Briefing on Health Impact Assessments (HIA)

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The British Medical Association (BMA) is an independent professional association and trade union representing doctors and medical students from all branches of medicine all over the UK and supporting them to deliver the highest standards of patient care. We have a membership of over 153,000, which continues to grow every year. BMA Cymru Wales represents some 7,000 members in Wales from every branch of the medical profession.

The case for Health Impact Assessment (HIA)
Pre-assessing new policies, plans or programmes in order to avoid any unforeseen negative impacts on the environment or equalities is already well-established within decision-making by public bodies in Wales. However, there is clearly also a strong case to be made that we should be equally seeking to avoid or minimise any negative impacts on the health and well-being of the Welsh population, as well as promoting positive impacts. Indeed, this would appear to be both a logical and desirable development of an already well-established approach.

It also makes sense in light of the accepted recognition that health is, to a large extent, determined by factors outside of healthcare provision. Known as the wider determinants of health, these include social and community factors; access to services; and economic and environmental factors.

It can hopefully be taken as a given that public bodies in Wales would wish to avoid negative impacts on health that could arise from decisions they might be taking, or from the application of new policies they might be adopting. But if we are considering potential deleterious consequences that are neither intended nor envisaged, it cannot simply be assumed that these will be obvious in the first instance and hence mitigated against automatically.

If such outcomes are therefore to be systematically avoided, it would seem logical that some form of pre-decision assessment needs to be undertaken before decisions are made, plans approved or new policies adopted. This would maximise the likelihood that something that might not otherwise be obvious can brought to the fore and properly considered in a timely manner.

HIA is a well-established tool that can fulfil this role. The World Health Organisation (WHO) defines HIA as ‘a means of assessing the health impacts of policies, plans and projects in diverse economic sectors using quantitative, qualitative and participatory techniques. HIA helps decision-makers make choices about alternatives and improvements to prevent disease/injury and to actively promote health.’¹ A definition known as the Gothenburg Consensus describes HIA as a combination of procedures methods and tools by which a policy, programme or project may be judged as to its

¹ http://www.who.int/hia/en/
potential effects on the health of a population, and the distribution of those effects within the population.²

As practiced in Wales, HIA assesses the implications for health and wellbeing through the broad lens of the wider determinants of health. It is a process which considers to what extent the health and well-being of a population may be affected, whether positively or negatively, by a proposed action – be it a policy, programme, plan or project. As such it can provide an opportunity to identify ways in which health benefits can be maximised as well as how health risks can be minimised. It can not only identify health impacts and health inequalities affecting the general population, but also those affecting vulnerable groups (e.g. children, young people, the elderly etc.). It can be used to identify opportunities for health improvement, as well as to fill identified gaps in service provision or delivery.

For as long as its application in decision-making by Welsh public bodies remains optional, however, its effectiveness in avoiding un-envisaged negative impacts on health – or in identifying ways in which health benefits might be maximised – will in our view be substantially reduced. It might only be through the undertaking of an HIA that an unforeseen negative impact on health might be in fact identified.

**Relationship with existing policy and legislation**

The use of HIA can also be seen as a logical progression of the current policy direction in Wales, complementing the aims of many recent developments in legislation. For instance the Active Travel (Wales) Act 2013 requires Welsh Government and Welsh local authorities to undertake continuous improvement through the development of transport infrastructure that can facilitate travel by active means – thereby helping people to undertake healthier travel options. However, whilst this will lead to a certain amount of new transport infrastructure being developed to further the aims of this Act, it is possible that other new transport infrastructure may also be developed alongside which is not assessed for its impact on health and which might therefore have an un-considered negative impact, or might not be developed in a manner which maximises the opportunities for promoting health benefits. In our view it therefore makes sense for all new transport infrastructure to be assessed for its impact on health so that health concerns can be brought to the fore whether or not the infrastructure in question is being specifically developed to further the aims of the Active Travel (Wales) Act 2013. That way Wales can adopt a more holistic approach to furthering this policy aim.

Another example of where HIA could provide added benefit can be highlighted in relation to planning considerations, where we would also argue that it might not be seen as sufficient to only require HIAs to be undertaken at the level of the over-arching Local Development Plan (LDP). Generalised land use allocations within an LDP will not necessarily reveal the impact on health that individual development proposals, which are subsequently brought forward during the lifetime of the plan, might have. It may only become apparent once the specific details of individual planning applications are known what impacts they could have on a broad-range of public policy considerations, including health. It might therefore be considered that certain categories of planning applications – e.g. housing developments above a certain size – could be subject to HIA.

