

November 2015

## HEALTH ASSESSMENT TOOL 3

# HAPI HEALTH ASSESSMENT WORKSHOP



Photo by Ann Forsyth

Version 1.2

The HEALTH AND PLACES INITIATIVE (HAPI) investigates how to create healthier cities in the future, with a specific emphasis on China. Bringing together experts from the Harvard Graduate School of Design (HGSD) and the Harvard School of Public Health (HSPH), it creates a forum for understanding the multiple issues that face cities in light of rapid urbanization and an aging population worldwide.

Health and Places Initiative  
<http://research.gsd.harvard.edu/hapi/>  
Harvard Graduate School of Design

Copyright 2015 President and Fellows of Harvard College.

As is typical practice feel free to use and cite small parts of this work, with attribution. If you want to use substantial parts, or even this entire document, the following applies. Permission is granted for use for nonprofit education purposes for all of the work except third party materials incorporated in the work, which may require permission from the authors of such material. For permission to use this work in other circumstances, contact the Harvard Graduate School of Design: [hapi@gsd.harvard.edu](mailto:hapi@gsd.harvard.edu).

The following people were involved in the health assessment series:

Series Editors: Ann Forsyth, Emily Salomon, and Laura Smead

Contributors: Ann Forsyth, with Chuan Hao (Alex) Chen, Stephany Lin, Yvonne Mwangi, Emily Salomon, and Laura Smead

Testing: Peter Rowe, Har Ye Kan, ChengHe Guan, YingYing Li, David Mah, Leire Ascencio, Yannis Orfanos, Weishun Xu, Bingjie Shi, and Yujun Yin

Copy Editor: Tim Czerwienski

Thanks to Weishun Xu and Wei Li, and to Patrick Harris and Anna Ricklin for their helpful comments.

## CONTENTS

<b>Introduction.....</b>	<b>6</b>
The tool in brief.....	6
What makes this tool special compared with other health workshops.....	7
Process checklist.....	8
Process flow chart.....	8
<b>Starting the Process.....</b>	<b>9</b>
Step 1: Identify the plan, program, process, or existing area to be assessed.....	9
Step 2: Screening and scoping.....	10
Step 3: Getting people in place for a half-day health assessment workshop.....	10
Step 4: Planning the overall tasks and timeline of the health assessment workshop.....	12
<b>Getting Information Together for a Health Assessment Workshop.....</b>	<b>13</b>
Step 5: Doing an inventory of existing plans and policies (and relevant projects).....	13
Step 6: Creating a profile of the area.....	14
Step 7: Talking with people who are affected, interested, or have expertise.....	15
Step 8: Compiling alternatives or comparisons.....	16
Step 9: Predicting impacts.....	17
Step 10: Selecting workshop participants.....	18
Step 11: Preparing and sending materials to workshop participants.....	18
<b>Running the Workshop.....</b>	<b>19</b>
Step 12: Developing the agenda.....	19
Step 13: Developing specific activities.....	19
Step 14: Running the health assessment workshop.....	20
<b>Writing the Results and Moving Forward.....</b>	<b>20</b>
Step 15: Writing the results.....	20
Step 16: Implementing the Results.....	23
Step 17: Evaluating the process.....	23
<b>References.....</b>	<b>24</b>

## LIST OF FIGURES

Figure 1. Health Assessment Workshop Process Flow Chart.....	8
Figure 2. Sample Health Assessment Workshop Planning Timeline .....	12
Figure 3. Organizational Chart of Types of Stakeholders .....	15
Figure 4. Comparison of Health Determinants for Olympic Games Versus No Games .....	16
Figure 5. Arden Hills Table of Health Determinants and Impacts for Composite Plan Alternative .....	17
Figure 6. Background Information for the Devens, MA Health Impact Assessment .....	18
Figure 7. Arden Hills HIA Workshop Agenda .....	19
Figure 8. Posters Communicating Findings of the Cambridshire Health Authority’s HIA .....	21
Figure 9. Summary Table of Status, Goals and Policy Approaches for Ramsey, MN HIA .....	22

## LIST OF TABLES

Table 1. Summary and Comparison of the three HAPI Health Assessment Tools.....	6
Table 2. Types of Plans to Assess During a Health Assessment Workshop.....	9
Table 3. Sample Plans and Policies to Survey for an HIA Background Report.....	13
Table 4. Identifying Impacts of Proposals.....	19

## INTRODUCTION

This tool explains how to run a half-day health assessment workshop. The associated How to Guide focuses on how to prepare background materials for the workshop, detailed workshop logistics, and a final report of the health assessment.

### THE TOOL IN BRIEF

The HAPI Health Assessment Workshop, unsurprisingly, centers on a half-day workshop bringing together key stakeholders and experts to investigate the health of a place or a proposal for a place.

There are three basic phases to developing and implementing the workshop:

1. A steering committee, which may be based off an existing planning group, selects participants and oversees preparation of a background report that participants read before the workshop.
2. The workshop is carefully facilitated to bring together local experiences and concerns with those of experts—people learn from each other—and to prioritize actions.
3. Results are reported to those who can influence the plan or place.

This specific workshop format is one in a suite of health assessment tools that caters to different stages of the planning and design process. Each step uses different types of information.

### WHY DO A WORKSHOP?

- Jumpstart or reenergize a longer process.
- Provide a structured forum for people from different constituencies to interact.
- Meet a deadline for providing input.

### HOW YOU CAN ADAPT THE TOOL

This tool can be seen as a series of steps, with suggestion on how to carry out each step. Some variation will occur naturally because of different amounts of information available. However, the steering committee can choose to adapt the process in several ways—different compositions of participants, variations on workshop activities, and differences in reporting. We suggest these variations throughout.

Table 1. Summary and Comparison of the three HAPI Health Assessment Tools

	Health Assessment Type	Planning and Design Stage	Data and Analysis Needs	Time
<b>Tool 1: Screening Survey of Health in Place (SSHIP)</b>	Screening and scoping	Review draft plan or existing area	Proposal data, data on existing area	Short
<b>Tool 2: Health Opportunities Checklist (HOC)</b>	Desktop	Review draft plan	Proposal data, data on existing area	Medium
<b>Tool 3: HAPI Health Assessment Workshop</b>	Workshop	Review draft plan or existing area	Proposal data, information about health context, interviews	Medium

The most recent versions of these three health assessment tools, SSHIP, HOC, and HAPI Workshop, are available at <http://research.gsd.harvard.edu/research/tools/health-impact-assessment-tools/>.

