# HIA for Health in All Policies: 10 Case Studies in Korea

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#### HIA for HiAP at the national level in Korea

- One of the 100 tasks of the previous MB administration (2008-2012)
  - A task to realize "active welfare society by enhancing the efficiency in the national health safety net"
  - A taskforce team formed in Ministry of Health to make an action plan on HIA in 2010
  - Institutionalization of HIA at the national level by 2012 was intended, but ended up with no results.
- Ministry of Health included HIA in
  - the 5-Year Master Plan for Healthcare
  - Development (2011~2015) and National Health Promotion Master Plan (Health

  - However, no legal obligations or budgets are involved in these two plans. Thus, no actions have been done so far.
- Meanwhile, Ministry of Environment implemented HIA in EIA starting in January, 2010 Targets

Industrial complex Energy development Waste management

Limitations

requires HIA for only 3 kinds of projects not applies to policies, plans, or programs only the impacts on air, water, and noise are reviewed

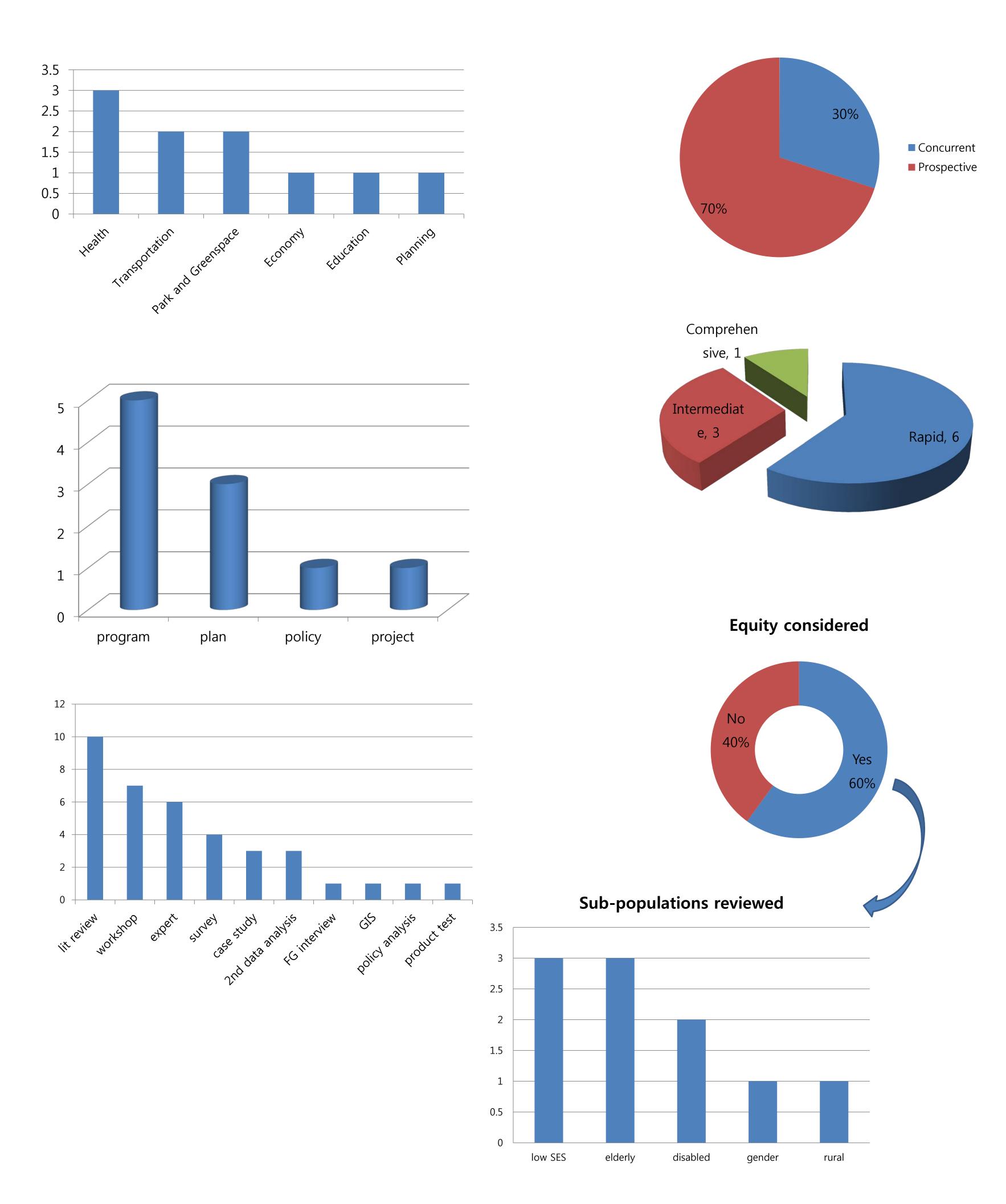
#### HIA demonstration projects by KIHASA

