

NSW HEALTH IMPACT ASSESSMENT PROJECT

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Welcome!

Welcome to the second edition of the electronic newsletter about Health Impact Assessment (HIA) for NSW. The purpose of the newsletter is to keep you informed about the NSW Health HIA Project, HIA resources and websites and new developments in the field. This newsletter is brought to you by the HIA Project Team at the Centre for Health Equity Training Research and Evaluation (CHETRE).

NSW HIA Project Advisory Committee

by Sarah Simpson

A Project Advisory Committee was set up to provide strategic advice to the CHETRE team at defined intervals about the NSW HIA Project. The members of the Committee bring as wide a body of knowledge as possible to the project including representation (Departmental and Area Health Services) in the areas of environmental health, public health, health promotion, epidemiology, aboriginal health, health service development, planning and policy. Most members also belong to other forums linked to NSW

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April 2003 NSW HIA Workshops

What is HIA?

HIA workshops were held on 8 and 11 April 2003 with almost 40 participants from Area Health Services and the Department attending. The aims of the workshop were to:

- Introduce and/or explore current issues in health impact assessment.
- Identify the capacity required to integrate HIA within NSW Health.

The first half of the workshop focused on presentations by:

- Bill Bellew - the context for the NSW HIA project
- Mary Mahoney - defining and understanding HIA
- Jacqueline Ingham, Planning NSW - Environmental Impact Assessment
- Melissa Gibson, Human Services CEOs Forum - intersectoral action for improving health.

The second half of the workshop sought feedback through participation in one of four case studies as a way of highlighting how participants as practitioners thought HIA might be applied within NSW Health. For example, do we need specific health impact assessment positions or should all health staff (public health, health promotion, policy, planning, population health etc) have an understanding and knowledge of HIA so that they know when to undertake an HIA and what sort of HIA is needed? NSW Health is at the beginning of process: the NSW HIA Project is developmental in focus and nothing has been decided about how HIA

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NSW HIA Project Advisory Committee

work on health impact assessment including the NSW Equity Alliance, the inequity profile advisory committee and the forums for Directors of Public Health, Health Promotion and Health Service Development, enabling dissemination of the project outcomes to a wider audience.

The terms of reference for the Committee are:

1. To provide strategic advice at defined intervals to the CHETRE project team and the Departmental Liaison Officer on the: Inequity Profiles project; and Health Impact Assessment project.
2. To make recommendations on the resources and infrastructure needed to build capacity within NSW Health to undertake health impact assessment and use inequity profiles effectively.
3. To promote the concept of health impact assessment within NSW Health, Area health Services and external agencies as appropriate.
4. To endorse recommendations concerning priorities and future directions to enable implementation of the outcomes from both projects.

The Committee met for the second time on 29 April 2003 and discussed outcomes from the April HIA workshops (see page 1 and 3) and the Inequity Profiles Workshop (Friday 30 May 2003). The next meeting of the Committee is on Friday 13 June 2003.

About this Edition

The newsletter will be e-mailed periodically for the life of the HIA project in NSW (until 30 June 2003).

This edition contains:

- Introducing the NSW HIA Project Advisory Committee
- Outcomes from the April 2003 HIA workshops
- What's the link between HIA & the inequity profiles?
- Answers to some common questions about Health Impact Assessment
- The PHERP Health Inequalities Impact Assessment project
- Staying up to date with HIA - suggested reading and websites

If you would like to include an article in the HIA newsletter and/or provide feedback on any of these items please e-mail Sarah at

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Editorial Panel

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Centre for Health Equity Training Research and Evaluation (CHETRE)

Editorial Input

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CHETRE is supported in this project by NSW Health. Views expressed here are not necessarily the views of NSW Health.

April 2003 NSW HIA Workshops

will be integrated within NSW Health. The outcomes of the workshop case studies will be used to inform development of the final report and proposed future directions.

