

What does it not do?

At the moment HIAs does not give numerical estimates of the negative and positive health impacts. There is no approach at present that allows us to do this accurately. This is because:

- ❖ many of the effects on health are not easily measurable,
- ❖ many effects are indirect and occur over many years,
- ❖ the methodology to collect quantifiable evidence and make judgements based upon it is currently not well developed, and finally
- ❖ there is also an important argument that any quantifiable estimates developed would be misleading and give a false sense of reassurance and precision because of the influence of changing social, economic and cultural relationships and the movement of people into and out of communities.

Where can you do it?

Areas where HIA has been successfully used include:

- ❖ housing
- ❖ waste
- ❖ transport
- ❖ industrial
- ❖ mining
- ❖ quarrying
- ❖ regeneration
- ❖ health and social care

When can you do it?

HIAs can be done on policies, programmes, projects and services.

They can be done at the:

- beginning – during the development or pre-development stage.
- middle – during the implementation stage.
- end – at the operation or closure stage to look back and evaluate.

In HIA terminology – they can be prospective (beginning), concurrent (middle) and retrospective (end). Increasingly HIA is seen as a prospective approach.

You can also do quick and broad ones and more long and detailed ones.

In HIA terminology you can do a rapid, intermediate or comprehensive HIA.

Who can do it?

Anyone with HIA training or a public health background can do it at any stage.

HIA can be built into internal organisational processes and ways of working.

They can also be undertaken by external and

What does it do?

HIAs can help to deliver better and improved policy, programme, project and service outcomes. It can either be used:

- ❖ as an appraisal tool that can help forecast the potential negative and positive health consequences.
- ❖ as a participation tool that can help get residents, local community groups and other stakeholders involved in the design of an initiative.
- ❖ as a project management tool that can help to structure the development and implementation of policies, programmes, projects and services
- ❖ as an evaluation tool to monitor the achievement of stated objectives, outputs and outcomes of those policies, programmes, projects and services.

What is it?

The WHO Gothenburg Consensus definition of HIA is:

“A combination of procedures, methods and tools by which a policy, program 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.”

The definition we have developed and use is:

“HIA is the key systematic approach to identifying the health impacts of proposed and implemented policies, programmes, projects and services within a democratic, equitable, sustainable and ethical framework. So that negative health impacts are reduced and positive health impacts increased (within a given population). It uses a range of structured and evaluated sources of evidence that includes public and other stakeholders’ perceptions and experiences as well as public health, epidemiological, toxicological and medical knowledges.”

Other impact assessment approaches include environmental impact assessment, social impact assessment, environmental health impact assessment, technology assessment, strategic environment assessment and health impact analysis, equalities impact assessment and regulatory impact assessment.

Health Impact Assessment

Frequently Asked Questions

What definition of health does it use?

Biomedical Model

Diagnosing and treating diseases and illnesses is one way of thinking about health. The narrow version of the biomedical model - health as the absence of disease - argues that the best way to improve health is to create more and improved health care services e.g. hospitals, medical technology, doctors and nurses, etc.

Social Model

Having a job, feeling good about ourselves, having strong social support networks and relationships as well as income, education and living in clean, safe and pleasing houses and social environments are also important for health. The social model argues that indirect and broader factors have a significant influence on health and hence that the best way to improve health is by dealing with inequalities – poverty, education, poor housing, dirty and disruptive social environments, etc. These tend to be called the wider determinants of health.

Mixed-Model Approach

HIA uses a mixed approach – which is increasingly recognised as the best way forward. It recognises the importance of the biomedical model and the impact on health by specific disease-causing agents e.g. bacteria and viruses and the treatment of them through health care services but it argues that it is the wider determinants which are as important, if not more important, factors in determining the health of individuals and communities.

How do you do it?

There are quite a few models or approaches to doing HIAs. They are:

Bielefeld	British Columbia
Merseyside	Australia EnHealth
Swedish County Council	New Zealand Ministry of Health

They are different in that:

Some provide a quick, simple and broad way of thinking through health impacts while others have detailed and precise steps by which health impacts are identified and assessed in an in-depth way.

They are similar in that they have 5 core steps:

Screening:

At this step policies, plans, programmes, projects, developments and services (initiatives) are systematically assessed to see whether a HIA needs to be done on them. A quick assessment is made on their potential to impact on a community’s health. A HIA may not need to be done either because they have very little impact on health or the health impacts are well known and the mechanisms to reduce them are already in place. This helps ensure that effort and resources are targeted appropriately. The type of HIA that needs to be undertaken is also determined at this stage.

Scoping:

At this step the ‘terms of reference’ for the HIA are set i.e. what aspects will be considered, what areas and groups might need particular focus and what will be excluded from the HIA, how the HIA process will be managed and so on.

Appraisal:

At this step a systematic review of the potential impacts is undertaken and evidence for these impacts collected. An assessment of the likely impacts, the size and significance of the effects and the groups that are likely to be most affected are identified and described in detail.

Monitoring & Evaluation:

At this step ways of monitoring the potential health losses (effects of the negative impacts) and health gains (effects of the positive impacts) as well as mechanisms to evaluate the initiative as a whole are developed. HIAs are also evaluated to assess the accuracy and appropriateness of the health predictions and recommendations made.

Options (with or without recommendations):

At this step a report, a health impact statement, is written and options with or without recommendations are developed on the best way forward including options to reduce the potential negative health impacts (mitigation measures) and increase the potential positive impacts (enhancement measures).