## INTRODUCTION

### WHAT MAKES THIS TOOL SPECIAL COMPARED WITH OTHER HEALTH WORKSHOPS

The HAPI Health Assessment Workshop is an approach to health assessment aimed at urban planning and design topics and concerns. With roots in the rapid health impact assessment (HIA) format it **brings together local and expert knowledge in one process including familiarity of the connection between the built environment and health**. Many other health assessment processes are generic in nature to cover a broad range of topics—from farm policy to mental health services, for example. Other health assessments focus closely on one concern of public health such as free vaccination programs.

Like traditional rapid health impact assessments this process is centered on a half-day workshop, with substantial preparation before and reporting after. However, this format lends itself to being led by **a champion outside of the public health field**. Health expertise is crucial, but not everyone leading such an effort needs to come from such a background.

In order for a champion of any background to lead a health assessment workshop, this tool **links the process to a body of HAPI Research Briefs** <http://research.gsd.harvard.edu/hapi/research/research-briefs> that go beyond commonsense understandings about health environments held by professionals and lay people. This is important because planners and lay people may not be familiar with health research. Even public health professionals may not be familiar with the most recent evidence about the relationship between health and place.

In many parts of the world planning processes include substantial involvement by public stakeholders and/or key decision-makers. The HAPI Health Assessment Workshop model **leverages this existing capacity** by proposing flexible strategies for workshop format.

Finally, most health impact assessments are designed to look at the impacts of a proposal or plan compared with the static state of doing nothing. **The HAPI Health Assessment Workshop can also be used to evaluate the health and environment of an existing place (outside of a proposed project or plan)** and aid in deciding if a new plan or proposal is needed.

The HAPI Health Assessment Workshop can be done as a simple series of steps (see page 8).

### Starting the Process

#### RESEARCH BRIEF TOPICS INCLUDE:

##### *Built Environment Qualities/Exposures*

1. Air quality
2. Disasters
3. Noise
4. Toxics
5. Water quality
6. Climate change
7. Housing

##### *Connections*

8. Access to community resources
9. Geographical access to healthcare
10. Social capital
11. Mobility and universal design

##### *Health-related Behaviors and Outcomes*

12. Physical activity
13. Mental health
14. Healthy food options
15. Safety (accidents, crime)

##### *General*

16. Physiology and psychology of aging

# INTRODUCTION

## PROCESS CHECKLIST

- Step 1: Identify the plan, program, process, or place to be assessed
- Step 2: Screening and scoping
  - Complete Screening Survey of Health in Place (SSHIP) checklist to determine if further assessment is needed
- Step 3: Getting people in place for a health assessment workshop (some of the following can overlap)
  - An organizer or project manager to coordinate the work
  - A technical staff member or members to do the background reports etc.
  - A steering committee to make sure the right people are at the table and the process makes sense
  - Informants to provide local and expert tips
  - Workshop participants
- Step 4: Planning the overall tasks and timeline of the health assessment workshop

### Getting Information Together for a Health Assessment Workshop

- Step 5: Doing an inventory of existing plans and policies
- Step 6: Creating a profile of the area
- Step 7: Talking with people who are affected, interested, or have expertise
- Step 8: Compiling alternatives or comparisons
- Step 9: Predicting health impacts
- Step 10: Selecting workshop participants
- Step 11: Preparing and sending materials to workshop participants

### Running the Workshop

- Step 12: Developing the agenda
- Step 13: Developing specific activities
- Step 14: Running the event

### Writing the Results and Moving Forward

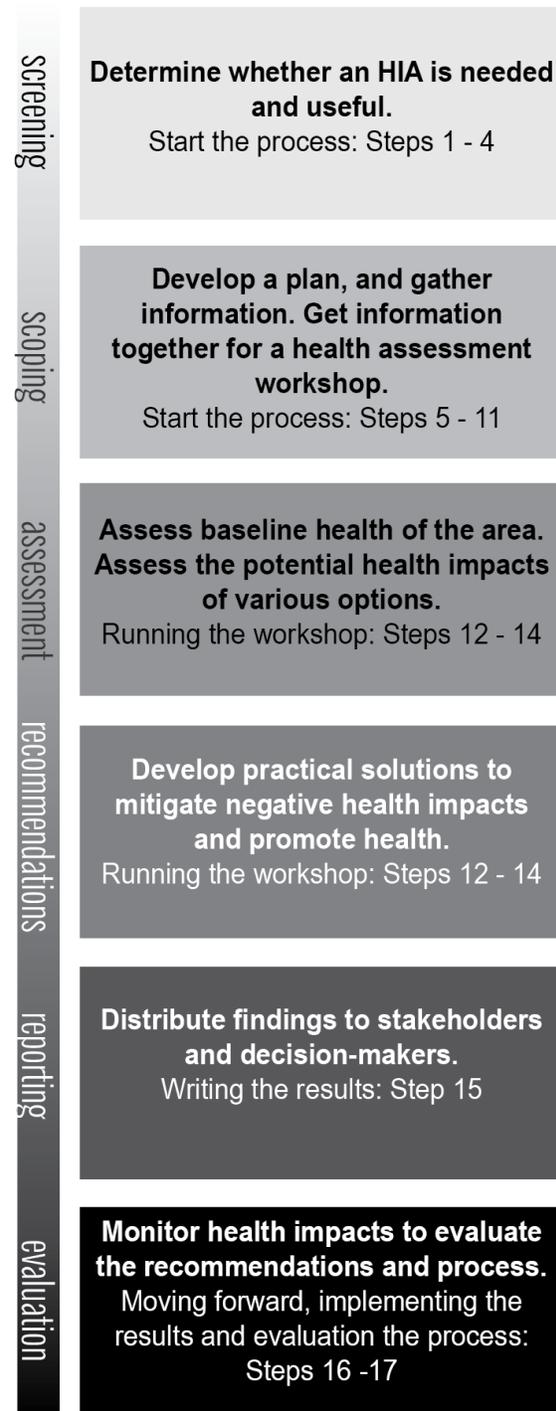
- Step 15: Writing the results
- Step 16: Implementing the Results
- Step 17: Evaluating the process (though realistically few people do this, it is a best practice)

Source: Adapted from Ison 2002, *Design for Health* 2008.

## PROCESS FLOW CHART

The process flow chart below illustrates how the workshop process fits within the overall framework of conducting a Health Impact Assessment.

Figure 1. Health Assessment Workshop Process Flow Chart



## STARTING THE PROCESS

### Step 1: Identify the plan, program, process, or existing area to be assessed

- This step is straightforward—you should have an idea of a neighborhood or a project to assess before proceeding to Step 2.
- However, it could be that different people are interested in conducting a health assessment but have different views of its focus.
- You do not have to come to substantial agreement at this time but you should have some idea of its (a) geographical extent, (b) key stakeholders, and (c) some potential health issues before proceeding to the next stage.