Workshops participants were also asked to identify one expectation from the workshop. This exercise identified a range of themes, including:

- What is HIA? What are the underlying principles? What's our definition of HIA?
- Current developments in the field of HIA?
- What's the "value added" of Health Impact Assessment? Will HIA just add to an existing workload without there being any additional benefit to public health or policy development?
- How is HIA different to what we currently do and in particular different from:
 - Evaluation?
 - Environmental impact assessment processes – don't we already do HIA as part of EIA?
 - The NSW Aboriginal Health Impact Statement?
 - How can NSW Health operationalise HIA in a way that is practical and also maximises the benefits of HIA?
 - What are the workforce implications of HIA – for NSW Health and for other sectors within NSW (the community, non-government organizations, other NSW government agencies, Commonwealth funded initiatives)?
 - How do we measure the impact of other sectors on health? Where does NSW Health begin in terms of getting other sectors' "buy in" given it's added work for them with little to no reward/incentive?

Some of the themes arising from the expectations and case studies will form the basis of the Q&A section of the newsletter in the coming months.

NSW HIA Project

What's the link between HIA and the inequity profiles?

Equity should be a core principle of health impact assessment. All HIAs should include the measurement of differential impact across population groups. The inequity profiles are therefore integral to any health impact assessment work that NSW Health undertakes because the profiles can be used to assist in measuring differential impact and to inform health impact assessments. Health impact assessments in turn can be used to identify what type of information needs to be collected as part of the profiles, where the gaps are and how to strengthen the profiles. Simultaneous development of the inequity profiles and an approach to HIA in NSW should reduce the need for duplication and amendment to systems in the future.

We also need to begin using tools such as the inequity profiles to move from describing health inequalities to developing ways to reduce them. The evidence in the inequity profiles should act as a stimulus for action. A key focus of the inequity profiles workshop (30 May 2003) will be on ways that the profiles might be used to develop interventions, programs and policies to address health inequalities. Ongoing development of the inequity profiles as part of a wider approach to measuring health impact should enable NSW Health to strengthen its evidence base for the effectiveness of interventions to decrease health inequalities.

To find out more about the NSW HIA project please contact Sarah by e-mail at

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Answers to Some Common Questions About HIA

During the course of the project, we have come across some common questions raised by newcomers to the field of HIA. The issues raised by participants at the recent HIA workshops were consistent with these questions and we thought it might be useful to include some of these questions and answers in the newsletter. In this edition:

How is Health Impact Assessment Different from Evaluation?

Health Impact Assessment 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. (Gothenburg Consensus, 1999, p. 4)

Using this definition as a starting point, the intent of HIA is that it is undertaken prospectively – *before* the policy, program or project is implemented and unlike evaluation which is retrospective. The *value added* by HIA is that it enables identification of negative and/or unintended consequences in advance of implementation. This provides an opportunity to ameliorate or amend the policy, program or project before implementation, thereby saving not only resources but also maximizing the positive outcomes from the proposed

initiative. From a more general perspective, impact assessment:

... is a process whereby predictions are made about the future consequences or impacts of changes being made or considered. The concept is general, ... Within a specific context, such as health effects, there may be a wide range of outcomes for which impacts could be assessed, such as death ... GP visits, ... absence from work ... Different contexts may emphasise different outcome measures, but the constant

theme is future prediction, and in particular prediction of differences in outcomes under different scenarios of change against the status quo. (Miller & Hurley, 2003, p.200)

The emphasis, however, is still on making future predictions rather than retrospective analysis.

The emphasis, however, is still on making future predictions rather than retrospective analysis.

Another key difference between HIA and evaluation is that it ought to look at the differential impact of the proposed policy, program or project (initiative) within the population. This includes (but is not limited to) looking at the distribution of impact in terms of socioeconomic status, gender, age, and ethnic background (Gothenburg Consensus Paper, 1999). In contrast, equity is not necessarily a principle of evaluation.

While HIA and evaluation are different they are also *linked*. Evaluations of existing policy, programs or projects can

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Answers to Some Common Questions About HIA

contribute to the literature that is then used to form the basis of a prospective HIA. The information generated by evaluation can be used during the screening stage of HIA to quickly map if there are any potential linkages between the initiative and health and the different aspects of health that they might expect (Gothenburg Consensus, 1999). Furthermore an evaluation of an existing initiative might include scenarios that are used to predict what the consequences might be of amending or changing the initiative, thus incorporating an HIA approach.

