Health Impact Assessment (HIA) institutionalization and multisectoral collaboration in Europe

Wednesday 20 November 2019, 09:00 - 17:30
Marseille Chanot, Palais des Congrès et des Expositions, Marseille, France

Programme and abstracts

Organised by
European Public Health Association (EUPHA) HIA Section, World Health Organization (WHO) Regional Office for Europe, International Association for Impact Assessment (IAIA) Health Section, National Institute of Health Doutor Ricardo Jorge (INSA), Wales Health Impact Assessment Support Unit (WHIASU)/Public Health Wales (PHW)
The importance of health impact assessment (HIA) has been recognized and promoted through diverse international frameworks, statements and policies. However, only a limited number of countries or regions have developed HIA as a statutory process. While HIA is seen as a beneficial tool to support and enable Health in All Policies and intersectoral collaboration, it needs to advance and evolve into a tool that is consistently and routinely used to facilitate and maximise health and well-being and reduce and address inequalities.

Furthermore, as health is impacted by policies and decisions taken outside of the health sectors, health inclusive environmental assessments play an important role in addressing the Sustainable Development Goals (SDGs). For example, the integration of health into city planning can improve health and health determinants through more compact, efficient design of housing, transport, green spaces and other infrastructures. Thus, not only it ensures healthy lives and promotes well-being for all at all ages (SDG3) but also supports achieving sustainable cities and communities (SDG 11), builds resilient infrastructure, promotes inclusive and sustainable industrialization (SDG 9) among others.

While HIAs are mostly conducted voluntarily, environmental assessments such as Environmental Impact Assessments (EIA) and Strategic Environmental Assessments (SEA) are carried out based on legal regulations. By 2017 the revised EU Directive (2011/92/EU) on EIA had to be transposed into national legislation. Importantly the new Directive (2014/52/EU) includes explicitly “population, and human health” in the list of topics to be considered in an EIA. However, the directive does not provide a specific definition for any of the two terms, nor guidance on how to assess the potential health effects related to a project, or the necessary qualifications of professionals tasked with the assessment of these effects.

To this respect, public health professionals need to become aware of the regulations of environmental assessments to be able to answer to the environmental experts question on possible health impacts, assess these impacts and if needed give their consent to projects.

The aims of this pre-conference are to strengthen the knowledge on HIA in Europe, to share experiences in institutionalizing HIA and integrating a broad consideration of health and well-being, the use of HIA in environmental assessments and other impact assessments, as well as sharing the latest research on HIA.
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Abstracts

**Keynote**

**Challenges and perspectives for health impact assessment development in France**
Francoise Jabot and Ana Rivadeneyra, France

Jabot, F. 1, Rivadeneyra, A. 1

Departement Sciences Humaines et Sociales, EHESP, Rennes Cedex

**Issue:**
Despite improvements in life expectancy, health inequalities persist in France. Health regional authorities and municipalities are increasingly adopting HIA as a promising tool to advance health equity.

**Description of the problem:**
HIA is particularly used in regions where health authorities are providing financial support to integrate it in urban projects. As a result, it is rapidly growing at a local level but with considerable diversity. How to ensure HIA development, reliability and acceptance among decision makers within this context? We analyzed HIA implementation in three French regions. Data collected included available evaluation reports, meetings with HIA practitioners and interviews with decision-makers.

**Results:**
Several factors contributed to HIA reliability: use of evidence-based methods, combination of lay and scientific knowledge, capacity to promote collaboration among services, better understanding of equity, and production of well-founded recommendations. However, some experiences were not in conformity with recognized practice standards, they were not culminated, or they did not affect decision making, mainly due to a limited screening stage.

**Lessons:**
Before undertaking HIA, it is important to carefully analyze the relevance, timeliness, resources, and surrounding political context. HIA requires time and resources that institutions do not always have, as it might compete with mandatory activities. HIA sustainability depends on guaranteeing quality standards and a balance between invested resources and quality of resulting recommendations. Cumulated experience in other countries will be useful in understanding and anticipating the risks of HIA disinterest or failure.

**Main messages:**
In order to promote HIA there is a need to adapt the procedure to the context in which it is undertaken and to the decision-making environment. Quality assurance and adequate use of evidence will be also critical to promote HIA further development in France.

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**Session 1 – Institutionalization of HIA across Europe**

**The use of HIA to support the plan for a cleaner air**
Mathilde Pascal, France

Pascal, M.
Agence nationale de santé publique, Saint-Maurice Cedex

France

Chronic exposure to outdoor air pollution, and especially to fine particles, has been proven to favor the development of various diseases, leading to premature mortality. Despite an extensive scientific literature documenting those impacts, disbelief of the reality of this health impact by key stakeholders may impair actions to improve air quality. The health impact assessment (HIA) approach was developed to help non-specialists understand the public health burden of air pollution, and the possible benefits of actions. We illustrate how HIA is used by the French national public health agency to promote collaborative discussion among stakeholders and trigger actions aimed at improving air quality.
Institutionalization of Health Impact Assessment: what's going on in Portugal?
Luciana Costa, Portugal

Costa, L.1,2, Costa, A.1, Caldas de Almeida, T.1
1 DPS, National Institute of Health Doutor Ricardo Jorge (INSA); 2 BioISI - Biosystems & Integrative Sciences Institute.

Issue:
The Public Health Law approved by the Portuguese Government in 2016 establishes the rules and principles for public health services organization and the measures for the protection and promotion of health and disease prevention. In particular, it proposes mandatory Health Impact Assessment (HIA) studies to be done at the national level. However, institutionalization of HIA is still far away from being implemented in Portugal.

Description of the problem:
The sustainable integration of HIA in the Portuguese public health system is needed. Thus, all the initiatives that promote the technical training in HIA are of particular importance, namely to the National Institute of Health Doctor Ricardo Jorge (INSA), fulfilling its mission in this area.