Table 2. Types of Plans to Assess During a Health Assessment Workshop

<b>Scale</b>	<ul style="list-style-type: none"> <li>• Neighborhood</li> <li>• Local</li> <li>• Regional</li> </ul>
<b>Project</b>	<ul style="list-style-type: none"> <li>• Transportation plans (including mass transit, pedestrian, etc.)</li> <li>• Land use projects and siting</li> <li>• Zoning controls, codes, and variances</li> <li>• Redevelopment and master plans</li> <li>• Growth plans</li> <li>• Infrastructure projects</li> <li>• Community institution projects</li> <li>• Neighborhood sub-district study</li> <li>• Affordable housing projects</li> <li>• Siting of special uses</li> </ul>

Source: Adapted from Rhodus et al. 2013, 16.

Past HIA workshops include topics as varied as:

**Site redevelopment proposals:** The City of Arden Hills, Minnesota (USA) conducted an HIA workshop for the proposed redevelopment of the Twin Cities Army Ammunition Plant. Workshop participants evaluated health benefits and issues with the site as is, compared to a redevelopment plan that would open the site for other uses such as housing, commercial use, and open space (Forsyth et al. 2010).



Participants from the Arden Hills, MN HIA workshop.

**Site construction and operation:** In preparation for the London Olympics bid, the London Health Commission and London Development Agency conducted a workshop to assess the health impacts of constructing infrastructure and facilities to host the Olympic Games (Buroni 2004).

**Town branding and revitalization:** The Denbighshire County Council in Wales (UK) convened a workshop to engage community members around a local re-branding effort to foster greater revitalization and socioeconomic well-being (WHIASU 2010).

## STARTING THE PROCESS

### Step 2: Screening and scoping

- Screening investigates whether the project or place has potential health issues that are substantial enough to warrant investigating further.
- Scoping focuses in on which topics and issues to investigate.
- Such tools also assess the likelihood that a more elaborate health assessment will contribute to changes in the plan or proposal, leading to positive health outcomes.
- This step is completed to determine if it is worth convening a workshop. A workshop costs time and money—it is only worth doing if the benefits are likely to outweigh the costs.
- There are a number of screening and scoping tools but the Screening Survey of Health in Places (SSHIP) is one viable tool developed as part of the HAPI project. There are benefits to using and adapting existing tools, where possible. For example, it's useful for comparing across health impact assessments.

### Screening Survey of Health in Place (SSHIP)

The Health and Places Initiative (HAPI) developed the Screening Survey of Health In Places (SSHIP), a health assessment screening and scoping tool for urban (re)development projects or proposals at a site and neighborhood scale. The tool aims to help:

- Determine whether the costs of doing a more resource-intensive assessment are outweighed by its benefits
- Identify, in a preliminary way, which health issues are likely to be of concern

SSHIP gets at these goals through four sets of pointed questions about available information regarding the project or proposal, the reasons conducting a health assessment may or may not be relevant, whether carrying out a health assessment is a suitable use of resources, and what specific activities and types of places might trigger health effects if the project or proposal is operationalized.

Click here (<http://research.gsd.harvard.edu/hapi/research/tools/health-impact-assessment-tools/>) to view the SSHIP.



Screening exercises help to determine whether an HIA is warranted.

### Step 3: Getting people in place for a half-day health assessment workshop

- A health assessment workshop benefits from having a **lead organizer** to manage the moving parts involved in coordinating a workshop. The **organizer** may be a champion of the health assessment process but they may well work with a higher-level decision maker who is able to implement the recommendations made by the health assessment process.
- **Technical staff** can be in house or consultants. They are needed to prepare the background materials, facilitate the meeting, prepare the final report, etc. For a small project, the organizer may be able to take this on but it generally involves a different skill set. It may be helpful having more than one person involved to complete these tasks.
- **A steering committee** is more important than it sounds. This group should have representatives from various constituencies and stakeholder entities.

There are two basic strategies to convene a steering committee:

- The steering committee can be set up especially for this project and start to build a coalition to implement changes. Ideally the whole is bigger than the sum of the parts.
- It can also build on an existing steering committee or working group, maybe with a few interdisciplinary additions.

Photo by Ann Forsyth

## STARTING THE PROCESS

How much the steering committee needs to meet varies with the complexity of the project and the purpose of the health assessment. If this process is in part a catalyst for getting important groups to collaborate then it may need to meet more often. However, if the organizer or project manager is efficient and/or an existing working group is used, there may be few special meetings. In any case, it can be helpful to spell out specific roles and responsibilities in a memorandum of understanding among steering committee members.

- **Informants** are people who don't attend the workshop (at least not necessarily) but provide input on various specialist topics from local history to technical aspects of public health.
- Workshop **participants** are typically carefully selected to represent a range of stakeholders. They also need to be prepared to do work in advance—at least reading the background materials. To ensure a balanced cross-section of participants, RSVPs are needed. More detail is provided in the How to Guide.

### Liverpool Mutual Homes Health Impact Assessment

Liverpool Mutual Homes (LMH), a tenant-led housing organization in Liverpool (UK), commissioned an HIA to assess physical investments and upgrades to the social housing units they operated. To oversee the HIA, a steering group was convened with representatives including:

- Tenants
- LMH staff
- LMH board chair
- Construction company
- Researchers

Source: Birley et al. 2009, 96.



Photo by Ann Forsyth

Health Assessment informants may provide input on local history or resident concerns.

### Birmingham, England International Airport Health Impact Assessment

The Birmingham International Airport (UK) commissioned an HIA to assess a proposed runway extension.

They consulted **key informants** with experience in:

- Airport HIA's
- Noise in relation to health
- Air quality in relation to health
- Aviation
- Employment
- Social capital
- Climate change

They identified the following participant **stakeholders**:

*Community stakeholders:*

- Populations proximal to development
- Populations adjacent to airport/flight paths
  - People with respiratory conditions
  - People with cardiovascular conditions
  - People of working age
- People with poor mental health
- Children
- Elderly
- Transport users
- People with disabilities
- Recreation and environment users

*Organizational stakeholders:*

- Policy proponents
- Economic associations
- Transport planners
- Community services
- Health and emergency services

Source: Abrahams et al. 2008, 152-155.

## STARTING THE PROCESS

### Step 4: Planning the overall tasks and timeline of the health assessment workshop

At this stage it is useful to plan out the project timeline and tasks, which need to be matched to staff and volunteer schedules. Most of the specific tasks are outlined in the rest of this document. See Figure 2 below and Table 3 in the Tool 3 How To Guide as examples.

