





IMPACT ASSESSMENT

Social Determinants of Health Discussion Paper 8

DEBATES, POLICY & PRACTICE, CASE STUDIES

CROSS-COUNTRY ANALYSIS OF THE INSTITUTIONALIZATION OF HEALTH IMPACT ASSESSMENT

Jennifer H. Lee, Nathalie Röbbel and Carlos Dora



The Series:

The Discussion Paper Series on Social Determinants of Health provides a forum for sharing knowledge on how to tackle the social determinants of health to improve health equity. Papers explore themes related to questions of strategy, governance, tools, and capacity building. They aim to review country experiences with an eye to understanding practice, innovations, and encouraging frank debate on the connections between health and the broader policy environment. Papers are all peer-reviewed.

Background:

The institutionalization of Health Impact Assessment is a clear indicator of a country's implementation of a Health in All Policies agenda. A number of countries have developed policy frameworks and governance mechanisms for including health into other sector policies, programmes and projects through the implementation of HIA. However, differences in the political, socioeconomic and institutional settings may lead to substantial variations in the use and institutionalization of HIA. A better understanding of the enabling factors and barriers across countries could contribute to the development of more effective strategies for wider institutionalization and implementation of HIA. Thus, a cross-country analysis was conducted to provide greater insight on HIA practice.

The views presented in this report are those of the authors and do not represent the decisions, policies or views of the World Health Organization.

Acknowledgments:

The authors of this report were Jennifer H. Lee (Consultant, United States of America), Nathalie Röbbel (Consultant, France) and Carlos Dora (WHO, Geneva, Switzerland).

The authors are grateful for the invaluable input given by the health authorities and other government, academic and private institutions through the interview process. Any errors are the responsibility of the authors.

Funding for this project was provided in part by the Public Health Agency of Canada (PHAC). The collaboration of the coordinating project team members from PHAC is gratefully acknowledged, in particular, Jane Laishes, James McDonald and Andrea Long. John Dawson provided copy-editing support.

Suggested citation:

Lee JH, Röbbel N and Dora C. Cross-country analysis of the institutionalization of Health Impact Assessment. Social Determinants of Health Discussion Paper Series 8 (Policy & Practice). Geneva, World Health Organization, 2013.

WHO Library Cataloguing-in-Publication Data

Cross-country analysis of the institutionalization of health impact assessment / Jennifer H. Lee, Nathalie Röbbel and Carlos Dora.

(Discussion Paper Series on Social Determinants of Health, 8)

1.Health policy. 2.Policy making. 3.Health impact assessment. 4.National health programs. 5.Socioeconomic factors. I.Lee, Jennifer H. II.Röbbel, Nathalie. III.Dora, Carlos. IV.World Health Organization.

ISBN 978 92 4 150543 7 (NLM classification: WA 525)

© World Health Organization 2013

All rights reserved. Publications of the World Health Organization are available on the WHO web site (www.who.int) or can be purchased from WHO Press, World Health Organization, 20 Avenue Appia, 1211 Geneva 27, Switzerland (tel.: +41 22 791 3264; fax: +41 22 791 4857; e-mail: bookorders@who.int).

Requests for permission to reproduce or translate WHO publications –whether for sale or for non-commercial distribution– should be addressed to WHO Press through the WHO web site (www.who.int/about/licensing/copyright_form/en/index.html).

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by the World Health Organization in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be liable for damages arising from its use. The named authors alone are responsible for the views expressed in this publication.

Layout by www.paprika-annecy.com

Contents

ABBREVIATIONS	2
EXECUTIVE SUMMARY	3
1.INTRODUCTION	5
2.METHODOLOGY	
3.FINDINGS	
3.1 Degree of and mechanisms for institutionalization	
3.1.1 Degree of institutionalization	
3.1.2 Mechanisms for institutionalization	
3.2 Political setting and context	
3.2.1 Political support and commitment	
3.2.2 Opposition	
3.2.3 Triggers for HIA	
3.2.4 Where in the policy cycle does HIA fit?	
3.3 Framing: forms and types of HIA used	
3.3.1 Stand-alone Health Impact Assessment (HIA)	
3.3.2 Environmental Impact Assessment (EIA)	
3.3.3 Strategic Environmental Assessment (SEA)	
3.3.4 Integrated Impact Assessment (IIA)	
3.3.5 Health Lens Analysis (HLA)	
3.3.6 Scope of the health impacts assessed	
3.3.8 Comprehensiveness of HIA	
3.4 Implementation, resource requirements and structures	
3.4.1 Implementation	
3.4.2 Actors and stakeholders	
3.4.3 Capacity and pool of experts	21
3.4.4 Funding	22
3.4.5 Data availability and monitoring	
3.4.6 Knowledge transfer	
3.4.7 Public participation	
3.5 Outcomes and conclusions	
3.5.1 Factors that led to institutionalization.	
3.5.2 Integration of HIA through other assessments	
4.RECOMMENDATIONS	
4.RECOMMENDATIONS	21
4.1 Embed HIA in national normative systems	27
4.2 Clarify definition and operationalization of HIA and develop guidelines and methodological criteria	27
4.3 Strengthen and build capacity for HIA practice	
4.4 Improve cooperation between sectors	29
5.NEXT STEPS	31
ANNEX A. ANALYTICAL FRAMEWORK: KEY DIMENSIONS AND QUESTIONS ADDRESSED	32
ANNEX B. SUMMARY OF COUNTRY FINDINGS BY DIMENSIONS OF	
THE ANALYTICAL FRAMEWORK	33
REFERENCES	۸۵