Results:
In order to overcome this gap, a Biennial Collaborative Agreement between WHO Regional Office for Europe and the Portuguese Ministry of Health was established to identify strategies for implementing HIAs as a tool to support “Health in all policies” approach. Under this scope, INSA organized two Workshops to built technical expertise to further support the development and implementation of HIA in Portugal. Following a “Learning By Doing” approach, three prospective equity focused HIA studies were proposed and are ongoing. Also, a network of stakeholders is sharing information throughout an online platform as a starting point to develop a community of practice at national level. Importantly, a policy dialogue between health and other sectors was performed and a brief published online.

It is expected that a guidance document for HIA implementation will be produced, taking into account the experience shared through the training program under progress.

Lessons:
For proper HIA implementation, further investment on trained professionals able to develop HIA and tools fit to the national and local characteristics is still needed in Portugal, as well as more engagement of other sectors to undertake a multisectoral approach.

Main messages:
1. A model to operationalize Health Impact Assessment in Portugal is still needed.
2. The Ministry of Health should clarify progress on this field, namely regarding the structures needed for HIA support and define how to address human health in EIA to follow the Directive 2014/52/UE.

HIA in context
Rainer Fehr, Germany

Fehr, R.
Department of Public Health, University of Bielefeld

Background:
Efforts to institutionalize HIA, and to pursue its further development on multisectoral collaboration, have a track record of being variably successful. As a rule, the basic HIA idea is widely applauded but – for multiple reasons – the practical implementation can be tenacious. While prejudices and vested interests cannot easily be overcome, there is room for conceptually and practically strengthening HIA.

Goal and methods:
To explore innovative ways of invigorating HIA by utilizing its diverse relations with other forms of governance-supporting health assessments, as analyzed by the EUPHA “health assessments” working group (involving 10 EUPHA sections). This contribution is based on a 2017 EJPH paper, a 2019 book chapter, and recent literature searches. HIA is seen as embedded into the wider group of governance-supporting health assessments, in order to gain appreciation by providing model solutions applicable beyond HIA, and to learn from seminal developments elsewhere.

Results:
Applying the “health assessments” approach discloses HIA’s close connectedness with related approaches, including health reporting, health needs assessment, health technology assessment, health systems performance
assessment (as favored by EC circles) as well as evaluative activities. Insights can be grouped as follows:

• Mutual exchange concerning concepts and experiences: For example, the EPHIA guide on HIA includes “policy analysis” which is similarly applied in evaluations; it also includes “profiling” of communities which is highly similar to health reporting; and it lists “monitoring” (of the actions agreed from the HIA) and “outcome evaluation” (evaluating the predicted impacts) – here, HIA’s interrelatedness with the other types of health assessments is obvious.

• Improved practice by collaboration and exchange: Local and regional knowledge is often embedded in various health assessments (incl. reports, evaluations). Existing Health Needs Assessments (HNA) point to vulnerable populations, a Health Systems Performance Assessment (HSPA) reveals specific weaknesses of local health care; both aspects are potentially relevant for expected impacts. Existing ex-post evaluations of similar projects can inform prospective HIA. And, importantly, interference among assessments needs to be avoided: where other (environmental and/or social) impact assessments are conducted, assessors need to be aware of potential overlap or even contradictions, undermining credibility among decision-makers and the public at large.

• Teaching and training: Since the competencies required for assessing human health in HIA overlap widely with those required for other types of health assessments, jointly designing (integrated) curricula and teaching modules allows to harness synergy potentials.

Discussion:
Viewing HIA as one (important) type among the group of “health assessments” fruitfully inspires HIA, both on conceptual and on practice level, and may help to strengthen HIA significantly.

Session 2 – Using HIA inside and outside the health sector

The Villeneuve renovation program
Health Impact Assessment
Lucie Anzivino, France

Anzivino, L.
Observatoire régional de la santé Auvergne-Rhône-Alpes, Lyon - France

Context:
We conducted a health impact assessment (HIA) on a French urban renovation program in a disadvantaged neighborhood the Villeneuve, symbol of the architecture of the great ensembles of the 1970s. The ambitions of this new program are opening to the city, simplification of traffic, requalification of the housing stock, creation of living spaces, renovation of public facilities enhancement green spaces ... so many challenges to be met for the attractiveness of the territory and its inscription in the heart of the Metropole.

Method:
The HIA was conducted collaboratively with the services of the city of Grenoble, Echirolles, and the Metropole. The information used to inform the assessment included profiling the community of the Villeneuve, a comprehensive literature review focusing and key actors’ interviews. Four components of the project were evaluated: access to good quality of green and public spaces, urban design, mobility, access to shops and services and social cohesion.

Result:
The HIA shows that the urban renovation program is likely to have a mix of negative and positive impacts on health, mental health, wellbeing and social cohesion. In particular on the living environment, the attractiveness, the perception of the neighborhood, on physical security and sense of security, opening of neighborhoods, mix functionality, opportunity for leisure and sports practices. In addition the program provides an opportunity to specifically target reducing health inequalities in the area.

Conclusion:
The HIA working group has co-built 47 recommendations. These recommendations were than hierarchized according to four

Main message:
The HIA is a structured approach that allows urban projects to be observed with a holistic vision of health. The HIA encourage partnerships and anticipate health issues as early as possible in the decision-making process of urban programs.

Legacy of Paris 2024 Olympics bid: a rapid HIA
Muriel Dubreuil, France

Dubreuil, M.1, Legout, C.2.
1 Observatoire régional de la santé Île-de-France, 2 Service parisien de santé environnement, Ville de Paris.

Olympic and Paralympic Games planning can potentially change society and territorial balances. The determinants of health depend on the physical, social and socio-economic environment. Paris bid for 2024 Olympic and Paralympic Games has been considering as intangible legacy a new balancing between Paris and the disadvantaged territories of Seine Saint Denis.