- KIHASA (Korea Institute for Health and Social Affairs) is a think-tank under the Prime Minister's Office.
- It has been funded about US \$270,000 each year for a system development and management for HIA since 2008.
- The main purpose of this program is to develop HIA system in governments to consider health impacts of their policies and health inequalities.

## HIA cases in Healthy Cities

- Rationales for implementing HIA in Healthy Cities
  - City is the level where policy decisions are made which impact more directly on individuals than in the central governments. - Both HIA and Healthy Cities movement pursue 'Healthy Public Policy' and therefore cities which already introduced Healthy Cities movement would more easily implement HIA.
- In total, 5 HIA projects in 3 cities and 6 HIA projects in 4 cities were conducted in 2009 and 2010, respectively. But 1 HIA in 2010 ended after screening. As a result, the final analysis included 10 HIA cases.

# Results of the Case Analysis



#### Discussions and Conclusion

#### Strengths

- Various sectors were involved in HIA projects
- Equity concerns were often addressed in HIA
- Qualitative evidence was sufficient to make recommen dations to decision makers.
- Local government, especially Healthy Cities, was easier to exercise Health in All Policies through HIA than the central government

#### Weaknesses

- Monitoring and evaluation were often missing, although the HIA results were normally submitted to the responsible department.
- One case omitted scoping stage.
  - Need to develop quantitative models to communica te with more quantitative data-oriented departments
- Lack of assessment tools that are ready to use in speci fic areas such as housing, transportation, education, etc

#### Directions for future HIA development

- Mechanisms or regulations of monitoring and evaluation are necessary.
- Need to develop quantitative models to communica te with more quantitative data-oriented departments
- Need to develop specific assessment tools that are rea dy to use in specific areas such as housing, transportat ion, education, etc.
- Need to keep providing capacity building programs for local administrators