Abbreviations

DG SANCO Directorate-General for Health and Consumers

EIA Environmental Impact Assessment

HIA Health Impact Assessment HLA Health Lens Analysis

IIA Integrated Impact AssessmentPHIA Public Health Impact AssessmentSEA Strategic Environmental Assessment

SIA Social Impact Assessment WHO World Health Organization

Executive summary

he World Health Organization (WHO) defines Health Impact Assessment (HIA) as a combination of procedures, methods and tools to systematically evaluate the potential effects of a policy, programme or project on the health of a population (positive or negative, direct or indirect) and the distribution of those effects within the population. There has been increasing international attention on the potential for using HIA as a way to mainstream health into sector policies, as evidenced during the World Conference on Social Determinants of Health (October 2011) and the United Nations Conference on Sustainable Development (June 2012). A number of countries have adopted legislative frameworks and governance mechanisms to consider the impact of policies, programmes or projects on health. However, differences in political, socioeconomic and administrative settings lead to substantial variations in the use and institutionalization of HIA. There is limited research on the systematic use of HIA and the institutional processes that support or impede its use. This report describes and compares the institutionalization of HIA in nine (mainly middle- and high-income) countries and the European Union to gain a better understanding of the enabling and limiting factors that could then contribute to the identification of strategies for wider and more effective implementation of HIA.

An analytical framework and sample research questions were developed based on existing HIA literature and case studies. The framework covers five areas: degree of and mechanisms for institutionalization; political setting and context; framing and type of HIA; implementation, resource requirements and structures; and outcomes and conclusions. In-depth interviews were conducted with policy-makers, experts, public health officials and other stakeholders from Australia (South Australia), Canada (Quebec), Finland, Lithuania, the Netherlands, Slovakia, Switzerland, Thailand, the United States of America and the European Commission.

The findings from the interviews showed that all countries have institutionalized HIA to a certain extent. The degree of institutionalization varied within and across countries; yet there were similarities in the mechanisms used to achieve it (for example through Public Health Acts or establishment of research centres). Drivers for the institutionalization of HIA included recognition of the importance of and need for intersectoral action; increasing international movement towards health promotion and use of HIA; support from the health sector; experiences with the institutionalization of Environmental Impact Assessment (EIA); and advancement of HIA at the local level. The key factors enabling institutionalization of HIA were legislation (for example inclusion of HIA within Public Health Acts); political willingness; involvement of research communities; awareness of the inadequacy of EIA or other assessments in considering health; capacity and resources; availability of international committal documents and tools; and public participation. Challenges to institutionalization and systematic implementation included lack of clarity around methodology and procedures; narrow definitions of health; lack of awareness of relevance to other sectors; and insufficient funding and tools. Based on their experiences, key informants from countries proposed these core recommendations: embed HIA in national normative systems; clarify definition and operationalization of HIA and develop guidelines and methodological criteria; strengthen and build capacity for HIA practice; and improve cooperation between sectors.

To support progress in the institutionalization and systematic implementation of HIA and to build on the work that is already being done, WHO could continue to advocate the systematic assessment of policies, programmes and projects in countries that have not institutionalized any form of HIA; work to improve the definition of health (determinants and impacts) and cooperate with other agencies, institutions, and organizations to develop methodology and guidelines to strengthen and systematize the coverage of health in other forms of assessments; extend work with more countries to develop governance mechanisms for healthy public policy using HIA in other sectors; and establish a global network of centres to support HIA practice.



https://www.yunbaogao.cn/report/index/report?reportId=5_28154