Health impact assessment (HIA) is a cross-sectorial and prospective approach based on evidence for healthy public policies. Its development in France is rising since 2012. The HIA conducted in the candidature phase of Paris 2024, between September 2016 and September 2017, addresses Olympics legacy through the determinants of health and well-being. The three-component of Paris 2024 bid have been prioritized: sports practice for all, employment volunteering and sustainability. The methods used are in accordance with the standards of rapid HIA and data used have been easily mobilized (indicators, benchmark of former Olympic cities, international scientific literature, expert workshops).

Logical frameworks and assessment of the expected health effects for each components of the bid have been developed. Hosting territories showing social and territorial inequalities of health, differential health impacts by sub-groups of population have been identified. Recommendations have been developed and presented to stakeholders at an early stage within the planning process.

Physical activity is a major driver of health and well being, access to employment and volunteering contributes to good health and the improvement of the environment significantly influences health. There are preconditions for Paris 2024 to be “public policy accelerator”.

HIA is an integrative approach guiding public decision, identifying and securing the expected benefits of policies on health and well being. HIA has been used in major sporting events in Britain. It can help the construction of legacy framework and the prioritization of future programs.

Towards a neighborhood with positive health in a working class district of eastern Paris.
Agnès Lefranc, France

Legout Céline, Trendel Estelle, Vernouillet Gabrielle, Beauvestre Claude, Lefranc Agnès
Paris's Environmental Health Service (City of Paris)

Since 2014, the territory of the “Gates of 20th arrondissement of Paris” has been one of the 200 districts included in the New National Program for Urban Renewal lead by the National Agency for Urban Renewal (ANRU).
The ambition of the urban renewal policies carried out in this territory as part of an agreement between ANRU and Ville de Paris is to offer better living conditions to the inhabitants, to create new mobilities and attractive functions that create diversity. A Health Impact Assessment (HIA) has been requested from the Paris’s Environmental Health Service to support the urban project.

On the basis of a local diagnosis of health issues, and in close link with the project managers and the urban planning firms, the differentiated effects of the urban project by groups of populations were studied. Work with the City’s technical departments and expert workshops resulted in operational proposals to address the issues identified.

Forty recommendations covering all determinants of health, corresponding to 99 actions were validated by the elected representatives, the city’s technical departments and the health partners (ARSIdF, Santé publique France and AP-HP). Some of them have been incorporated in the
development scenario building. Others, more technical, were included in the concession contract of the urban developer and in the batch master record intended to the project managers. Some concern the mobilization of already existing actions leaded by the City’s directorates and offering services to the inhabitants.

While the implementation of the recommendations remains a challenge, this study has already made it possible to integrate the components of the City in charge of health in the decision-making bodies of the urban planning project, thus constituting an unprecedented step towards a better consideration of health in the structuring projects of a city such as Paris.

**Strategic assessment of neighbourhood environmental impacts on mental health in the Lisbon Region (Portugal)**

Adriana Loureiro, France

A Loureiro¹, MR Partidário², P Santana¹,³
¹Centre of Studies on Geography and Spatial Planning (CEGOT), University of Coimbra, Coimbra, ²Centre for Management Studies of IST (CEG-IST) and Department of Civil Engineering, Instituto Superior Técnico (IST), Universidade de Lisboa, Lisbon, ³Department of Geography and Tourism, University of Coimbra, Coimbra

**Background:**

Scientific evidence shows that the mental health of the population is influenced by several environmental characteristics that go beyond individuals features. This study aims to strategically assess the neighbourhood environmental factors that contribute to mental health promotion in the Lisbon Region (Portugal).

**Methods:**

The methodology Strategic thinking for sustainability in Strategic Environmental Assessment, developed by Partidário in 2012, was applied to identify and assess strategies to be adopted in the development of neighbourhood environments that contribute to the promotion of mental health of the population in four municipalities (Lisbon Region). This Strategic Environmental and Health Assessment was conducted in three phases: i) assessment of the neighbourhood environmental factors effects on the mental health of the population; ii) definition of the evaluation framework with the identification of the critical decision factors; and iii) identification of the strategic options.

**Results:**

Preliminary results identified five critical decision factors of neighbourhood environment for the promotion of the population mental health: public space quality (e.g. increasing sense of place), physical environment quality (e.g. noise control), economic activities generation (e.g. attracting new economic activities), education and professional qualification programs (e.g. reducing school leaving), and v) services and facilities (e.g. improving the access to the health and education services). Strategic options were explored as optional planning policies to find those that could better improve population mental health.

**Conclusions:**

Strategic options point out the important role played by municipalities in improving the mental health of the population. Based on a multi-level and inter-sectorial planning process, it is suggested that local interventions on the identified neighbourhood environmental factors positively impact the mental health of the Lisbon Region population.

**Main messages:**

Strategic considerations on neighbourhood environmental factors to promote population mental health in Lisbon Region must be accounted in the decision-making processes under local planning.

**References:**


**Front-of-package nutrition labelling: HIA approach**

Andrea Jorge Silva, Portugal

Costa A¹²,³, Graça P¹,³, Gregório M¹,⁴, Nogueira P¹,⁵, Sena C¹, Vieira C¹, Alarcão V¹,³,⁶, Santos R³, Virgolino A³, Santos O³
¹Direção-Geral de Saúde, DGS, Lisboa, ²Escola Superior de Enfermagem de Lisboa, ESEL, Lisboa, ³Instituto de
Background:
Health Impact Assessment is usually referred to as an evaluative method to identify and put in evidence potential key impacts for people’s health of a given regulation, service or program, also ensuring that relevant population groups are targeted. This HIA project focuses on the food nutrition labelling policy in Portugal. This project was funded by the Directorate-General of Health, Portugal and had institutional support from the World Health Organization.