Figure 2. Sample Health Assessment Workshop Planning Timeline

	1/1	1/6	1/11	1/16	1/21	1/26	1/31	2/5	2/10	2/15	2/20	2/25	3/2
Decision to conduct HIA workshop	■												
Reach out to informants		■	■	■									
Research and write report, and compile area profile		■	■	■	■								
First steering group meeting			■										
Select workshop participants			■	■									
Design workshop activities			■	■	■								
Send materials to participants						■							
Second steering group meeting						■							
Deadline for RSVP's from participants							■						
Hold workshop								■					
Write the results									■	■			
Third steering group meeting										■			
Send report to informants and participants											■		
Implement results												■	■
Evaluate the proces												■	■

## GETTING INFORMATION TOGETHER FOR A HEALTH ASSESSMENT

This section describes the basic information needed as background for the half-day health assessment workshop. A separate How To Guide explains in more detail exactly how to prepare this report, and will be of interest to the technical staff doing the work. Here we give an overview relevant to the workshop organizer and steering committee. The How to Guide can be accessed online (<http://research.gsd.harvard.edu/hapi/research/tools/health-impact-assessment-tools>).

### Step 5: Doing an inventory of existing plans and policies (and relevant projects)

- When doing planning and design work, including assessing an existing area, it is typical to document relevant existing plans, policies, regulations, and projects (e.g. proposed large buildings, transportation infrastructure upgrades, park redevelopments).
- For a health assessment workshop this is all relevant but it is important to take an additional step and also examine plans, policies, and programs related to public health. These might include clean water plans, walking programs, or senior support activities.

#### State Route (SR) 520 Bridge Replacement Health Impact Assessment

In 2008, the public health and clean air agencies in the Puget Sound region of Washington State (USA) conducted an HIA to determine the health impacts of replacing a major bridge to address the changing transportation needs of the region. The HIA background report includes issue papers on a range of health topics, each referencing existing plans and policies, and studies of comparable bridges/highway projects. This table provides a sample of existing plans and policies inventoried, by issue area as part of the HIA

Table 3. Sample Plans and Policies to Survey for an HIA Background Report

Issue Paper Topic	Sample of Plans, Policies and Projects Reviewed
<b>Emergency Medical Services</b>	<ul style="list-style-type: none"> <li>• 2007 King County EMS Annual Report</li> <li>• State Legislature Code on first responder's minimum agency response times</li> </ul>
<b>Noise</b>	<ul style="list-style-type: none"> <li>• Previous Washington State Department of Transportation (WSDOT) studies on effects of bridge designs on noise (including four- and six-lane design options)</li> <li>• Previous studies and evaluations of highway noise control used in Colorado and Minnesota</li> </ul>
<b>Safety</b>	<ul style="list-style-type: none"> <li>• Report on King County pedestrian fatalities</li> <li>• Statewide bicycle facilities and pedestrian walkways plan</li> <li>• Seattle pedestrian safety campaign</li> <li>• Statewide pedestrian/bicycle public attitude survey</li> <li>• Annual demographic, economic, transportation, and other planning data available via Puget Sound Regional Council</li> </ul>
<b>Social Connections</b>	<ul style="list-style-type: none"> <li>• Washington Dept. of Health report on social determinants of health</li> <li>• Seattle &amp; King County Public Health Department report on social and health indicators</li> </ul>

Source: Fleming and McLerran 2008, 55-58, 65-74, 83-84.

## GETTING INFORMATION TOGETHER FOR A HEALTH ASSESSMENT

### Step 6: Creating a profile of the area

A profile of the area is typically created when working on planning and design projects and assessments. In preparing for the health assessment workshops there are two main differences:

- First, area data needs to be analyzed and presented though the lens of health. This may be a fairly simple activity, but for some design teams not trained in using social statistics, it may be a more challenging process that requires technical help.
- Second, health data from the project or proposal area—from air quality to eating patterns—needs to be identified and incorporated in to the background report. Unfortunately, high quality health data are rarely available for small areas such as neighborhoods or even small cities. There are also numerous problems interpreting health data (e.g. people's health is often the result of factors other than their current neighborhood or workplace environment) from their biological inheritance to their past life circumstances. More guidance is provided in the How To Guide (<http://research.gsd.harvard.edu/hapi/research/tools/health-impact-assessment-tools/>).

### Welsh Health Impact Assessment Support Unit: BRAND Project

The Denbighshire County Council in Wales (UK) convened a workshop to engage community members around a local re-branding effort to foster greater revitalization and socioeconomic well-being. Before the workshop, organizers used a previous study to identify vulnerable groups in the town to include in their area profile. These groups included:

1. Age-related groups, such as children and older people
2. Income-related groups, such as low-income or unemployed populations, or those unable to work due to ill health
3. Socially disadvantaged groups, such as people with disabilities, refugees, asylum-seekers, single-parent households, and minority groups
4. Geographically disadvantaged groups, such as persons living in isolated areas or areas known to exhibit poor health indicators

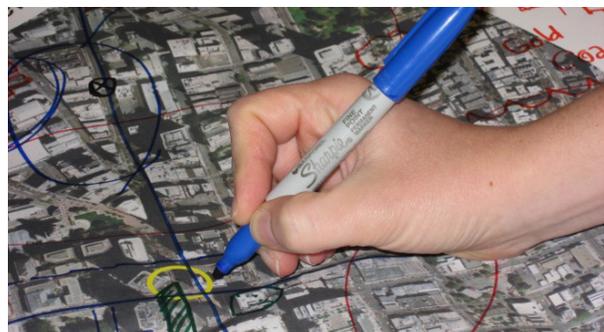
Source: WHIASU 2010, 11.

### Lowry Avenue Corridor, Phase 2 Health Impact Assessment

Hennepin County, Minnesota (USA) staff conducted an HIA to assess impacts of reconstruction of the Lowry Avenue Corridor in downtown Minneapolis, specifically around transit and connectivity improvements and attracting investment and services. The area profile in the neighborhood study included:

- Demographic information of impacted neighborhoods compared to the city and county, including total population, percent below poverty, percent under age 19, and racial makeup
- Recent demographic trends, including population and racial diversity increases
- Family and community indicators, including housing security data, crime data, and survey results
- Health indicators, including rates of obesity, diabetes, asthma, high blood pressure, high cholesterol, and survey results

Source: Lezotte-Anderson et al. 2007, 6-9.



Maps can be helpful when creating a profile of the area, either on paper, or with GIS.

Photo by Ann Forsyth

## GETTING INFORMATION TOGETHER FOR A HEALTH ASSESSMENT WORKSHOP

### Step 7: Talking with people who are affected, interested or have expertise

- Stakeholders have a wide variety of knowledge that can provide background information to frame issues related to the project or proposal, local area, or technical aspects of the place.
- It is important to talk with people to both identify likely health issues and also get a sense of the range of opinion that should be represented at the workshop, either in person or by having their views represented in the report.
- Characteristics of the stakeholders, including their interest and position in the issue, and influence/power in the decision making process can be analyzed to 1) determine how much attention to give to each stakeholder, and 2) as a tool to understand and influence future directions of the plan or proposal (Varvasovszky and Brugha 2000, 343). See Table 1, page 16 in the How To Guide for an example of how to display these characteristics in the background report.

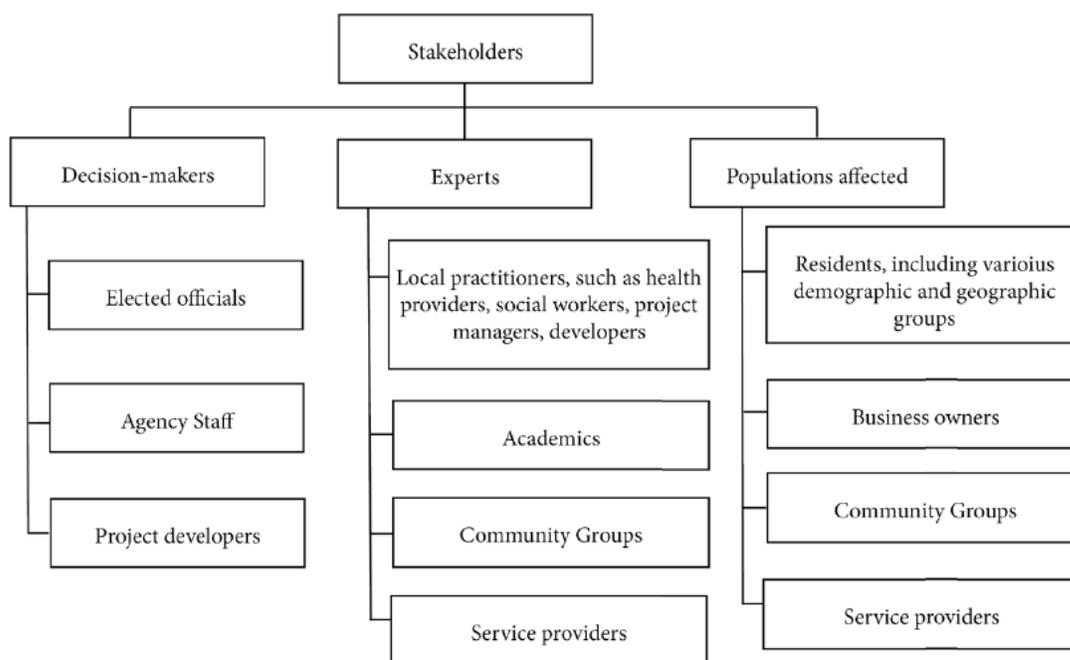


Photo by Ann Forsyth

Stakeholders voting on different health impacts.

Figure 3 illustrates a range of stakeholders that can be interviewed or consulted with to provide local knowledge, expertise and range of options to be addressed during the health assessment workshop.

Figure 3. Organizational Chart of Types of Stakeholders



## GETTING INFORMATION TOGETHER FOR A HEALTH ASSESSMENT WORKSHOP

### Step 8: Compiling alternatives or comparisons

- For projects and plans, alternatives are important because it can be useful to weigh other options, even if it merely involves the current situation continuing. For example, is the situation improving anyway even without the proposed project?
- For places, this is a bit trickier but can include comparisons with nearby locations, similar places, or areas with features that may be perceived as particularly good or bad.
- This step is often omitted as it involves collecting comparable profile data (i.e. doing Step 6 twice).

#### The London Health Commission and the London Development Agency Olympic Games Health Impact Assessment

In preparation for their city's bid for the 2012 Olympic Games, the London Health Commission and the London Development Agency compared their analysis of the Games health impacts against a 'No Games' scenario. This scenario was based on programs and conditions already existing in the area.

The comparison was a key factor in their findings and conclusion. The HIA team and workshop participants found that not holding the Games would be riskier for health. Many of the risks associated with the Games would have happened regardless due to existing trends, while hosting the Games would provide added benefits.

Figure 4. Comparison of Health Determinants for Olympic Games Versus No Games

	With Olympic Games Scenario			'No Games' Scenario	
	Construction (2006-2012)	Hosting (2012)	Post Olympics (2012-2020)	Construction	Operation
Environment (land quality)	xx	☑☑☑	x/☑☑☑	xx	☑☑☑
Air Quality	xx	☑☑☑	x/☑☑☑	xx	☑☑
Noise	x	xx	x	x	x
Employment and Income	x/☑☑	☑☑☑	☑☑☑	☑☑	☑☑
Education and training	☑☑	☑☑☑	☑☑☑	☑☑	☑☑☑
Physical activity	x/☑	☑	☑☑☑	x	☑☑
Access to services and amenities	x/☑	☑☑	☑☑☑	x	☑☑
Traffic and transport	x	☑☑☑	☑☑☑	x	☑☑☑
Community	x/☑☑	☑☑	☑☑☑	x	☑☑
Severance Housing	x	☑	☑☑☑	x	☑☑☑
Stage Total	-3	+19	+24	-6	+21
Key:	xxx Strongly negative influence (-3) xx Moderately negative influence (-2) x Mildly negative influence (-1) - Neutral influence (0) ☑ Mildly positive influence (+1) ☑☑ Moderately positive influence (+2) ☑☑☑ Strongly positive influence (+3)				

Source: Based on Buroni 2004, 107. Used with permission.

## GETTING INFORMATION TOGETHER FOR A HEALTH ASSESSMENT WORKSHOP

### Step 9: Predicting health impacts

- Using the information collected in Steps 5 to 8, as well as the screening and scoping activity, the organizer, technical team, and/or steering committee can start predicting likely health impacts. This will give workshop participants something to react to rather than start from scratch at the workshop.
- It is helpful to include information about direction, magnitude, certainty, likelihood, and evidence base for health effects.

#### Arden Hills Healthy City Planning Workshop

The City of Arden Hills, Minnesota (USA) conducted a rapid workshop for the proposed redevelopment of the Twin Cities Army Ammunition Plant. Prior to the Arden Hills Healthy City Planning Workshop, the research team used current literature and professional experience to predict impacts of the redevelopment plan on multiple categories of health determinants, a selection of which are shown below. Severity of impact is coded based on a scale of strongly positive influence (+++) to strongly negative influence (- - -), as well as neutral influence (O) or uncertain influence (U), and whether the impact is speculative (S) or probable (P).

The exercise also predicted whether the proposed redevelopment plan would have differential impacts for certain population groups affected by the plan. As shown in the table below, working families and older adults would experience positive differential outcomes in the area of housing because the redevelopment plan's focus on expanding the supply of housing affordable to these population groups. Lastly, the exercise was repeated to assess impacts of a "no build" alternative, finding that not doing anything could result in worse health outcomes in areas of accessibility, physical activity, and water quality and unknown impacts in other categories of health determinants.

