

BEYOND MEDICAL CARE FACT SHEET

The “Health and Equity in All Policies” approach to decision making



What is Health and Equity in All Policies?

Health in All Policies is a “collaborative approach to improving the health of all people by incorporating health considerations into decision-making across sectors and policy areas.”¹

The addition of “equity” to this framework emphasizes the importance of assessing the impact of policy decisions on health disparities and opportunities for all people to achieve optimal health.

The Health and Equity in All Policies approach uses tools such as Health Impact Assessments (HIA) to identify the ways that policy decisions in sectors such as transportation, education, housing and regional planning may affect population health outcomes.

On the surface, for example, decisions made by the Ohio School Facilities Commission may not seem to have anything to do with health. However, the Ohio School Design Manual’s inclusion of “minimum acreage requirements” for new school sites has encouraged construction of large school buildings in remote areas, resulting in fewer children being able to safely walk or bike to school. This makes it more difficult for children to incorporate physical activity into their daily lives, potentially resulting in negative health outcomes like obesity and diabetes later in life. Taking a Health and Equity in All Policies approach to this issue, the Ohio Department of Health is currently working with the Ohio School Facilities Commission to recommend revisions to the Ohio School Design Manual that would better support safe bike and pedestrian access to schools.

The goal of this approach is that decision makers, such as state legislators and school board members, consider the potential positive or negative impacts of their decisions on health outcomes, health equity and healthcare costs. With greater awareness of health consequences, policymakers can then minimize risks and maximize health benefits.

Health and Equity in All Policies strategies aim to break down government agency silos in order to raise awareness about the connections between health and other sectors. Processes such as HIA are designed to deliberately engage a wide range of stakeholders, including the people who could be impacted by a policy change, and to ensure that health equity is a high-priority consideration.



What are the potential policy mechanisms?

HIAs are one tool for systematically applying a “health lens” to a decision-making process. A complete HIA involves six steps and results in a report that describes the potential health impacts of the policy or project that was studied and makes recommendations regarding how any negative health or equity impacts can be mitigated.² HIAs can be led by a state or local government agency, a university, or any organization that has the capacity to conduct research and facilitate a multi-sector assessment process.

Most HIAs that have been completed in Ohio thus far have been specific projects funded by grants from private foundations or the US Centers for Disease Control and Prevention. The HIA steps, however, can be embedded into any decision-making processes (as in the Columbus example described below), making the consideration of health impacts part of “business as usual” rather than a stand-alone project that requires additional funding.

Formal mechanisms for institutionalizing health considerations include state-level legislation or municipal ordinances that require or recommend examination of health impacts (see examples from Massachusetts and Washington below), interagency memoranda of understanding or charters that formalize cooperation between state or local agencies and/or between several public and private partners.



What's the landscape in Ohio?

At the local level, health departments have taken the lead in conducting Health Impact Assessments in Ohio. The Columbus, Cincinnati, Cuyahoga County and Delaware County health departments have completed and/or are in the process of conducting Health Impact Assessments.

The Delaware County Health District, for example, convened a collaborative assessment of the potential impacts of a proposed outlet mall project on health outcomes such as traffic injuries, cardiovascular disease and physical activity. As a result, the mall developer updated the project's master plan to include sidewalks, green space, and a walking trail.

The Cincinnati Health Department has conducted Health Impact Assessments on a wide array of topics, including education and employment policies. The Cuyahoga County Board of Health has led several assessments of the potential impact of neighborhood development and transportation plans, and facilitates the Northeast Ohio Health Impact Assessment Partnership.

Since 2007, Columbus Public Health has institutionalized a "rapid HIA" process to evaluate health impacts of zoning and development decisions. As a result, the zoning code now requires that new developments in the city feature safe pedestrian access and bike racks. Summit County Public Health is also leading efforts to embed health considerations into regional planning decisions. The Summit County Health in All Policies initiative is developing a formal charter, modeled after the Summit County Food Charter that has been adopted by several municipalities. The Health in All Policies Charter will include guidance on how municipalities can support health, for example, by encouraging active transportation policies and citizen engagement.

At the state level, the Ohio Housing Finance Agency (OHFA), in partnership with the Ohio State University College of Public Health, completed an HIA in 2014 that

assessed the potential impact of changes in affordable housing inspections on a wide range of health outcomes, such as asthma, falls, lead exposure and mental health. In addition, OHFA added incentives for affordable housing developers to include design features that promote quality of life (including healthy housing features, open spaces and paths, and playgrounds) to the 2016-17 guidelines for allocation of housing tax credits.³ In 2014, the Ohio Department of Transportation began encouraging local communities to include an HIA in their Safe Routes to School Plan. HIAs are being used in school travel planning to ensure that infrastructure improvements are done in an equitable way that prevents injury and promotes physical activity.