The purpose of this work was to prospectively evaluate several interpretive front-of-package nutrition labelling (FOP-NL) schemes in terms of their potential to contribute to more informed food choices and, potentially, to healthier food habits.

Methods:
This HIA included: i) the screening phase, with a brief evaluation of the potential health implications of the FOP-NL policy, also supporting the relevancy for conducting this HIA; ii) the scoping phase, to define the blueprint and management of this specific HIA, and to establish the work plan for the rest of assessment; iii) the appraisal phase, which included the characterization of the profile of the target population (Portuguese consumers), and iv) the recommendations phase, informed by the previous phases of the HIA.

Results:
Representatives of health authorities, stakeholders, shared information and knowledge throughout the development of this health impact assessment project showing that there is a consensus about the need to use a common FOP-NL system and that the different systems evaluated were considered much more useful to consumers than the system actually in use.

Conclusions:
The success of a FOP-NL policy will benefit from the active involvement of all relevant actors and from a monitoring program to evaluate its effectiveness as a public health promotion policy.

Main messages:
The implementation of a FOP-NL policy should consider the endorsement of a single/unique FOP-NL system, involve all relevant stakeholders and consider adequate monitoring and assessment strategies.

Poster walk

Knowledge and Attitude towards the Gradual Reduction of Salt in Bread – an Online Survey
Alexandra Costa, Portugal

A Costa, L Costa, J Santos, P Braz, M Santos, R Brazão, I Lopes, A Guerreiro, J Alves, T Caldas Almeida

1DPS, National Institute of Health Doutor Ricardo Jorge; 2DEP, National Institute of Health Doutor Ricardo Jorge; 3DAN, National Institute of Health Doutor Ricardo Jorge; 4Directorate General of Education; 5Regional Health Administration of the Algarve; 6National School of Public Health

Background:
Bread is one of the main sources of salt intake in Portugal. Based on this evidence, a protocol signed between national Health Sector and the Associations of Industrial Bakeries, in 2017, established gradually decrease salt in bread until 2021. This measure also targets schools’ available bread, this should not exceed 1g salt to end of 2018. A pilot Health Impact Assessment (HIA) aims to assess the potential impact on salt reduction in bread on the eating habits of children (6-18 years) and their families.

Methods:
A questionnaire is being performed to assess the effect of this measure. The first version was designed by a panel of 11 experts (content validity), following the plain text principles. A external specialist revised it for facial validity. A pilot was tested. Thereafter, a REDCap online survey of “Knowledge and Attitude towards the Gradual Reduction of Salt in Bread” questionnaire was finalized. The target group is the parents of children and their families.

Main messages:
The implementation of a FOP-NL policy should consider the endorsement of a single/unique FOP-NL system, involve all relevant stakeholders and consider adequate monitoring and assessment strategies.

Poster walk

Knowledge and Attitude towards the Gradual Reduction of Salt in Bread – an Online Survey
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Bread is one of the main sources of salt intake in Portugal. Based on this evidence, a protocol signed between national Health Sector and the Associations of Industrial Bakeries, in 2017, established gradually decrease salt in bread until 2021. This measure also targets schools’ available bread, this should not exceed 1g salt to end of 2018. A pilot Health Impact Assessment (HIA) aims to assess the potential impact on salt reduction in bread on the eating habits of children (6-18 years) and their families.

Methods:
A questionnaire is being performed to assess the effect of this measure. The first version was designed by a panel of 11 experts (content validity), following the plain text principles. A external specialist revised it for facial validity. A pilot was tested. Thereafter, a REDCap online survey of “Knowledge and Attitude towards the Gradual Reduction of Salt in Bread” questionnaire was finalized. The target group is the parents of children and their families.
Results:
Final online survey totalizes 33 items, divided into four blocks: 1. Knowledge and General literacy data, 2. Domestic Consumption, 3. Scholar consumption and 4. Sociodemographic. An adult responsible for the child/young person should answer the survey. Access is possible through a REDCap link, using computers available in the School Cluster, or other manner suitable for the purpose.

Conclusions:
This survey will contribute to the identification of modifiable behaviors related with salt intake. Such evidence may eventually provide the opportunity for new strategies in this area.

Main messages:
Health Impact Assessment as a procedure to access the effects of measures and policies on human health. Questionnaires as tool to access perceptions, attitudes and knowledge.

Assessing systematically the impact of urban projects on health and social inequalities in health
Jeanne Blanc-Fevrier, France

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Background:
Health Impact assessment (HIA) might contribute to reduce social inequalities in health (SIH), through their impact on social determinants of health. However, HIA has been developed mainly through expensive and time-consuming projects and has concerned a small proportion of urban projects. Furthermore, although social Equity is a main value of HIA, it has often not been addressed in the HIA. Our research project assesses the feasibility and acceptability of a systematic use of HIA, in a relevant and adapted way by querying all urban design projects, on health and SIH.

Methodology:
The research is based on a partnership between a multidisciplinary research team and urban professionals, which provides a strong asset to know and understand the world of urban planning. Together, the teams have created an adapted screening grid which helps identify potential, differential impacts of urban projects on population very quickly (around 1h15), thus making informed decision about starting a HIA or not. During screening meetings, researchers observe the use of the screening grid in different settings, with voluntary project managers, local urban planners and actors aware of public health, on several typologies of urban areas.

Results:
The screening grid contains about twenty questions on health determinants. By distinguishing different populations (well-to-do, average, modest people), it enables urban planners to evaluate differential, positive or negative impact and therefore the grid can show a social gradient of health if it’s induced by urban projects.

Screenings meetings last around one hour. They have been organised on six different types of Toulouse’s urban projects at a different stage of development, and on urban renewal projects, which allow the grid to be tested in different contexts.