Figure 5. Arden Hills Table of Health Determinants and Impacts for Composite Plan Alternative

Health determinants	Specific health determinants	Impacts	Likelihood	Differential impacts on group(s)	Measurable indicators of health determinants at left
Accessibility	- Development would require considerable attention to the locations of bus stops (none currently serve the area)	Uncertain			- Density calculations based on analysis completed at the block group level or smaller. - Location of transit stops, complete with 1200m "walking-transit-shed" area highlighted for each stop
Air quality	- Residential and commercial activity would increase pollutants, particularly from mobile sources. - There are proposed residential uses within 500m of I-35.	- - - - - -	Probable		- Roads in the area with AADT >40,000, and a 200m (656 ft) buffer from each major road, and as well as a 500m (1640 ft; 1/3 mile) buffer from each major road. - Detailed canopy analysis (using aerial photographs) or a detailed planning plan.
Housing		Uncertain		- Elderly appear to be well provided for in housing options. - Housing affordable to those at 80% of area median income, the level is \$206,800; market analysis show few such homes (see appendix)	

Source: Adapted from Forsyth et al. 2010, 60.

## GETTING INFORMATION TOGETHER FOR A HEALTH ASSESSMENT WORKSHOP

### Step 10: Selecting workshop participants

- Workshop participants should include key stakeholders and decision-makers who can influence the project, implementation, and impact. Selecting participants is a key step.
- Participants should be invited well ahead of time and be required to RSVP so that the organizer can rebalance the workshop by inviting additional people if there are obvious gaps.
- A health assessment workshop can be run with a large number of people but a well-constructed workshop of 10–30 people can be very productive.



Photo by Ann Forsyth

Workshop participants should be broadly representative of the community.

### City of Decatur, Georgia (USA) Community Transportation Plan Health Impact Assessment

The City of Decatur, GA held an HIA workshop for its Community Transportation Plan. In order to get a cross section of stakeholders impacted by the plan, organizers invited the following participants:

- Residents
- Representatives of relevant government bodies and agencies on different scales, including:
  - DeKalb County
  - Atlanta Regional Commission (a metropolitan planning organization)
  - Centers for Disease Control and Prevention
  - Georgia Department of Transportation
- Local business leaders
- Members of the religious community
- Representatives of nonprofit organizations

Source: CQGRD 2007, 60.

### Step 11: Preparing and sending materials to workshop participants

This material is then compiled into a background report that describes:

- Project or place key features
- Reasons for a health assessment
- The steering committee
- The workshop format (workshop agenda)
- A profile of current plans and the area
- Input from stakeholders and experts, particularly those not coming to the meeting
- A preliminary evaluation of the project, plan, or place
- A summary of relevant evidence linking health and places

### Devens Health Impact Assessment 2014

The Devens Enterprise Commission, charged with overseeing a redevelopment of a 4,400 acre former military base in Massachusetts (USA), conducted a health impact assessment to compare the health impacts of residential development using two different regulatory approaches. As part of their rapid assessment workshop, the Devens Enterprise Commission compiled a packet of background materials to workshop participants. Figure 6 shows a Table of Contents outlining the health assessment workshop information included in the packet.

Figure 6. Background Information for the Devens, MA Health Impact Assessment

1. Workshop Agenda
2. Workshop Poster
3. Checklist of Topics proposed for event
4. Development Scenarios (pdf) for Grand Road
5. Background briefing
6. Framing of HIA (previously sent)
7. List of sources for background information
  - Devens ReUse Plan (Master Plan for Devens)
  - Devens By-Laws
  - DEC Regulations (Housing and IRD)
  - 2008 Devens Open Space and Recreation Plan
  - Devens Trail Plan
  - 2012 Sustainable Indicators Report
  - Devens Traffic Monitoring Report 2012

Source: Lowitt et al. 2014, 59. Used with permission.

## RUNNING THE WORKSHOP

### Step 12: Developing the agenda

- There are a number of manuals describing rapid health impact assessments, which tend to provide a one-size-fits-all workshop model. The good news is that there are many alternatives in terms of structuring the agenda.
- One approach to develop the agenda is to use standard planning and design participation techniques, such as the future search or SWOT analysis.
- The agenda should provide information about the project and include various activities to allow people to interact in substantial ways, make them feel welcome (e.g. with appropriate food).

#### Arden Hills Healthy City Planning Workshop

The Arden Hills Healthy City Planning Workshop Minnesota (USA) used the following agenda for a half-day workshop that provided a variety of exercises, discussions and activities for participants to learn about the project, interact with one another, and share their opinions about the project.

Figure 7. Arden Hills HIA Workshop Agenda

##### Workshop Agenda

###### Part 1: Introduction (11:30 to 12:15)

- Registration and graffiti wall
- Introduction to health planning and project
- Presentation about the proposals, population, and local conditions
- Introduction to core tasks

###### Part 2: Working Session (12:15 to 2:00)

- Task 1 Over lunch: Voting on statements about health effects (12:15)
- Task 2 (small group): Identifying impacts of proposals (1:00)
- Task 3 (small group): Identifying potential changes to the proposals to respond to impacts (1:30)

###### Part 3: Reporting and Prioritizing (2:00 to 3:00)

- Report back about impacts/changes
- Discussion about impacts/changes
- Task 4: Prioritize changes to the proposal (vote with dots)
- Closing remarks: What next?

Source: Forsyth et al. 2010, 4.

### Step 13: Developing specific activities

- Within each agenda item activities need to be fleshed out to assess health issues, prioritize them, and develop relevant actions (at the very least).
- See the Tool 3 How to Guide, Table 4 for a list of sample workshop activities.

#### London Olympic Games HIA

In an HIA workshop to assess hosting the Olympic Games in London, England, facilitators developed activities to generate potential risks and impacts, to qualitatively rank the importance of these impacts, and to encourage collective brainstorming around implementation.

For example, participants ranked a set of health risks that were identified in the background materials by importance by casting a “vote”, with the greatest risk being: a potential lack of community involvement. In the same workshop, participants were later arranged in small groups to develop strategies for mitigating or maximizing the same set of health risks or health benefits. This activity helped to generate several meaningful strategies among the various small groups.

Source: Buroni 2004, 108.

Table 4. Identifying Impacts of Proposals

Health impact	Positive (+/-)	Differential impacts on groups (e.g. children, elderly, persons with disabilities, persons with lower incomes)? Please state who will be affected.

Source: Based on Forsyth et al. 2010, 10.

## RUNNING THE WORKSHOP

### Step 14: Running the health assessment workshop

- Workshop timing should be acceptable to participants that are attending as part of their job and those who are attending on a volunteer basis. The activities and agenda suggestions provided in this tool and the How To Guide are intended to be effective for a half-day workshop.
- It is important to have enough staffing—to greet, facilitate, and document the process.
- See the Tool 3 How to Guide, Part 2 to read tips on running the workshop.



