoided or reduced, and any positive impacts enhanced. There will, however, be issues about which there is little or no evidence and it will be important to acknowledge these, as well as the uncertainties and assumptions that need to be acknowledged. Some required evidence may not exist, such as the outcome of specific interventions.

HIA can be undertaken in varying levels of detail as a rapid process, intermediate, or a more in-depth full study, depending on the resources available, and it can be applied to policies, programmes or projects. HIAs usually include a number of stages of which ‘screening’ - whether an HIA be undertaken – has already been determined by the client.

The Scope (see below) will be determined by the parameters of an HIA approach and funds potentially available. Stages include:

- scoping – agreeing how best to undertake the HIA
- appraisal – identifying, examining, considering best available
- recommendations – formulating and prioritising.

(The latter two to be undertaken by HIA specialists)

A review of HIA frameworks has reported that approaches to HIA reflect their origins, particularly those derived from EIA. There are more similarities than differences in

approaches to HIA, with convergence over time, such as the distinction between 'narrow' and 'broad' focused HIA.

Consideration of health disparities is integral to most HIA frameworks but not universal. A few resources focus solely on inequalities. The extent of community participation advocated varies considerably. A conclusion is that it is important to select an HIA framework designed for a comparable context, level of proposal and available resources.

References and further reading

Association of Public Health Observatories (2009): The HIA Gateway managed by West Midlands Public Health Observatory on behalf of the Association of Public Health Observatories: www.apho.org.uk/default.aspx?RID=40141

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