Discussion:
The first results show the feasibility and acceptability of this approach. A real interest from urban planners to health and tools to highlight differential impacts of urbanism on population’s well-being. However, they express their uncertainty about a new scope of thinking, such as health and equity, in a world already overbooked by regulatory demands.

The research is still ongoing but forward it attempts to establish the favourable conditions to a systematic health questioning on any urban project and detect which need a more or less complex HIA.

Main message:
A method based on a grid and a short meeting with urbanists in order to detect a need for a more comprehensive HIA among any urban project has proved to be feasible and acceptable.
Perspectives of Strategic Environmental Assessment Practitioners on considering population and human health
Ciara Logue, United Kingdom

Ciara Logue and Dr Margaret Douglas
Edinburgh University

Background:
Strategic Environmental Assessment is a systematic method used globally to identify, evaluate and report on environmental and health effects of policies, plans and strategies. The 2001 European Strategic Environmental Assessment Directive identifies the environmental issues to be considered, which includes human health. However, strategic environmental assessment practitioners vary in how they assess this and there is no requirement to involve health authorities or health impact assessments. The perspective of practitioners has not been explored in previous research. Therefore, this study will explore the perspectives of planners who completed assessments in Scotland in 2018, as well as strategic environmental consultation authorities, to elicit their experiences and challenges on considering human health as part of this process.

Methods:
A brief documentary review will assess environmental reports submitted to the Strategic Environmental Gateway from January 2018 to December 2018. This will inform which practitioners are invited to take part in interviews. The aim is to carry out in-depth interviews with practitioners from a variety of sectors, as well as consultation authorities. Thematic analysis will be used to analyse the data.

Results:
The interviews will identify tools practitioners use to consider human health in the Strategic Environmental Assessment process, the perspectives of professionals on considering human health and finally, opinions on how human health elements should be reviewed in future.

Conclusions:
The perspectives of Strategic Environmental Assessment practitioners and consultation authorities is important, to clarify current practice and challenges. The involvement of a statutory health authority may improve consideration of health in Strategic Environmental Assessments.

Main message:
Strategic Environmental Assessments consider human health. However, no statutory measures exist to involve a health authority or health impact assessment.

Health Impact Assessment on the Adoption of Recommendations regarding Urban Operations in the Reconversion of Industrial Areas with Contaminated Soils: Parque das Nações Case study
Joana Santos, Portugal

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Issue/problem:
During the expansion of a hospital in the former industrial area of Parque das Nações, high concentrations of toluene, benzene, xylene, TPH C5-C10, TPH C10-C16, and heavy metals were detected. The technical commission (TC) set up for supervising this construction work, produced a set of recommendations regarding urban operations in the reconversion of industrial areas with contaminated soils.

Describe the issue/problem that was addressed by the policy.
These recommendations apply to several phases: assessment of soil quality; decontamination process (in case of contamination hazard to human health); continuous assessment of water and air quality, waste (including waste water) and occupational health during the implementation of the urbanistic operation. As Parque das Nações is a populated area (both residential and working area) and with high commercial value, it is important to evaluate the impact of adopting these recommendations using a health impact assessment strategy.
Description of the problem:
This HIA's objective is then to analyze the real or potential health impact of the adoption of the Recommendations issued by TC. A retrospective and fast HIA was implemented by a working group composed by elements mainly from health institutions. HIA geographical scope was limited to the Parque das Nações Parish Council. Only resident population was considered as data on working population is not available. All age individuals were considered, with special focus on children and older adults, assumed to be at higher risk due to exposure. A comprehensive causal pathway was done to identify main exposure and respective health effects to be evaluated in the HIA scope. Exposure risk appraisal was developed using a modeling approach and the risk of cancer was estimated.

Results:
Preliminary results indicate that main exposure pathway is via respiratory. The contaminants’ concentrations which are above the reference value could have a negative impact during the implementation of the operations. However, positive effects are expected after the decontamination.

Main message:
Adequate recommendations regarding urban operations in the reconversion of industrial areas with contaminated soils are essential to minimize exposure and protect citizens' health.

Assessing potential health gains of intervention measures by modelling alternative scenarios for HIA in North Rhine-Westphalia (NRW)
Monika Mensing, Germany

Quantitative modelling as a core element of health impact assessment (HIA) allows estimating impacts due to those changed behaviours, policies or alternative intervention scenarios.

Methods:
We decided for the DYNAMO-HIA tool to model and quantify potential effects of explicit risk-factor states on mortality and disease incidence in NRW. DYNAMO-HIA uses real-life populations, offers dynamic projections and fulfils usability criteria e.g. modest data requirements. Merged NRW samples of the RKI GEDA surveys 2011–2013 provided suitable risk factor categories.

Results:
Impacts of changed obesity and inactivity proportions were modelled jointly and independently, after having obtained relative risk (RR) estimates from systematic literature search that also supplied interacting effects of the two risk factors in question. Main outcomes refer to years lived with/without disease, life expectancy, mortality, incidence and prevalence. Sensitivity analyses regarded limit values of RR confidence intervals. Modelling the moderating exposure effects of interlinking risk factors apparently improved the precision of estimates. Detailed results will be presented.

Conclusions:
Subsequent modelling of alternative intervention- and business-as-usual scenarios provides policy makers with valuable information, ranking the implications of different possible strategies. The concept of modelling dynamically contributes to the foresight approach, by reflecting the knowledge of changes and developments of the past. In this context, HIA may as well keep tightening scenarios in view for potential early alerts.

Assessing potential health gains of intervention measures by modelling alternative scenarios for HIA in North Rhine-Westphalia (NRW)
Monika Mensing, Germany

M Mensing, OCL Mekel
NRW Centre for Health, Bochum

Context:
Health behaviour has changed and keeps changing still, facing complex living, environmental and social conditions. In the last decades, it could be observed that esp. rising levels of obesity and physical inactivity accompanied growing levels of associated chronic conditions e.g. diabetes mellitus type 2, stroke and some cancers. Consequently, recommendations for action were derived.
Improving all student’s health through Municipal policy: a health impact assessment in Chambery, France
Lucie Anzivino, France

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Context:
A significant proportion of students are in a situation of socioeconomic vulnerability, along with nutrition, rights and healthcare access issues. Chambery’s city council new youth policy has provided an opportunity to strengthen the health and well-being of students in this area.

