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**Contribution to Parallel Session VI: "Implementing HIA: Implications for national and EU level". "Solidarity in health. Closing the health gap between European Union States.", 7-8 November 2011, Poznan (PL)**

**G. Gulis, R. Fehr: Health impact assessment - Toward reducing the health gap in Europe**

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One crucial feature of the current health situation in Europe is the remarkable difference between East and West. With respect to several important health parameters, e.g. life expectancy at birth, Eastern Europe is trailing behind Western European developments. This "gap" constitutes a major challenge for Public Health in Europe.

Potential causes of the Gap include the following: Physical and social environmental factors, economic and behavioral factors, growing inequalities within societies, (access to) the health care system, and governance issues. However difficult it is to disentangle these different influences, there is a broad consensus on the key role of the wider (or "upstream") determinants of health, e.g. influences related to education, work, housing, or transport.

Obviously, the control of these wider determinants is often located outside the health sector. This insight leads directly to the idea of "Health in all Policies" (HiAP). This approach is necessary to tackle determinants of health outside of health sector. There are various ways to practically implement HiAP; one powerful strategy is "Health Impact Assessment" (HIA), i.e. the ex-ante analysis of expected impacts on health, originating from policies, plans, programs, and projects. This is acknowledged, e.g., by the Council conclusion on Health in all policies (Council of the European Union 2006), the EU Health strategy "Together for health: A strategic approach for the EU 2008-2013" ([http://ec.europa.eu/health-eu/doc/whitepaper\\_en.pdf](http://ec.europa.eu/health-eu/doc/whitepaper_en.pdf)), the Rome declaration on Health in all policies 2007

([www.salute.gov.it/imgs/C\\_17\\_primopianoNuovo\\_18\\_documenti\\_itemDocumenti\\_4\\_fileDocumento.pdf](http://www.salute.gov.it/imgs/C_17_primopianoNuovo_18_documenti_itemDocumenti_4_fileDocumento.pdf)), and the Adelaide statement on Health in all policies 2010 ([www.who.int/social\\_determinants/hiap\\_statement\\_who\\_sa\\_final.pdf](http://www.who.int/social_determinants/hiap_statement_who_sa_final.pdf)).

There are different types of HIA to be found. HIA can be of regulatory nature, based on corresponding legislation; alternatively, it can be seen as an optional tool for decision support; or as a (community-led) approach for health advocacy. Practical HIA examples include, e.g., employment strategy, urban development policies, drinking water privatization, airport extension (runways), and many others.

Over the years, HIA practice has evolved into a whole "culture", comprising a sizeable body of literature; distinct procedures; published guidelines; gateways offering access to HIA databases; traditions of HIA conferences and workshops; and an increasingly specialized workforce.

How does HIA help a Ministry of Health to achieve its goals?

- HIA provides support to place health on agenda of other governmental sectors (Ministries). By drawing clear connection lines between health effects, risk factors, wider determinants of health and policies, it adds significantly to justification of the need to consider health in all sectorial policies
- HIA provides useful information – including quantitative estimates – on future population health development related to concrete policies, strategies or actions
- HIA facilitates cross-sectorial working practices
- HIA motivates closer research-practice-policy collaboration, thus enhancing better use of evidence in policy making and practice
- HIA helps to identify gaps in education and data collection systems.

What can a Ministry of Health (MoH) do?

- The MoH acknowledges the role of HIA for national / regional public health and health policies
- The MoH sets up an appropriate infrastructure in form of “HIA support unit”; either at the Ministry, or at the national / regional public health institute
- The MoH promotes the inclusion of health determinants and of HIA into public health training
- The MoH strives for implementation of research evidence in public health practice and policy making.