Photo by Ann Forsyth

Workshop spaces should accommodate the variety of activities in the agenda.

## WRITING THE REPORT AND MOVING FORWARD

### Step 15: Writing the results

There are many ways to write up the results, but four elements are key:

1. A compelling summary
2. A report that explains the process as well as the outcomes
3. Prioritize recommendations and implementation actions

It may be necessary to have different versions of the summary and report aimed at different audiences.



Photo by Ann Forsyth

Brainstorming health impacts during an HIA workshop.

# WRITING THE REPORT AND MOVING FORWARD

## Alconbury, England Air Base Redevelopment Health Impact Assessment

This Cambridgeshire Health Authority created graphic posters to communicate findings of an air base redevelopment HIA in Alconbury, England. The posters provided a clear summary and analysis of the key impacts in a publicly accessible and engaging format.

Figure 8. Posters Communicating Findings of the Cambridgeshire Health Authority's HIA

**From Bombs to Boom!**  
Health Impact Assessment on a Former Air Base

**Why we got involved**  
In 1998, CHA responded to requests to redevelop the former Alconbury US Air Force base. Proposals outlined the construction of one of the largest roads, an urban freight distribution centre's P. Europe - the air freight proposed was also dropped. Following local opposition, the Secretary of State agreed to hold a public inquiry. During 1999, CHA asked to provide evidence to the inquiry on the basis of a HIA of the plans.

**Health Impact Assessment (HIA)**  
"A combination of procedures, methods and tools by which a policy, programme 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."  
(World Health Organization, December 1999)

**What we said**

	Development Phase	Operational Phase	Action
<b>POSITIVE</b>	<b>EMPLOYMENT</b> Increases jobs in construction (500). 	<b>EMPLOYMENT</b> Increases employment prospects up to 4200 jobs. 	Targeting bus routes with high unemployment. For the provision of jobs. Provisions to assist local workers or jobs. This includes the bus route funding, community transport schemes to improve employment opportunities of people living in rural areas, especially Hereford, which is unlikely to be served by traditional forms of public transport.
	<b>ECONOMIC</b> New opportunities for local trade and services. 	<b>ECONOMIC</b> New opportunities for local trade and services. <b>TRANSPORT</b> Shift from road to rail freight (fewer accidents, less pollution). Other benefits will be borne out some benefits may be to wider population (L.Anglia). 	
<b>NEGATIVE</b>	<b>NOISE</b> Some houses will be adversely affected by emission and construction noise. <b>ACCIDENTS</b> Risks for workers on site. 	<b>NOISE</b> Some houses affected by 24 hr noise activity (trucks & HGV). <b>ACCIDENTS</b> Risks associated with 4200 workers. <b>Accidents - Increased Risk of HIA's</b> From 6000 HIA's with one (estimated) 1.19 injury only accidents a year and 1 death every 3 to 60 years old. <b>AIR QUALITY</b> Dust from some non. <b>IMPACT ON SERVICES</b> All services may be affected by increased accidents with RFA and on site.	<b>NOISE</b> Bunding, screening and selected measuring of noise levels. During operation, local measures above may mitigate. Possibly HGV reversing lights increase of incidents. The developer be required to provide noise mitigation measures. An improvement of a consistent 10% increase in noise above background and as a result of the Alconbury Development. <b>ACCIDENTS</b> Requires rigorous enforcement of HSE standards and good practice. Occupational Health Services on site for minor injuries, which work in liaison with local health services. <b>Accidents - Increased Risk of HIA's</b> Green Travel Plans - worker employed on site. Transport equipment, means to reduce potential damage. Improvements to road junctions and driver information services/indicator lights. <b>AIR QUALITY</b> Green Travel Plans - worker employed on site. Best practice in vehicle maintenance, transport, capable measures to reduce potential damage. <b>IMPACT ON SERVICES</b> Ongoing meetings for local CHA, Primary Care Group and Environmental Health Services on liaison group able to contribute to monitoring and influence decisions relating to the site, concerning health.

**A learning process**  
A grant was received from the Department of Health conditional on a trial of the process. Interim findings indicate a positive process with some areas of improvement identified. The complete findings will be made available to the public. We are working on:  

- Approved template for future HIAs
- Impact Assessment tools
- Proposing an evaluation method
- A full report following the public inquiry (later 2001)

**What we did**  
In January 2000, we formed the Health Impact Group (HIG). In the group included the local NHS representatives, the local opposition group, parish council groups and local people.

**For further information and access to the full reports:** [www.cambs-ha.nhs.uk](http://www.cambs-ha.nhs.uk)

Source: Cambridgeshire Health Authority 2002.

## WRITING THE REPORT AND MOVING FORWARD

### City of Ramsey Health Impact Assessment

After conducting a health impact assessment, the City of Ramsey, Minnesota created a clear table describing thresholds, current statuses, goals, and policy directions for a variety of different health topics.

Figure 9. Summary Table of Status, Goals and Policy Approaches for Ramsey, MN HIA

GOAL	POLICY DIRECTIONS
Encourage dense residential development in appropriate locations to capitalize on transit service	<ol style="list-style-type: none"> <li>1. Implement the plan for Town Center</li> <li>2. Secure a stop on the Northstar Commuter Rail Line</li> </ol>
Reduce the impact of air pollution on children and other vulnerable populations	<ol style="list-style-type: none"> <li>1. Plan land uses with populations of children away from major roads.</li> <li>2. Continue to use local permitting process and state controls to regulate point-source polluters.</li> <li>3. Encourage the addition of tree canopy along Highway 10 and other future "major roads".</li> </ol>
Limit or eliminate the use of lead in buildings	<ol style="list-style-type: none"> <li>1. Continue to use the building code and state regulations to limit the use of lead-bearing substances.</li> </ol>
Provide at least 50% of residences with walking access to fresh fruit and vegetables	<ol style="list-style-type: none"> <li>1. Encourage the development of more neighborhood-serving grocery</li> <li>2. Identify and reserve locations suitable for grocery store development</li> </ol>
Provide views to green space from new development and establish tree canopy on 50% of street centerlines	<ol style="list-style-type: none"> <li>1. Use park dedication to increase views to green space.</li> <li>2. Continue to plan developments with views to open/green space.</li> <li>3. Require tree canopy on new streets.</li> </ol>
Provide walking access to active parks and trails for at least 50% of all residents	<ol style="list-style-type: none"> <li>1. Implement the Master Trail Plan.</li> <li>2. Plan for park land to serve populations within walking distance.</li> <li>3. Acquire additional park land when necessary.</li> </ol>
Complete, safe and well lit streets and circulation corridors	<ol style="list-style-type: none"> <li>1. Continue to require adequate lighting on all streets.</li> <li>2. Explore adoption of a complete streets policy and/or ordinance.</li> </ol>
Support social relationships through a mixture of housing types, tenures and affordability levels	<ol style="list-style-type: none"> <li>1. Continue to plan for a variety of housing types and tenures.</li> <li>2. Selectively support subsidized housing projects.</li> </ol>
Clean, safe surface and ground water	<ol style="list-style-type: none"> <li>1. Discourage new development on septic systems.</li> <li>2. Utilize shoreland &amp; wetland buffer ordinances.</li> <li>3. Acquire sensitive natural resources areas.</li> </ol>