Method:
An intermediate health impact assessment (HIA) is currently being led by Chambery’s local authorities, the University of Savoie-Mont-Blanc, the Instance régionale d’éducation et de promotion de la santé Auvergne-Rhône-Alpes, the Observatoire regional de la santé (ORS) Auvergne-Rhône-Alpes. The steering committee also includes local partners and student representatives.

The aim is to assess and improve the potential impacts of Chambery’s youth policy on student’s health.

Impact assessments and recommendations will be based on the study of available research articles, interviews of key participants and on the findings of a large consultation of young people living in Chambery that was carried out in 2018 by the city.

Results:
Impact assessment of the new youth policy on students’ health is in progress.

Based on the work of the steering committee and the evaluators, the HIA scoping has enabled the identification of four main factors for further analysis:
1 social potential and community or social participation/2 access to rights and healthcare / 3 local and international mobility/ 4 work.

Subgroups have been identified as potentially vulnerable (socially isolated students, foreign students, etc.). Recommendations and HIA report are expected this autumn (2019+)

Conclusion:
In France, most HIA that have been carried out have so far focused on urban projects. Using the HIA to maximise a social policy’s positive impacts and reduce its negative impacts on health amounts to an innovative approach in this context.

Main message:
Key principles of this HIA are to be anchored in a global health promotion strategy. Special attention must be paid to reducing social and gender health inequalities and to associating local partners, students and decision makers from the city’s different services at each step of the process.

Session 3 - The role of HIA in achieving Health in All Policies and the SDGs

The Public Health Implications of Brexit in Wales: A Health Impact Assessment (HIA) approach
Liz Green, United Kingdom

Green, L.
Public Health Wales, Wales Health Impact Assessment Support Unit (WHIASU)

On March 29th 2019, the United Kingdom was due to exit the European Union (EU) in a process known informally as ‘Brexit’. The 2 years before this time (and ongoing) experienced a period of unprecedented political and social upheaval with many unknowns and much uncertainty attached to the outcomes and future impact of withdrawal and transitional period.

Public Health Wales commissioned the Wales Health Impact Assessment (HIA) Support Unit to carry out a HIA of Brexit in Wales to assess the potential impact, extent and nature of ‘Brexit’ on health and wellbeing in Wales which would to inform its planning, future work and support other bodies decision-making, planning and policymaking.
A comprehensive HIA was conducted over a 6 month period in 2018/19, steered by a Strategic Advisory Group. Methods included; a literature review; stakeholder workshop; interviews with policy leads, a community health profile, and report with evidence synthesis.

Trade agreements, economic impacts, changing relationships with EU agencies, uncertainty and loss of regulatory alignment were key pathways for health impacts to occur. Potential impacts included; food standards/safety; environmental regulations; working conditions; and health and social care. Many impacts will affect the whole population. Vulnerable populations included; children/young people; those at risk of unemployment; Welsh areas receiving significant EU funding. Potential indirect impacts were identified on mental well-being. Brexit has the potential to impact significantly on the determinants of health. The HIA has informed and influenced cross-sector planning and policy in response to the short/long-term implications of Brexit to ensure that health and inequalities are considered at every juncture. This unique work demonstrates continued leadership by Wales in the field of impact assessment and ‘health in policies’ and has been positively received. It has transferable learnings for many nation states and health policy leads.

HIA of a Danish policy document on closing down the ghetto areas
Gabriel Gulis, Denmark

Methods:
The equity focused health impacts assessment methodology has been employed. One ghetto area was selected to conduct the HIA. In depth interview-based data collection with two focus group interviews were conducted; municipal employees working in the area and citizens living in area were interviewed with aim to get information about potential health impacts of the policy. In addition to interviews, public health knowledge-based assessment was conducted by authors of this presentation based on determinants of health paradigm.

Results:
The policy contains four key areas of interventions covering housing, residence in area, crime prevention, and early start in life. Positive health impacts could be expected on at some extent in intervention related to early start in life through enhanced focus on education of children. Negative impacts are expected on housing area and focus on having residence in area. The crime prevention area contains issues where limitation of human rights can be raised. The most relevant health outcome mentioned by both residents and municipal employees is mental health. Quantification was not done due to lack of specific data for targeted areas.

Conclusions:
The overall health impacts of the policy are rather negative. Besides leading to poor mental health, substantial economic losses can be expected as well as issues related to human right were considered relevant.

Main messages:
Health impact assessment methodology proved to be applicable for assessing potential impacts of an important social policy.

Exploring the utility of HIA as a participatory approach within Health in All Policies
Katie Hirono, United Kingdom

Background:
To tackle health inequities, initiatives have aimed to incorporate community perspectives
in the creation of health policies. The WHO calls for this in the Helsinki Statement on health in all policies (HiAP) which recommends the involvement of communities in the development of public policies and the assessment of the impact of future policies. While HIA is commonly used as a tool for predicting impacts of public policies, it can also be an approach for integrating community perspectives into decision-making.

**Methods:**
This research is examining the mechanisms by which HIA and other participatory processes can lead to improved health equity. It is focused on understanding how participation in an HIA can impact on feelings of empowerment, and how integrating community perspectives in the process can lead to healthier public policies. This is being explored through a multi-case study of participatory processes.

**Results:**
This presentation will discuss the initial outcomes of this research, provide an overview of the theoretical framework for positioning HIA as a participatory process and examine how use of HIA as a participatory process can promote HiAP.

