Five Years Later: Revising Health Impact Assessment Practice Standards

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Society of Practitioners of Health Impact Assessment (SOPHIA)

- SOPHIA is an international association that provides leadership and promotes excellence in the field of health impact assessment (HIA).
- We develop high-quality resources to help HIA practitioners build capacity, provide member networking and peer mentoring opportunities, and communicate timely information on resources, training, and technical assistance opportunities.
- SOPHIA transforms HIA practice through the activities of member-led working groups.
What is health impact assessment (HIA)?

- A flexible, six-phase process that helps communities and decisionmakers identify potential health effects of decisions.
- Explores how those impacts might disproportionately affect different racial, income, geographic, and other groups.
- Makes recommendations to maximize health benefits and minimize health risks.
What is the Minimum Elements and Practice Standards (MEPS)?

- The MEPS outlines the minimum criteria that an HIA should address, as well as best practices for conducting an HIA.
- The MEPS is not an instruction manual, rather it defines the minimum to be included for a project to be considered an HIA.
- It is used by practitioners as guidance and as a tool to assess HIA work.
Why update the MEPS?

- Decreased funding for HIAs since 2014
- Shifting practice toward rapid HIAs, health impact reviews, and health notes
- Changing nature of who performs HIAs
- Larger role of health equity, HiAP
Decreased Funding for HIAs

Between 2010-2014, an average of almost 48 HIAs were conducted each year in the U.S.

Since 2014, overall HIA grant funding has decreased, along with the number of HIAs conducted yearly.
More Rapid Methods

Need for easily digestible outputs for decision makers

Lack of resources to complete comprehensive or even intermediate HIAs

Tools such as health impact review, health notes and health lens analysis are quicker but use methodology and principles of HIA
Who Conducts HIAs

Before 2014 almost 40% of HIAs conducted were led by state or local health departments

Since 2014, about 35% of lead HIA organizations were nonprofits, compared to about 30% state or local health departments

More community groups are conducting HIAs, using findings to advocate for policies that advance health and equity
Larger Role of Equity & HiAP

Equity has always been a core HIA value

HIA commonly used in the context of Health in All Policies (HiAP) as an approach to ensure consideration of health and equity in non-health issues.

SOPHIA Equity Metrics created since last MEPS update.
What has been updated?

- Iterative Nature of HIA Practice
- Equity & Stakeholder Engagement
- Specifying Key Outputs by Phase
- Making Monitoring More Feasible
Iterative Nature of HIA Practice

Shift from ‘Steps’ to ‘Phases’

Added language to scoping standards encouraging practitioners to revisit and revise their workplan throughout the process:

“The HIA team should revisit the work plan with stakeholders and revise as necessary at each phase of the HIA process. This helps ensure responsiveness to the iterative nature of HIA.”
Equity & Stakeholder Engagement

Revised minimum elements to focus on engaging stakeholders facing health inequities:

“HIA involves and engages stakeholders affected by the proposal, particularly populations that face significant barriers to health and wellbeing who may be disproportionately affected by the proposal.”
Specifying Key Outputs by Phase

Scoping example:
“The scoping output is a work plan for conducting the HIA. These work plans may vary based on the HIA scale.”

Reporting & Dissemination example:
“The HIA team should document at a minimum, the HIA’s purpose, findings, and recommendations and share these publicly.”
Recognizes resource limitations and establishes core monitoring activities:

“While many monitoring activities will not occur during an initial HIA project period, all HIAs should include some level of retrospective reflection on the process and consider how longer-term impacts and outcomes monitoring could occur when and if resources become available.”
What is the update process?

MEPS Working Group
Emily Bever, Jimmy Dills, Ruth Lindberg, Sandra Whitehead

Public webinar in March 2021

Open comment period

Peer-reviewed article
Framing Questions for Discussion

- How have you experienced these topics in your practice?
- What are some suggestions for making the MEPS more applicable for international practitioners?

U.S. Trends in HIA Practice
- Decreased HIA funding
- Shift to more rapid methods
- Change in HIA lead
- Increased focus on equity & stakeholder engagement

Do these U.S. trends resonate in your country/HIA practice?

MEPS Update Areas
- Iterative Nature of HIA Practice
- Equity and Stakeholder Engagement
- Specifying Key Outputs by Phase
- Making Monitoring More Feasible
Let’s continue the conversation!

Post questions and comments via chat in the IAIA21 platform.

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