Source: City of Ramsey 2012

## GETTING INFORMATION TOGETHER FOR A HEALTH ASSESSMENT WORKSHOP

### Step 16: Implementing the results

- The workshop process and report will have identified key actions to reinforce health improvements and moderate health problems.
- Recommendations should be practical, have clear priorities, and have a plan for implementation.
- The steering committee is a key resource in implementing the results.

### Step 17: Evaluating the process

- This step can be difficult to accomplish.
- It is not about evaluating the workshop, but about evaluating whether the whole process influenced health outcomes. This means it needs to be done well after the health assessment workshop occurred.
- However, it is possible to do a process evaluation of basically Steps 1–15 and maybe a little of 16.

### Report on Health Impact Assessment best practices

The U.S. Environmental Protection Agency's report on health impact assessment processes, *A Review of Health Impact Assessments in the U.S.: Current State-of-Science, Best Practices, and Areas for Improvement*, finds that evaluators can categorize HIA effectiveness in two ways:

- **Direct effectiveness** occurs when the decision or project is dropped, modified, or postponed due to the HIA findings.
- **General effectiveness** involves consideration of the HIA by decision-makers, but no subsequent changes in the decision or project.

The HIA could, however, raise awareness of health generally, introduce health as an important consideration to decision-making, and engage community stakeholders in important decisions.

*Source: Rhodus et al. 2013, 47-49.*

## REFERENCES

- Abrahams, Debbie, Fiona Haigh, Andrew Pennington, and Hilary Dreaves. 2008. *A Rapid Health Impact Assessment of Birmingham International Airport's Proposed Runway Extension*. Liverpool: IMPACT, the International Health Impact Assessment Consortium, University of Liverpool.
- Birley, Martin, Andy Pennington, and Debbie Abrahams. 2009. *A Rapid Concurrent Health Impact Assessment of the Liverpool Mutual Homes Housing Investment Programme: Final Report*. Liverpool: IMPACT, the International Health Impact Assessment Consortium, University of Liverpool.
- Buroni, Andrew. 2004. *Rapid Health Impact Assessment of the Proposed London Olympic Games and Their Legacy*. London: Environmental Resources Management for the London Health Commission and the London Sustainable Development Commission. <http://www.apho.org.uk/resource/view.aspx?RID=61057>.
- Cambridgeshire Health Authority. 2002. *Alconbury Health Impact Assessment Final Report*. Cambridgeshire: Cambridgeshire Health Authority. <http://www.apho.org.uk/resource/view.aspx?RID=44789>.
- Center for Quality Growth and Regional Development (CQGRD). 2007. *City of Decatur: Community Transportation Plan*. Atlanta: Georgia Institute of Technology. Online resource. <http://www.decaturga.com/about/master-plans/community-transportation-plan>.
- City of Ramsey. 2012. *City of Ramsey Health Impact Assessment*. Ramsey, MN: City of Ramsey. [http://designforhealth.net/wp-content/uploads/2012/02/Ramsey\\_ThresholdAnalysis.pdf](http://designforhealth.net/wp-content/uploads/2012/02/Ramsey_ThresholdAnalysis.pdf).
- Design for Health. 2008. *Rapid Health Impact Assessment Toolkit*. Version 3.0. [http://designforhealth.net/wp-content/uploads/2012/12/BCBS\\_Rapidassessment\\_011608.pdf](http://designforhealth.net/wp-content/uploads/2012/12/BCBS_Rapidassessment_011608.pdf).
- Fleming, David and Dennis McLerran. 2008. *SR 520 Health Impact Assessment: A bridge to a healthier community*. Seattle: Puget Sound Clean Air Agency and Seattle & King County Dept. of Public Health.
- Forsyth, Ann, Kevin J. Krizek, Carissa Schively Slotterback, and Garrett Peterson. 2010. *Arden Hills Healthy City Planning Workshop: Summary Report Appendices*. Minneapolis: University of Minnesota. [http://designforhealth.net/wp-content/uploads/2012/02/HIA\\_ArdenHills\\_Appendices\\_3June2010.pdf](http://designforhealth.net/wp-content/uploads/2012/02/HIA_ArdenHills_Appendices_3June2010.pdf).
- Ison, Erica. 2002. *Rapid appraisal tool for health impact assessment: A task-based approach*. 11th edition. Oxford: Institute of Health Sciences.
- Lezotte-Anderson, Carol, Heidi Schmidt Boyd, and Karen Nikolai. 2007. *Lowry Corridor, Phase 2: Health Impact Assessment*. Hennepin County, MN. <http://www.pewtrusts.org/en/~media/Assets/External-Sites/Health-Impact-Project/lowrycorridorphase2.pdf>.
- Lowitt, Peter, Neil Angus, and Sang Cho. 2014. *Devens Health Impact Assessment 2014: Appendix HIA Workshop Handouts*. Devens: Devens Enterprise Commission. <http://www.devensec.com/news/Appendix.pdf>.
- Rhodus, Justicia, Florence Fulk, Bradley Autrey, Shannon O'Shea, and Annette Roth. 2013. *A Review of Health Impact Assessments in the U.S.: Current State-of-Science, Best Practices, and Areas for Improvement*. Cincinnati, OH: U.S. Environmental Protection Agency. [http://cfpub.epa.gov/si/si\\_public\\_file\\_download.cfm?p\\_download\\_id=517114](http://cfpub.epa.gov/si/si_public_file_download.cfm?p_download_id=517114).
- Varvasovszky, Zsuzsa and Ruairí Brugha. How to do (or not to do)... a stakeholder analysis. *Health Policy and Planning*. 15, 3: 338–345.
- Wales Health Impact Assessment Support Unit (WHIASU). 2010. *Rapid Health Impact Assessment*. BRAND Project. Rhyl, Wales: Denbighshire County Council. [http://www.wales.nhs.uk/sites3/documents/522/brand\\_rhyl\\_hia\\_report\\_-\\_final\\_ver.pdf](http://www.wales.nhs.uk/sites3/documents/522/brand_rhyl_hia_report_-_final_ver.pdf).