**Conclusions:**
While HIA has been promoted as a tool within HiAP frameworks, it is less commonly used as an approach to bringing public participation into decision-making -- another core component of HiAP. This research will help to bridge this practical gap by gaining an understanding of the mechanisms by which HIA can serve as a participatory process to improve health equity.

**Main messages:**
1. HIA is viewed as a tool for assessing the future impacts of public policies, but it can also be a mechanism for integrating communities into decision-making.
2. Utilising HIA as both a mechanism for predicting health impacts and as a strategy for public participation has the potential to achieve greater improvements in health equity, namely, through community-informed decision making and increased empowerment.

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**Salt reduction in bread: Is it enough? Preliminary results of a HIA in Portugal**

**Joana Santos, Portugal**

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**Issue:**
Health Impact Assessment (HIA) is a methodology that aims at assessing the impact of policies on health. A pilot HIA is in progress to kick off the implementation of this methodology in Portugal with the support of the World Health Organization (WHO). In this context, the impact of a nation-wide policy that intends to achieve a maximum of 1 g of salt/100 gr in bread is under assessment.

**Description of the issue:**
In 2017, Portugal approved a protocol between the industry and other stakeholders to gradually decrease the amount of salt in bread, as this is the main source of salt intake. The purpose of this study was to assess the impact in blood pressure from current (1.4 gr) to 1 g (29% reduction) of salt in bread. Data from two different surveys regarding blood pressure and salt intake was gathered. We estimated the decrease in blood pressure with respect to current average values according to sex, age, education and region.

**Results:**
It is expected that a reduction of 29% in salt intake through bread contributes to a general decrease in systolic pressure for normotensive people (from 120.4mmHg to 120.0mmHg) and hypertensive people (from 151.0mmHg to 150.1mmHg). Within hypertensives we expect the largest reduction, starting with people from Alentejo (reduction of 1.047mmHg), followed by women, the eldest and those with the lowest education level (0.94, 0.89 and 0.83 reductions in mmHg, respectively).

**Lessons:**
The impact in blood pressure from a 29% reduction in salt intake from bread seems very small. However, no further analysis to confirm these results is possible: due to the lack and
availability of data at national level, only aggregated analysis is possible.

**Main messages:**
Quality and access to data is needed to assess impact of policies; it also seems that, to increase effects in blood pressure, either salt reduction from bread must be larger or a wider range of products should be considered.

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**Session 4 – Integrating HIA in environmental assessments**

**Preliminary lessons from assessing nationally significant infrastructure projects: the Health Impact Assessment of Wylfa Newydd**

Ben Cave, United Kingdom

Ben Cave¹, Liz Green², Ryngan Pyper¹
¹Ben Cave Associates Ltd, ²Public Health Wales, Wales

**Health Impact Assessment Support Unit (WHIASU)**

**Background:**
This paper outlines the Health Impact Assessment (HIA) that was conducted for a proposed nuclear power station in Anglesey, Wales (the Project). A standalone HIA was scoped and prepared alongside an Environmental Impact Assessment (EIA) and other assessments, all of which informed the design and proposed delivery of the Project. The assessments examine the potential health, environmental and social effects of constructing and operating the station and the scope included the associated development needed to enable the Project delivery i.e. the preparation of the site. Other factors that were assessed were the economic impacts from the Project, the arrival and presence of the construction workforce in a small community and effects on Welsh language. The IAs were carried out between 2011-2019 and involved extensive public consultation and collaboration between the developer, the assessment teams, the regulators and statutory stakeholders. The impact assessments including the HIA played a central role in identifying mitigation for the Project. An examination of the Project was held by the Secretary of State for Great Britain and Northern Ireland and concluded on 23rd April 2019. This looked at a range of topics including effects on health and wellbeing.

**Methods:**
The presentation will focus on lessons learned from the process, and in particular the HIA, based on the perspectives of two key stakeholders – it will take the form of a dialogue between a representative of one of the regulators (and key health stakeholder (LG)) and a member of the HIA/IA assessment team (BC/RP).

**Results:**
The outcomes of the assessment and the process will be presented from 2 perspectives including the opportunities presented and the challenges faced in carrying a large, lengthy and complex HIA. The role of the assessment and further dialogue will be considered.

**Conclusions:**
Early, consistent and structured engagement between the proponents of a project and the statutory stakeholders is beneficial for all parties in mitigating impact and maximising health gain.

**Main messages:**
A consideration of health and wellbeing from the start of a project with dialogue between parties can be highly beneficial to integrated and standalone impact assessments and can support large and complex developments to consider all determinants of health in a robust way.

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**HIA of the development plan of Geneva International Airport, Switzerland: what effectiveness?**

Nicola Cantoreggi, Switzerland

Nicola Cantoreggi & Jean Simos
Institute of Global Health, University of Geneva, Switzerland

**Problem:**
Geneva airport has experienced continuous growth over the past 30 years, resulting in increasing noise and air pollution. Due to economic stakes, its current development plan seeks to pursue this trend without questioning it. The association of municipalities bordering the airport and the canton of Geneva therefore
commissioned an HIA of the development plan, aiming at estimating its quantitative health impacts, which had never been investigated before. Our intervention focuses on the effectiveness of this HIA.

**Methodology:**
The HIA was carried out between September 2015 and October 2016. Our analysis investigates three dimensions of HIA effectiveness (Harris-Roxas and Harris, 2013): context, process and impact. It is based on notes and observations made during the HIA steering group meetings, as well as semi-directive interviews with steering group members.

**Results:**
Context: the HIA served as a soothing element regarding the tensions between supporters and opponents of the airport’s development, allowing stakeholders to come together around a shared methodology and evaluation goals.

Process: the evaluation had to compose with budget and time constraints, Methodological tools were highly debated, and the steering group made a selection among the themes to be investigated.