What is the difference between environmental impact assessment (EIA) and HIA?

The purpose of HIA is to identify the prospective health impact of a proposed policy or program or project. The purpose of EIA is identification of a range of potential impacts of a proposed project (only) such as the development of a new landfill site or the impact of extending an existing freeway near a residential area. This does not mean that the two processes are not linked. Indeed HIA has a history in EIA, which has its roots in impact assessment. As identified previously, the focus of impact assessment is on prediction of future impact with the difference between HIA and EIA being the context (Hurley and Miller, 2003).

The impacts addressed in an environmental impact assessment are wide ranging with "health effects" forming just one component. For example, an EIA of a major development project will look at the impact(s) on the socio-economic environment, human health, aboriginal archaeology, non-indigenous heritage, noise and vibration, air quality, greenhouse gas emissions, transport

and recreation and amenity with the intent of assessing the overall impact on the *environment*. Within a health context, health impact assessment again will look at a range of impacts including impact of the social determinants of health on outcomes such as life expectancy, well-being, mental health and other morbidity measures. The impact of the physical environment on health will be addressed as part of this. However, the emphasis in HIA will be on assessing the overall impact of the proposed initiative on *health* outcomes within the population.

References

- 1 Health Impact Assessment. Main concepts and suggested approaches. Gothenburg consensus paper. (December, 1999) WHO, Regional Office. European Centre for Health Policy: Brussels
- 2 B. G. Miller & J. F. Hurley. (2003). Life table methods for quantitative impact assessments in chronic mortality. *Journal of Epidemiology and Community Health*. 2003; 57: 200-206

Future Editions

In future editions of the newsletter, we will bring you information about:

- Health Inequalities Impact Assessment
- Progress with the NSW HIA project – outcomes of the inequity profiles workshop in May 2003
- Linking the Health & Equity Statement, inequity profiles, HIA work and equity in health promotion tool together
- Housing improvements, health and HIA
- NSW Aboriginal Health Impact Statement
- Triple Bottom line work by Mary Mahoney at Deakin University
- Aboriginal Family Violence
- The Northern Rivers AHS HIA Project

If you would like to include an article in the HIA newsletter and/or provide feedback on any of these items please e-mail Sarah at

sarah.simpson@swhs.nsw.gov.au

Staying up to Date with HIA

Suggested Readings and Websites

Websites

- Checkout the PheL (Public Health Education Library) website at <http://www.phel.iarna.co.uk/knowledge/knowledge.asp> which has a link to the HDA HIA gateway and a health equity audit page. The health equity audit page contains information that may be useful to those involved in developing the inequity profiles.

Something Old, Something New - Suggested Readings

- Mary Mahoney. Current Thinking and Issues in the Development of Health Impact Assessment in Australia. *NSW Public Health Bulletin* 2002; 13(7): 167-169.
- L Nilunger, L Schafer Elinder, Bosse Pettersson. Health Impact

Assessment: screening of Swedish government inquiries. *Eurohealth* Winter 2002/2003; 8(5): 30-32

- H Thompson, M Petticrew, M Douglas. Health impact assessment of housing improvements: incorporating research evidence. *Journal of Epidemiology and Community Health* 2003; 57: 11-16.
- B. G. Miller & J. F. Hurley. (2003). Life table methods for quantitative impact assessments in chronic mortality. *Journal of Epidemiology and Community Health*. 2003; 57: 200-206

HIA Electronic Discussion Network

As part of the European Centre for Health Policy (EHP) HIA Project an HIA Electronic Discussion Network has been established. The Network's objectives are to:

- facilitate the exchange and broader distribution of information regarding developments and experiences in HIA
- provide a resource pool of people interested in further development of methodologies and processes for HIA in general, and HIA in specific sectors
- clarify the main concepts, definitions and terms used in this comparatively new field
- advocate for the implementation of HIA
- support the development of practical tools and means of capacity building for HIA.

You can join this network by sending an e-mail to echp@health.fgov.be with an outline of how your work relates to HIA.

The HIA Gateway



A key website for all those wanting to

learn more about HIA, run by the NHS Health Development Agency in the UK.

www.hiagateway.org.uk