The Impact of Health Impact Assessments (HIAs) on Policy in Urban Settings: The Case of London Health Strategies and the London Plan

Livingstone Musoro 1

WHO/IAIA Conference on HIA, WHO Headquarters, Geneva, 7th April 2010

Background

Dynamic ‘global cities’ like London require proactive policies to help manage and cope with rapid change that occurs in their various neighbourhoods. Since 2000, the Mayor of London and the Greater London Authority developed a series of strategies to manage the spatial development of London and provide better health for Londoners. The original draft London Health Strategy (2000), the London Plan (2004) and the London Mayoral Health Inequalities Strategy (2007) are milestones in this respect. The London Health Commission has undertaken at least a dozen of rapid HIAs on these draft strategies. Their impact on the development process of these policies and strategies has been significant.

Methodology

A literature review was employed to investigate the impact of HIAs on London’s eleven draft strategies. The intention was to show the important role of HIAs in policy development in urban settings. The HIA reports were accessed from the London Health Commission website.

Findings

Eleven London Mayoral Draft Statutory Strategies
- Air Quality, Biodiversity, Black and Minority Ethnic Groups, Children and Young People, Culture, Energy, Noise, Older People, Spatial (Economic Development), Transport, and Waste

HIA for each draft strategy

Eleven revised statutory strategies

Informing recent developments of substantive London strategies
- The London Health Strategy (2000)
- The London Mayoral Health Inequalities Strategy (2010)

How many stages were undertaken for the HIAs?

- Review of research evidence relevant to each draft strategy
- Policy appraisal workshop
- Report of findings with recommendations to the Mayor and the London Assembly / LHC

What additional value did the HIAs give to the draft statutory strategies?
- Reviewed the evidence on the effectiveness of interventions suggested in the draft strategies
- They were rather evaluations of the robustness, appropriateness and effectiveness of suggested interventions than assessments of health benefits or health loss due to the draft strategies
- Provided analytical evidence and framework of the link between health and determinants of health in London
- Advocated for more strategic information systems for collection and coding of data across London that enables the link between various health determinants and health to be made
- Made connections across sections of each draft strategy with other mayoral strategies
- Helped to enhance the focus on health by linking the draft strategies to health determinants and health outcomes
- Identified population groups to benefit/suffer from the health impacts of the strategies
- Outlined areas of both strengths and concern in the draft strategies in relation to reducing health inequalities and improving health.

Conclusions

The London experience helps us to ask when a HIA should be undertaken on urban strategies. The London experience shows that undertaking HIA at the draft strategy stage ensures greater reflection and revision of policies for their more robust and responsive implementation as evidence and suggested interventions can be further scrutinised.

1 Dr Livingstone Musoro, Senior Lecturer – Health Studies, Department of Applied Social Sciences, London Metropolitan University, Ladbroke House, 62-66 Highbury Grove, London N5 2AD, United Kingdom Email: l.musoro@londonmet.ac.uk