

Evaluating health impact assessment

Introduction

This bulletin provides information for practitioners involved in planning, leading or supporting an evaluation of health impact assessments (HIAs). It is one of a series of HIA Learning from Practice bulletins. The full series covers:

- Evaluating health impact assessment
- Addressing inequalities through health impact assessment
- Influencing the decision-making process through health impact assessment
- Deciding if a health impact assessment is required (screening for HIA).

The information in this bulletin is based on the real-world practical experience of HIA

practitioners, leading academics, policy makers and commissioners involved in a variety of HIAs across the country. Much of it was shared at a Learning from Practice workshop organised by the Health Development Agency (HDA) in November 2002. Further information about the Learning from Practice workshops and copies of the other summary bulletins in this series can be found at www.hiagateway.org.uk

Evaluation should be a core part of all HIA activity. This bulletin aims to help practitioners decide what aspects of an HIA should be evaluated, and how. It uses examples of how different HIA teams have approached evaluation, and explains the particular issues associated with evaluating HIA.

Appropriate evaluation of HIA

The main types of evaluation activity that are relevant to HIA are process evaluation (as a way of learning from the experience of conducting HIA) and impact evaluation (as a way of assessing the value and worth of HIA) – see box A over. Evaluation can be undertaken in relation to prospective, concurrent and retrospective HIA.

There is growing interest in monitoring the outcomes of HIA – assessing, for example, whether the adoption of recommendations has resulted in quantifiable health outcomes (such as a reduction in road traffic deaths), the accuracy of health-related predictions, and the assumptions behind the recommendations. But suitable methods and techniques capable of tracking whether an HIA accurately predicted health impacts have not yet been developed

and tested, and the evaluation of long-term health outcomes connected to an HIA would be extremely resource-intensive. For these reasons, outcome evaluation of HIA is probably not feasible for most HIA practitioners at the present time. Health impact assessment will currently be best served if practitioners focus on process and impact evaluation instead – although practitioners with the appropriate levels of skills and resources should not be deterred from contributing to outcome evaluation.

Finally, it is worth noting the important distinction between evaluating the process of carrying out an HIA, and evaluating or appraising the proposals that are the subject of an HIA. This bulletin focuses on the former, and does not extend to the latter.

Box A - Suggested questions for evaluation

Process evaluation can provide lessons about why and how the HIA worked, including:

- How was the HIA undertaken – including details of time, place, geographic area/population group affected by the proposal, what the proposal sought to achieve, and the methods used?
- What resources (financial, human, time) were used, and what was the associated opportunity cost?
- What evidence was used, and how did it inform the development of recommendations?
- How were health inequalities assessed?
- How were recommendations formulated and prioritised (what factors influenced this decision-making process)?
- How were the decision makers involved and engaged in the process, what were their expectations, and were they fulfilled with the limited resources available?
- How and when were the recommendations delivered to the relevant decision makers?
- What did those involved in the HIA think about the process used?

Impact evaluation can consider whether, and how well, the HIA worked, including:

- How and when were the recommendations accepted and implemented by the decision makers – and what factors contributed to this?
- What are the likely reasons why recommendations were rejected?
- Were the aims and objectives of the HIA met?
- What other impacts were associated with the HIA? – eg improved partnership working, or raising the profile of local health needs and putting health on partner agencies' agendas, or organisational development and new ways of working within and across the organisations involved.

Why evaluation matters

Evaluation is an important element of public health practice. It is especially important for HIA as a developing area of practice at a time when methods, approaches and techniques are being tested and extended with each HIA. Evaluation can help to establish the following.

What works

Evaluation will provide information of value not just to the team of practitioners involved in a specific HIA, but to the wider HIA community. It can help to improve practice, showing what changes could be made to future HIAs and (through monitoring) show how current HIAs could be fine-tuned and modified. It can provide feedback on successes and challenges, and support practitioners in reflecting on, and learning from, their experiences. It can also support practitioners in assessing whether the HIA met the standards the team set for themselves. Making evaluation findings available to others will help build the evidence base and the knowledge base for HIA.

Support

By demonstrating the contribution, individually and collectively, that HIAs make to healthier public policy development, it is possible to build

a better understanding of the value and worth of HIA. Focusing on impacts (what was achieved, and how) through evaluation can demonstrate that HIA has influenced the decision-making process and the ways in which better quality decisions have resulted. Ultimately, evaluation can help generate institutional commitment to subjecting more proposals to HIA. Importantly, it can also help create realistic expectations among stakeholders of what HIA can, and cannot, achieve.

Accountability

It can be necessary to account for different things within an HIA. Funding bodies, sponsors and commissioners may require evidence that resources were used appropriately, and that stated aims were achieved. But those involved in an HIA may also find themselves accountable to the broader group of stakeholders who contributed their time, expertise and information to support the exercise. Where an HIA is seeking to shape a proposal, policy or initiative, but does not have direct influence over its development, it can be especially important to maintain the trust and good faith of stakeholders, including community representatives, by tracking how recommendations were received and acted on.