Finally, partners from around the state are currently conducting a Health Impact Assessment of community-police relations in Ohio. The HIA, which includes focused data collection in Cincinnati and Akron, will propose actionable recommendations to improve policies at the state and local levels.⁴

[Click here](#) for links to currently available Ohio HIA reports.



Examples from other states

Three states have enacted legislation that requires an assessment of potential health impacts for certain decisions or projects.⁵ Massachusetts, for example, has established a process for assessing the impact of transportation projects on "public health and vulnerable populations." In Washington, a 2006 law authorized state legislators and the governor to request that the state board of health review legislative or budgetary proposals to consider how they would affect social determinants of health and health disparities.⁶

Taking a different approach, California Gov. Arnold Schwarzenegger issued an executive order in 2010 establishing a Health in All Policies Task Force made up of representatives from 19 state agencies. The California Department of Public Health facilitates this task force which issued cross-sector recommendations for improving

health through active transportation, healthy housing, green space, violence prevention and healthy food access.⁷

Michigan has incorporated a Health in All Policies approach in its Health and Wellness 4X4 Plan, which brings together the departments of Health, Agriculture

and Rural Development, Transportation, Human Services, Natural Resources, and Economic Development to promote healthy behaviors, and through the Community Health Innovation Regions that are being implemented as part of Michigan's State Innovation Model (SIM) plan.⁸



Health and Equity in All Policies recommendations

Public and private partners can help to build capacity for cross-sector collaboration in Ohio by supporting:

1. Training sessions and ongoing technical assistance on Health and Equity in All Policies and Health Impact Assessments (HIAs).
2. Peer-to-peer information sharing and mentoring between experienced organizations and those that are new to Health and Equity in All Policies.

Public and private funders can:

3. Institute grant requirements or Request for Proposal (RFP) components that encourage and support grantees or applicants to partner across multiple sectors, conduct HIAs, or to embed health considerations in decision-making processes.

State and local-level policymakers can:

4. Identify projects or situations when formal HIAs or "rapid HIAs" could be encouraged or mandated.
5. Formalize collaboration between agencies through memoranda of understanding or task forces.
6. Develop charters, such as the Summit County Health in All Policies Charter, to be voluntarily adopted by public and private organizations. Such charters can provide guidance on municipal or organizational policies that promote health, such as inclusion of sidewalks in development projects, availability of healthy food at meetings and events, or family-friendly workplace policies.

Recommended resources

- **Health in All Policies: A guide for state and local governments**, Public Health Institute, 2013
- **Health Impact Assessment legislation in the states**, Health Impact Project, 2015
- **A Health Impact Assessment toolkit: A handbook to conducting HIA, 3rd edition**, Human Impact Partners, 2011
- **Northeast Ohio Health Impact Assessment Partnership (NEO HIA-P)**

Sources

1. Rudolph, L., et al. "Health in All Policies: A guide for state and local governments." American Public Health Association and Public Health Institute. 2013.
2. "FAQ about HIA." Impact Partners. Accessed September 1, 2015. <http://www.humanimpact.org/new-to-hia/faq/#steps>.
3. The 2016-17 Qualified Allocation Plan specifies that proposed housing developments that include certain types of health-promoting design features may earn additional credits. Applications must score points at a certain threshold in order to be considered for an awarded of housing tax credits. Source: "2016-17 Qualified Allocation Plan." Ohio Housing Finance Agency. 2015.
4. The HIA is being led by Human Impact Partners. The Advisory Committee includes representatives from the Ohio Organizing Collaborative, Ohio Justice and Policy Center, University of Cincinnati, Cincinnati Police Department, Cincinnati Health Department, Health Policy Institute of Ohio, and others.
5. Massachusetts, Vermont and Washington have enacted legislation requiring HIAs in certain situations. Source: "Health Impact Assessment Legislation in the States." Human Impact Project. 2015.
6. Ibid.
7. Rudolph, L. et al. "Health in All Policies: A guide for state and local governments." American Public Health Association and Public Health Institute. 2013.
8. SIM proposal submitted to Center for Medicare and Medicaid Innovation.
9. Source: State of Michigan Executive Office. "Reinventing Michigan's Health Care System: Blueprint for Health Innovation." Accessed July 31, 2015. http://www.michigan.gov/documents/mdch/Michigan_Blueprint_

To learn more

To view the complete publication "Beyond medical care: Emerging policy opportunities to advance prevention and improve health value in Ohio," as well as more fact sheets about the specific policy opportunities discussed in the report, visit:

www.hpio.net/beyond-medical-care/



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