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**Application**

HIA need not be overly burdensome. This is often used as an argument against their use being made a requirement, but the first stage in the process should be a screening exercise which can determine whether an HIA would both be valuable and feasible within a particular decision-making context.

In our view, it would be too simplistic to just dismiss this as a tick box exercise. A methodology could be developed which would ensure those policies, plans and programmes which should be subject to an HIA could then go on to be subject to a suitably more rigorous assessment – but for those for which this would not be necessary, this can also be straightforwardly identified.

Additionally, HIA need not be undertaken as a stand-alone process but could also be undertaken as part of a wider, but integrated, impact assessment. An example of this is the approach which was employed in Tasmania as a result of legislation introduced there in 1996. That legislation required all proposed developments requiring an environmental impact assessment (EIA) to also be subject to an HIA, with these being carried out as part of one integrated assessment.

Indeed it should be recognised that broad HIA can provide added benefits even in circumstances where EIA is already required. Even though there may be a requirement within EIA to consider human health, this may done in a manner which could be much narrower in scope than would be required in an HIA. At present, for instance, EIA undertaken in accordance with current EU regulation only looks at negative risks and implications for health, and only those which may be caused by environmental determinants.

Undertaking HIA alongside other assessments, as part of a wider integrated assessment, could be seen as a worthwhile adjunct to the recently passed Well-being of Future Generations (Wales) Act 2015 which seeks to promote a healthier Wales as one of its seven identified well-being goals. Whilst this Act requires public bodies in Wales to set objectives that will further each of these well-being goals, it does not however establish a specific requirement for Welsh public bodies to consider the impact on health of other decisions they may make, or of new policies they may adopt, when these are outside of those which are specifically being brought forward to further the aims of the Act. A mandatory application of HIA by Welsh public bodies could therefore ensure that the impact on health and wellbeing is considered more widely across the board, thereby more effectively delivering the intention of a health-in-all-policies approach.

HIA is an open and transparent process which promotes the active inclusion and participation of key stakeholders and communities affected. It can therefore ensure greater involvement of these groups in decisions that affect them. As such, it can bring reassurance in relation to certain decisions that potential impacts on health and well-being are properly understood.

**Existing requirements for HIA use in Wales**

It should be recognised that there are already circumstances in which HIA is referenced in existing guidance in Wales. Examples include the *Vibrant and Viable Places: New Regeneration Framework (2013)* which includes the need for a HIA to be included in all Stage 2 bids for Welsh Government funding; the *Welsh Transport Appraisal Guidance (WelTAG), 2008*; the *Collections, Infrastructure and Markets Sector Plan* which covers the management of waste; and the *Minerals Technical Advice*.

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Note (MTAN) 2: Coal, which provides planning advice in relation to facilities for coal extraction including open-cast mining. These include circumstances in which HIA has already been made a mandatory requirement in Wales.

Making HIA a statutory requirement
Given that there are already circumstances in which Welsh Government has specified that HIA should be undertaken, it could therefore be a logical progression to include a statutory requirement for HIA in certain defined circumstances. Indeed, such a provision could substantially strengthen the scope and impact of the recently introduced Public Health (Wales) Bill as well as being seen as an evolution of the existing approach.

The principle for HIA to be a requirement in specific situations could be incorporated on the face of the Public Health (Wales) Bill, with the intention that regulations would subsequently be produced which could then specify in exactly which particular situations a mandatory HIA would be required. That way the requirement for mandatory HIA could initially be applied in a number of discrete areas where it is most apparent that this would be of benefit, with scope for this to be easily broadened to further areas in the future. This would be a similar approach, for instance, to the manner in which the provisions of the Welsh Language (Wales) Measure 2011 are being applied.

In the first instance, we would suggest that regulations could require that HIA is made mandatory in relation to Strategic and Local Development Plans, certain larger scale planning application, the development of new transport infrastructure, Welsh Government legislation, certain statutory plans such as Local Well-being Plans, new NHS developments (e.g. new hospitals) and health service reconfiguration proposals.

Summary
We feel that a mandatory requirement for HIA in certain defined circumstances would be entirely in line with the wider Welsh Government policy direction and recent legislative developments. It would ensure greater consideration within decision-making of ways in which negative impacts on health can be mitigated against and positive health benefits maximised, thereby ensuring unforeseen impacts are avoided at the same time as providing greater reassurance for communities in the way such decisions are reached. Legislating for mandatory HIA could provide a significant contribution to improving the future health and well-being of the Welsh population, at the same time as helping Wales to become a World leader in the application of public health policy.

7 http://gov.wales/topics/planning/policy/mineralstans/2877461/?lang=en