### Summary of 10 HIA cases in Healthy Cities

1	lo Year	Subject (policy, program, plan, project)	Responsible department	Timing	Type of HIA	Methods used in HIA	Major positive health impacts	Major negative health impacts	<b>Equity considered</b>	Process evaluation
1	2009	Carbon mileage program-an incentive program for energy saving (program)	Regional economy	Concurrent	Rapid	Literature review; Interest group workshop	<ul> <li>improvements in outdoor air quality, water quality, and noise reduction</li> <li>increases in education on energy saving and leisure time</li> <li>decrease in the elevator use and TV watching, increase in physical activity</li> </ul>	<ul> <li>Less use of lighting in schools, businesses, and public agencies may result in negative effects on the community sa fety, housing environment, and working environment.</li> <li>Housing conditions and working conditions may be worse because energy saving may demand endurance of the cold and the heat</li> </ul>	es (low-income group)	Screening-scoping-data collection-assessment-recommendation
2	2009	Introducing artificial turf-grass in schools (program)	Education & Adolescence	Prospective	Comprehensive	Literature review; product test; survey; expert consulting; interest group workshop	<ul><li>increases in physical activity</li><li>increases in emotional satisfaction</li></ul>	- exposure to harmful materials - increases in accidents and injuries	Yes (gender)	Screening-scoping-data collection-assessment-recommendation
3	2009	Night-lighting in school (program)	Health (Healthy Cities)	Prospective	Intermediate	Literature review; community survey; expert consulting; case study	<ul> <li>May resolve those barriers such as lack of time and/or place hampering physical activity</li> <li>May provide a relatively safe space for physical activity</li> <li>May prevent night crimes of adolescence</li> </ul>	<ul> <li>May increase accidents from activities during the night</li> <li>Nearby residents may have noise problems.</li> <li>Light pollution to the nearby residents and pedestrians; Increase in energy consumption</li> </ul>	Yes (low SES group, the elderly)	Screening-scoping-data collection-assessment-recommendation
4	2009	Park development (plan)	Park and green space	Prospective	Rapid	Literature review; Interest group workshop	<ul> <li>improvement of water quality and transportation accessibility</li> <li>provision of education opportunities, jobs, and leisure activities</li> <li>increases in community network, community development, and social services</li> <li>increase of physical activity and decrease of stress</li> </ul>	<ul> <li>air quality, water quality, noise</li> <li>community safety, crime, accidents</li> </ul>		Screening-scoping-data collection-assessment-recommendation
5	2009	Public bicycle system (policy)	Bicycle policy	Concurrent	Intermediate	Literature review; citizen survey; focus group interview; policy analysis; expert consultation	<ul> <li>increase of physical activity</li> <li>weight control, improvement of the functions of heart and lung, muscular strength enhancement, stress/depression reduction, improvement in social health and sexual life</li> </ul>	- may increase traffic accidents	No	Screening-scoping-data collection-assessment-recommendation
6	2010	Healthy Apartment program (program)	Health (Healthy Cities)	Prospective	Rapid	Literature review; secondary data analysis, expert consultation; case study; interest group workshop	<ul> <li>increase in physical activity</li> <li>decrease in smoking including second-hand smoking</li> <li>establishing safe environments</li> <li>improvements in diet and nutrition-intake</li> <li>strengthened community capacity</li> </ul>	- None	No	Screening-scoping-data collection-assessment-recommendation
7	2010	Promenade and outdoor foot spa development (project)	Park and green space	Prospective	Rapid	Literature review; secondary data analysis; expert consultation; interest group workshop	<ul> <li>clean city, improvement in accessibility</li> <li>positive impacts in education, employment, working environment, and leisure</li> <li>less social exclusion, better community network, community development, increases in health services</li> <li>improvements in diet and physical activity, reduced stress</li> </ul>	- air, water, energy consumption - increase in safety accidents	Yes (the disabled, the elderly)	Screening-scoping-data collection-assessment-recommendation
8	2010	City regeneration for low SES population (plan)	City planning	Prospective	Rapid	Literature review; community survey; interest group workshop	<ul> <li>strengthening community network</li> <li>improving living environment</li> <li>restoring community identity</li> <li>improving housing quality</li> </ul>	<ul> <li>lacks considerations in light, ventilation, and privacy</li> <li>Residents may have difficulties in adjusting to the new common space and the arrangement of private spaces</li> <li>High rent fees are expected after the regeneration.</li> </ul>	No	Screening-(scoping missing)-data collection-assessment-recommendation
9	2010	Provision of free vaccinations for the communicable diseases listed on the National Immunization Program through private clinics (program)	Center	Concurrent	Intermediate	Literature review; secondary data analysis; case study; expert consultation; GIS analysis; interest group workshop	<ul> <li>increase in accessibility of vaccination</li> <li>improvements in vaccination rates (both complete vaccination rate and timely vaccination rate)</li> <li>provision of comprehensive healthcare services for children by the clinicians of private clinics</li> <li>Community Health Center can divert their services from direct provision of vaccinations to other managerial activities</li> <li>good alternative for low-fertility polity</li> </ul>	<ul> <li>rural areas won't have benefits due to the lack of private clinics and low income</li> <li>problems may occur in vaccination management</li> <li>problems may occur in vaccination personnel management</li> <li>vaccination costs may be higher due to the overuse of unproven vaccines in their efficacy</li> </ul>	Yes (rural area)	Screening-scoping-data collection-assessment-recommendation
10	2010	BRT (Bus Rapid Transit) system (plan)	Transportation	Prospective	Rapid	Literature review; secondary data analysis; SFDPH Pedestrian Environment Quality Index; SFDPH Health Development Measurement Tool	<ul> <li>reduced air pollution, noise</li> <li>increase in physical activity</li> <li>better accessibility to transits</li> </ul>	- greater risk of traffic accidents due to the design of bus route and the increase use of crosswalk - worse environments for bike use	No	Screening-scoping-data collection-assessment-recommendation
11	2010	Cheonsan trail development (plan)	Park and green space	Prospective	_	Decided not to proceed after screening because the plan was found not to be full-fledged				