Impacts: a health risk analysis, a cost estimation and a telephone survey on quality of life provided a clear picture of the health impacts of the airport’s further development. The results also helped to strengthen advocacy mechanisms.

**Lessons:**
A highly conflictual theme such as the development of an urban airport requires both flexibility and an established and recognized framework.

In this case, the use of a robust and rigorous HIA methodology ensured the consistency of the evaluation and contributed to its effectiveness.

**Main messages:**
HIA strengthens dialogue between stakeholders with conflicting views. This example demonstrates the effectiveness of HIA as a tool to implement health in all policies.

**Health within environmental assessments**
Birgitte Fischer-Bonde & Sarah Humboldt-Dachenroeden, Denmark

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**Background:**
Assessing health within Environmental Impact Assessment (EIA) has become increasingly important. The EIA Directive has made EIA mandatory within European member countries. Among environmental considerations, health is also regarded but only to some extent. In Denmark, health in EIA is described in the law referring to population and human health, similar to the EIA Directive. So far, the practice of EIA has mainly focused on negative environmental and bio-physical health determinants (HD) such as adverse health effects from noise or air quality, neglecting most other HD.

Practitioners (P) and researchers (R) both work with EIA, but their perspective is different. P conduct EIA with the aim of approving projects, they use guidelines often developed by R. R focus on theoretical aspects of EIA and aim to produce guidelines that are in line with legislations. Studying the needs of P could lead to substantial health benefits through a comprehensive consideration of all relevant HD.

**Methods:**
Establish the status of health in EIA through a scientific and grey literature review. Clarify barriers, misunderstandings and facilitators, revealing solutions to improve the inclusion of health into EIA by a comparative analysis of needs of P and R.

**Results:**
The inclusion of health into EIA is reduced to assessing negative environmental and bio-physical HD. 31% of P had never integrated health into EIA and if they had, 40% had never consulted with health experts. Further, 81% of P stated, there is a need for more guidelines on how to include health into EIA in the specific areas the EIA is conducted in.

**Conclusions:**
The study revealed the need for a greater involvement of health experts in the EIA practice. P and R need to enhance
collaboration within EIA practice to meet requirements and challenges posed by the integration of health assessments. Further, P stressed the need for more specific guidelines on how to include health into EIA in the specific areas EIA is conducted in.

Main messages:
1. More and improved area-specific guidelines and increased consultation with the health sector could lead to a comprehensive consideration of all relevant HD.
2. By improving the conditions for practitioners to integrate health into EIA, population and human health could be protected and even promoted with every new project conducted.

Integrating health in EIA: a practitioner's experience
Senuri Mahamithawa, United Kingdom

Main messages:
The implementation HIA in the Czech Republic: still unresolved question. Call for increasing effectivity in HIA process by using digital technologies.

The situation of implementation HIA in the Czech Republic – HIA and technological support via GIS
Jana Loosová, Czech Republic

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HIA in the Czech Republic has been generally embedded in the SEA process under the Environmental Impact Assessment Act since 2004. The implementation of the HIA for SEA is, for historical reasons, "taken in tow" by the system created for HRA. The current task on which to work is to definitively set the terminology within the Czech Republic. The next steps will be the elaboration of detailed methodological materials set up by the working group, the realization of an educational systemevent, the improvement of interdepartmental cooperation and establishing an exchange of experience with selected member states. An important next step in order to streamline HIA processes is the implementation of digital technologies. Given the spatiality of tasks and the predominance of geographic data, as well as the need to visualize them in a set of paper and interactive web maps, the use of geographic information systems is more than clear. Using our previous experience of implementing GIS technology and methods in other areas of public health (such as noise, epidemiology, emission monitoring), we are approaching the design of GIS involvement in the steps of the HIA process. We take into account the advantages and disadvantages and propose their possible solutions on the example of the Czech Republic.

Main messages:
The implementation HIA in the Czech Republic: still unresolved question. Call for increasing effectivity in HIA process by using digital technologies.

Integrating health in EIA: a practitioner's experience
Senuri Mahamithawa, United Kingdom

Mahamithawa1, Andrew Buroni2
1HIA Consultant (MSc DIC Environmental Technology, BSc (Hons) Biology), 2Technical Director of Health (PhD, MSc, BSc (Hons)), Fellow of the Royal Society of Medicine, Fellow of the Royal Society for Public Health).

Issue:
Now that Health Impact Assessment (HIA) has been mainstreamed, there is some concern as to what this actually means.

Description of the problem:
Following the amended EU EIA Directive, and subsequent transposition by member states, health is now reinforced through planning. Mission accomplished? Hardly. Now is potentially the trickiest stage of HIA’s integration, namely, squeezing what has been a voluntary and flexible process into the rigour of Environmental Impact Assessment (EIA).

Results:
HIA guidance and practice must now change, or risk falling into obscurity:
• there is no longer any rapid, intermediate or comprehensive HIA, only assessments that are appropriately scoped, proportionate and fit for purpose in EIA;
• assessments must be concise, conclusive, supported by fact and defensible;
• significance criteria must be applied; and
• mitigation must be necessary to make the development acceptable in planning terms.

On paper, this seems to restrict the assessment of health to health protection, losing the value of health promotion, which was the reason that HIA emerged in the first place.
Lessons:
However, this is not the case: the crucial point to appreciate is that while assessment of health and wellbeing is imperfect, this need not be a barrier to embedding healthy design principles through EIA, meaning the pathways and impacts can still be addressed. The integration of HIA within EIA in reality only reinforces the opportunity to more effectively inform and enhance a project for the betterment of health. This will be shown through examples from the energy, waste and international transport sectors.

Main message:
The key to successful integration has always been appreciating how health is not a new component of EIA, but is central to its very origin. Such an appreciation is the basis to driving healthy design features within a project, through to its assessment, and is central to the development of the next generation of health assessment practitioners.