

Stage 2: Scoping

Aim: To identify the particular issues that should be addressed in the HIA.

Learning objectives:

1. To review the determinants of health.
2. To identify the potential health impacts for the particular proposal.
3. To assess which impacts are likely to be important and thus need to be addressed in the HIA.
4. To construct a logical framework for the health impacts.
5. To set boundaries for the HIA: temporal, geographical and population.
6. To identify stakeholders who should to be involved.
7. To reach a consensus regarding the details of the risk assessment among the stakehold

Scoping establishes the foundation under which the health impact assessment is conducted; it is about designing and planning the HIA. Scoping strives to highlight the key issues that should be considered to define the health impact assessment. Health impact assessment is an iterative process and scoping may continue throughout the HIA. This stage involves identifying the project team, defining objectives for the project and seeking out the necessary resources.

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Analytical Procedures:

1. Consult policy-makers, stakeholders, experts and research literature to assess and describe the:
 1. proposed policy;
 2. population affected;
 3. immediate, intended effects;
 4. health-related secondary and side effects;
 5. pathways through which the proposed policy or program is expected to affect health outcomes and intermediate outcomes (i.e. determinants of health);
2. Determine methodologies to be used and set boundaries for the proposed HIA to maximize the efficient use of resources for producing the most salient and valuable information.

Product:

An outline for the impact analysis, including data on the relevant baseline characteristics of the target population.

(UCLA, 2003-2004)

Scoping – Getting Started

Some questions to address as part of the scoping process:

What

1. What are the aims and objectives of the health impact assessment?
2. What community concerns have been raised about the proposed policy/project?
3. Are there any relevant relationships to statutory requirements? (eg, resource consent processes, gender analysis, requirements for consultation, legislative impact statements).
4. What will be the extent and boundaries of the HIA?
 - a. What is to be included and excluded?
 - b. What are the boundaries in terms of timing and location?
 - c. When will the assessment be done?
 - d. How much time will it take?
 - e. What is the geographic scope of the HIA? (ie, what is the community under consideration – a particular region or local authority area, an entire state, families with children in California?)
 - f. What is the temporal scope of the HIA? (ie, are you concerned about the next 5 years or what happens in 20 years?) How heavily will you discount future impacts?

Who

5. Who will conduct the HIA?
6. What stakeholders are involved in assessing the policy?
7. Who are the key people to consult with as part of the HIA? (Think systematically about whom it is important to involve).

How

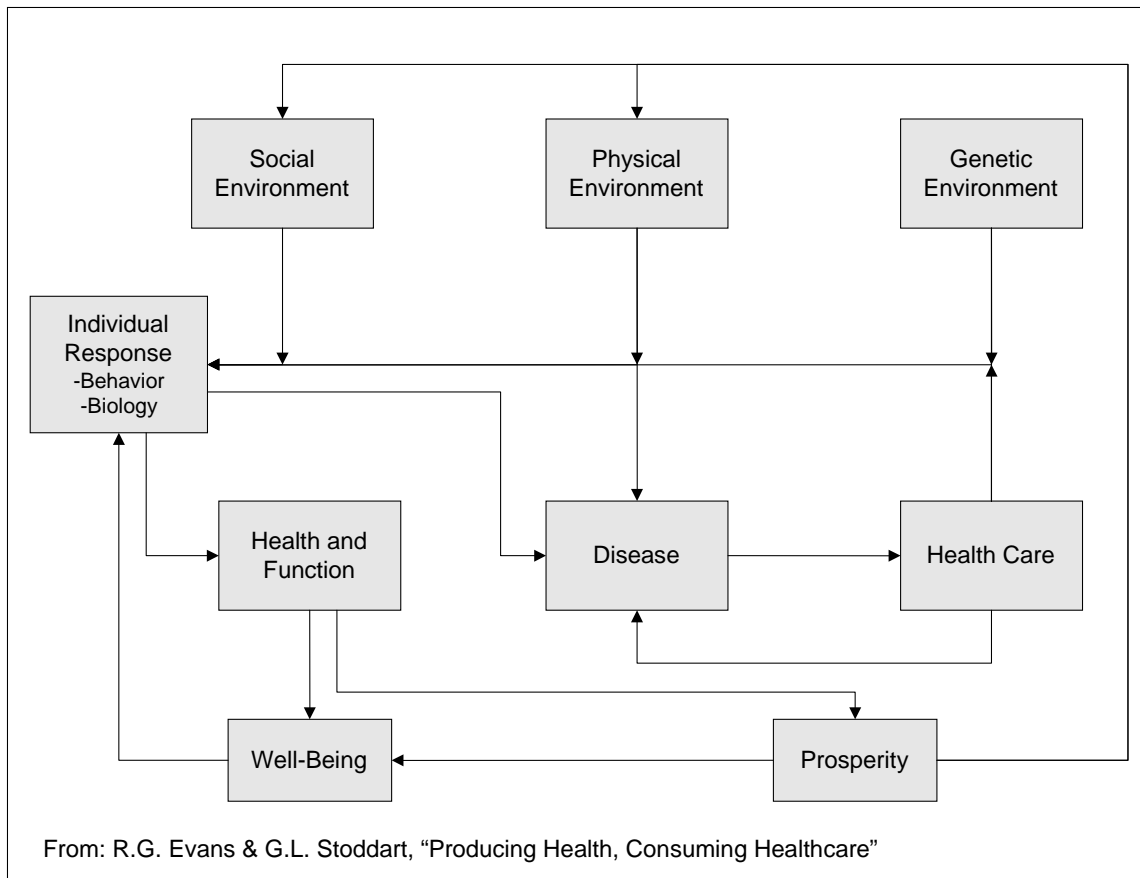
8. What is the budget and sources of funding for the HIA and any associated work?
9. What methods could be used in the HIA?
10. Can an assessment plan be drafted to set out the key milestones and timeframes of the HIA?
11. What are the parameters for evaluating the HIA?