Learning from practice examples

The London Health Commission: Evaluating HIAs of the London mayoral strategies

It was agreed with the Mayor that, as part of his statutory duty to consider the health of Londoners within the mayoral strategies, the London Health Commission (LHC) will carry out independent HIAs. These will be passed to the strategy development teams, which will consider incorporating the recommendations. More information is given at www.londonhealth.gov.uk

The LHC's HIAs used a participatory approach, with a rapid appraisal format including an evidence review and large-scale stakeholder workshops. They resulted in the presentation of a report and recommendations to the Greater London Authority's (GLA) strategy development teams.

The LHC commissioned an external process evaluation of its HIA work, including concurrent evaluation of two HIAs, and retrospective evaluation of a further two. The evaluation aimed to establish how effective the particular model of HIA was in terms of influencing the final strategies; changing participants' attitudes about health and wellbeing; and involving stakeholders. It was also hoped that by publishing and

disseminating the findings, the evaluation would contribute to the development of HIA methodology nationally.

The evaluator used an action-based research methodology and worked with the HIA team members as they planned the rapid appraisal workshops. Changes made included fewer presentations, reducing the complexity of the information sent to participants beforehand, and tighter focusing of the questions and topics for appraisal. The concurrent evaluation included baseline surveys of participants and longer interviews, and looked at the process. Alongside this work, LHC and GLA staff tracked which of the recommendations were incorporated by the strategy development teams.

Early messages from the evaluation suggest that the HIAs have been successful in influencing strategy development. Further information is available from caron.bowen@lho.org.uk

With thanks to Caron Bowen, HIA Facilitation Manager, London Health Observatory

Cambridge Health Authority: Evaluating an HIA of the Alconbury development

In August 1999 Cambridge Health Authority (CHA) commissioned an external evaluation of the proposed development of the former US Air Force base at Alconbury. The evaluation was overseen by ACET (Anglia Clinical Audit & Effectiveness Team; now called ALPHA, Access to Learning for the Public Health Agenda), and funded by the Department of Health. The objectives of the evaluation were to:

- Ensure the HIA had been carried out in a structured and systematic way following the Merseyside Guidelines
- Ensure the HIA had achieved its own objectives
- Facilitate the development of an HIA methodology template for future use.

The evaluation was not intended to assist or interfere with the HIA in any way, and focused on an audit of the methodology only, rather than the underlying decisions and assumptions of the HIA.

The external auditor worked closely with the HIA team and was given full access to all relevant meetings and documents; this was seen as key to the success of the evaluation.

Constructive notes were sent by the auditor to the steering group after each meeting, which offered the opportunity for ongoing improvements to the process.

The HIA team found the recommendations from the evaluation very helpful – both during the process, and to follow up after the process. The team identified the following learning points.

- Think about evaluation at the beginning of the HIA process and incorporate someone to evaluate as you go. This particular HIA was able to change some aspects of the work in progress based on recommendations from the evaluator
- Once the HIA is complete and the evaluation recommendations have been provided, make sure they are followed up – the CHA team learned a lot by doing so. Make sure you evaluate again, once the changes have been made.

With thanks to Cheryl France, Public Health Manager, Department of Health and Social Care, Midlands and East of England

Challenges in evaluating HIA

Making sure it happens

Health impact assessments are frequently carried out by a project team specifically assembled for a single HIA. They commonly take place intensively, over a short period, to ensure recommendations are available to fit with decision-making timetables. In such situations, when the main focus is on getting the HIA 'done', it can be difficult to establish who should have responsibility for leading, planning and undertaking an evaluation. Providing the leadership to ensure that evaluation takes place, and that the involvement of the people necessary to achieve this does not come to an end with the delivery of the HIA recommendations, is a key challenge for this area of practice.

Resources

The responsive nature of many HIAs, which often have to react to rapidly unfolding external events, means there can also be particular pressure on resources other than time. Even where an HIA has been anticipated and budgeted for, the share of the budget available to support evaluation can be under pressure. Lack of resources should not influence whether evaluation is undertaken. Rather, evaluation activities should be planned within the resources available.

Working with stakeholders

The often wide range of stakeholders, partners and sponsors involved in an HIA is a strength –

but it also poses challenges. It can be necessary to address a number of different audiences when you are communicating your conclusions, and to include a wide range of objectives and monitoring criteria in an evaluation design to reflect their different interests. There may be pressure to demonstrate particular benefits and achievements, but setting unrealistic objectives will result in an evaluation that disappoints.

Where to start ... and stop

Finally, many practitioners find that choices about evaluation design are made harder by the difficulty of defining where HIA starts and stops. It is becoming increasingly common for HIA to be included as part of an integrated impact assessment, also addressing other environmental or economic factors. In such cases, evaluating the specific health component can present a particular challenge. Even in a straightforward HIA, it is important at the outset to define a cut-off point at which evaluation will occur, to avoid too much complexity.

Although these aspects of HIA practice make evaluation challenging, experience from practitioners shows that meaningful and highly valuable evaluations of the HIA process, and whether it has influenced the decision-making process, can be undertaken. Related to this, it is important to emphasise that the evaluation is about HIA activity – how and what was achieved – rather than about evaluating individuals involved in the HIA.

Promising practice guidance

Getting it right from the start

Any evaluation should follow some basic steps to ensure it is comprehensive and achievable. A clear plan from the outset, linked to aims and objectives, is essential. While there is no single right way, the following prompts may be useful to consider.

Plan your evaluation

- ♦ First, establish an evaluation plan in line with your stated aims and objectives. Be clear about the focus of the evaluation.
- ♦ Aims and objectives are the starting point of any evaluation activity. They should influence the framework you adopt, and the design of the evaluation as a whole.
- ♦ Be clear about what you hope to achieve through your HIA. Then select the specific issues you want to learn more about.
- ♦ In many models, evaluation is seen as a stage of HIA. It is important to consider how to build in evaluation right at the start of the planning stage.
- ♦ Consider involving stakeholders in planning the evaluation. Make sure they understand that the evaluation aims to share learning, rather than evaluate individual performance.

Identify the evaluation questions and research tools

- ♦ Establish what information will be required. Consider including some of the questions in Box A.
- ♦ Identify data sources for the evaluation, and clearly allocate responsibility for gathering this information so that team members are clear what they need to do at particular points in time. Start early, so that baseline information can be captured.
- ♦ Consider whether routine monitoring information already collected by the organisations involved could be of use, to reduce the burden on staff, and as a way of integrating follow-up and monitoring of HIA into ongoing work.
- ♦ Choose and apply appropriate research tools (the type of data required in line with the questions you have identified), and decide how these data will be analysed.
- ♦ The choice of core questions should be endorsed by the whole team, including managers and key stakeholders.

Establish clear leadership

- ♦ Make one person responsible for leading the evaluation.
- ♦ Obtain the commitment of stakeholders, sponsors, and the project team.
- ♦ Explain the benefits that evaluation will bring.
- ♦ Be clear that the involvement in evaluation of some of the project team may extend beyond the end of the HIA, and secure agreement from employers where necessary.
- ♦ Where possible, obtain agreement to conduct an HIA and its evaluation at the early stages, when proposals and options are first being formulated. Publicise this commitment – knowing that proposals will be subject to HIA and an evaluation can encourage policy makers and planners to be more conscious of health considerations.

Plan for dissemination

- ♦ Consider your audiences, and how best to communicate with them.
- ♦ Have a range of objectives, and agree in advance to whom they are of interest, and how you will report on them.
- ♦ Make sure the objectives are realistic, and that progress towards them can be demonstrated.
- ♦ The questions and topics you eventually choose should correspond with the explicit aims and objectives of the HIA; reflect the interests and learning needs of the project team; and reflect the specific interests of stakeholders, partners and sponsors.
- ♦ Consider how you will follow up on the recommendations from the HIA, and plan a longer-term communications strategy that will operate up to the time when proposals are being implemented.

Consider resources, costs and benefits

- ♦ Try to be clear about the costs and resources involved, including skills and experience, time and participation of stakeholders, including the wider community.
- ♦ Other costs, such as venue hire and administration, can be considerable if public meetings are involved.
- ♦ Whatever resources you have, some level of evaluation is always of benefit. Do whatever you can manage. Cut your cloth to fit your means.

Further information

The HIA Gateway website

www.hiagateway.org.uk provides access to HIA-related resources, networks and information to assist those participating in the HIA process. The site is designed for both beginners and seasoned HIA practitioners. Both case studies used in this bulletin are available as full reports on the website, under the 'Resources' section (Completed HIAs).

The website also features a further case study of a descriptive process evaluation undertaken

on the Fittingly Airport HIA. An impact evaluation of this HIA is currently under way and the report, when available, will also be on the website.

To add to the website information about your HIA, toolkit or resource, or your contact details, go to the 'Contact us' section and follow the simple instructions.

The following general texts on evaluation are a good source of ideas and advice on methods and tools

Hawe, P., Degeling D. & Hall S. (1994) *Evaluating health promotion. A health workers' guide*. MacLennan & Petty, Sydney.

McKie, L., Barlow, J. and Gaunt-Richardson, P. (2002) *The evaluation journey: an evaluation resource pack for community groups*. Action on Smoking and Health, Edinburgh.

Nutbeam, D. and Harris, E. (1999) *Theory in a nutshell: a guide to health promotion theory*. McGraw-Hill Education, Sydney.

Robson, C. (2000) *Small-scale evaluation*. Sage, London.

Scott-Samuel, A., Birley, M., Arden, K., (1998) *The Merseyside Guidelines for health impact assessment*. University of Liverpool, Liverpool.

Springett, J. (1999) *Practical Guidance on evaluating health promotion on behalf of the WHO-Euro Working Group on Evaluation of Health Promotion*. WHO Regional Office for Europe.

http://cwis.livjm.ac.uk/inst_health/WHO/title.htm
Thorogood, M. & Coombes, Y. (2000) *Evaluating health promotion: practice & methods*. Oxford University Press, Oxford.

Learning from Practice workshops

The HDA held a series of Learning from Practice workshops at the end of 2002/03. Attended by expert practitioners and academics, these workshops demonstrated the value of sharing

real-life experience of a number of aspects of HIA. A report of the workshops can be found at www.hiagateway.org.uk

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