(Adapted from Public Health Advisory Committee, 2004)

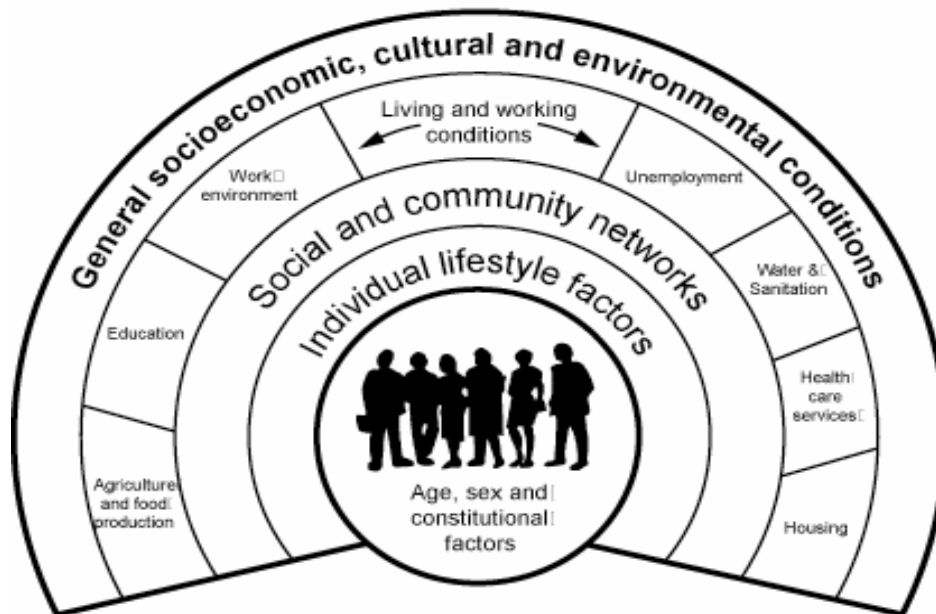
See Appendices 5 and 6 for examples of guides to identify and organize the potential health impacts.

Good models help focus:

Example 1 - Evans-Stoddart Field Model of Health and Well-Being



Example 2 – Concentric rings of influence (the European Model)



Adapted from Dahlgren, 1995

Focusing the Analysis – Key Determinants of Health

Categories of key health determinants	Specific examples of health determinants
Biological factors	Age, sex, genetic factors
Personal/family circumstances and lifestyle	Family structure and functioning, education level, occupation, unemployment, risk-taking behaviors, diet, smoking, alcohol, substance misuse, physical activity, transportation
Social environment	Culture, peer influences, discrimination, social support, religious beliefs/values, poverty
Physical environment	Air, water, housing conditions, working conditions, noise, smell, public safety, civic design, business development, land use, waste disposal, energy, sun exposure, disease vectors
Public services	Access to and quality of health care, child care, social services, housing/employment/social security services; public transport, policing, non-statutory agencies and services
Public policy	Economic/social/environmental/health trends, local and national priorities, policies, programs, local projects

Adapted from Scott-Samuel, 2001

Developing a Logic Framework

Developing a logical framework is an essential step in the scoping process. It illustrates the putative causal pathways and likely positive and negative health effects for the proposed program or policy. Logic frameworks serve three primary purposes:

1. Organize existing knowledge
2. Communicate information
3. Guide analyses

A logic framework for HIA includes multiple pathways of effects, each of which is composed of multiple causal linkages:

