



## **Guide to task 2b**

### **appraisal of a health impact assesment report: recommendations**

Bos, Robert; Furu, Peter

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**A two-day course on  
*Principles and Practice of Health Impact Assessment  
in the Context of Water Resources Development***

**Guide to Task 2b**

**Appraisal of a Health Impact Assessment Report  
Recommendations**

**Robert Bos and Peter Furu**

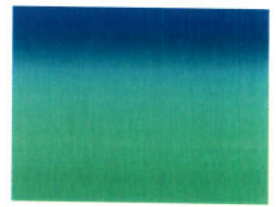
**International Conference on  
“Water and Health – Where Science Meets Policy”  
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University of North Carolina at Chapel Hill**

**Pre-conference Learning Weekend 23-24 October 2010**



“Water and Health – Where Science Meets Policy”  
25-26 October 2010, Chapel Hill, North Carolina, USA



**Pre-Conference learning weekend 23-24 October:  
Principles and practice of HIA in the context of water resources development**

**Health Impact Assessment, Part 2: Appraisal of HIA recommendations**

## TASK GUIDE

for the **appraisal of the Health Impact Assessment report**  
of the Nam Theun 2 Hydropower Project in the Lao People’s Democratic Republic

The purpose of this Task Guide is to assist your group in learning to work systematically and efficiently through the first part of an appraisal exercise. This Task Guide focuses on appraisal criteria addressing the recommendations for preventive and mitigating measures, and for health promotion, made in the HIA report.

The Task Guide breaks down appraisal into its essential, elementary steps. Completing each step supports the formulation of one or more paragraphs of text that eventually will make up the full appraisal report.

The use of this Task Guide follows the principles of problem-based learning. Each group selects a moderator and someone to take notes. Following the table of contents and timetable, an overview provides initial information. On the first operative page (page 5) information is given and a number of questions are raised at the bottom of the page.

The group should discuss these questions, come to a group consensus on the responses and note down the responses **before** moving on to the next page.

Every next page is structured similarly:

- first, relevant feedback information on questions on the previous page is presented;
- a middle section contains new information for discussion; and,
- one or more questions are presented at the bottom of the page.

On completing the Task, the groups will each present their appraisal reports, including their conclusions.

Relevant background information is provided, and a resource person is available should a group feel it needs additional information to arrive at a consensus on a particular question.

Time management is critical to finish the task within the allotted time. On every page of the Task Guide a box indicates how far you have advanced in your task, to assist you with time management. Note that, as this Task implies an iteration of the appraisal steps for a number of recommendations, the progress indicator between pages 10 and 22 only reflects the time spent for the appraisal of one indicator.

On completion of this task, you will have enhanced your knowledge about the concept of appraisal in the HIA context and about the correct criteria to apply and the nature and sequence of steps to take in the appraisal of the HIA recommendations.

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**Health Impact Assessment, Part 2: Appraisal of HIA recommendations**

### **Timetable**

A total of 4 hours is available for this Task, following the introductory presentations and briefing.

- 10:00-10:15 Introduction Task work
- 10:15-10:30 Break/refreshments
- 10:30-12:30 Group work first half of the appraisal task
- 12:30-13:30 Lunch
- 13:30-14:00 Plenary Q&A
- 14:00-15:30 Group work second half of the appraisal task
- 15:30-15:45 Break/refreshments
- 15:45-16:15 Finish group work and prepare presentation
- 16:15-17:15 Groups report back to the plenary on their findings

### **Resource material**

*Hard copies:*

Birley, M.H., M. Gomes and A. Davy (1997). Health aspects of environmental assessment. Environmental Assessment Sourcebook Update (# 18, July 1997), Environment Department, World Bank, Washington DC

Peralta, G.L. & Hunt, J.M. 2003. A Primer on health impacts of development programmes. Asian Development Bank.

Quigley, R., L. den Broeder, P. Furu, A. Bond, B. Cave and R. Bos. 2006. *Health Impact Assessment International Best Practice Principles. Special Publication Series No. 5*. Fargo, USA: International Association for Impact Assessment.

*On CD ROM:*

Birley, M.H. (1995). The Health Impact Assessment of Development Projects. HMSO, UK.

The draft HIA report for the Nam Theun 2 dam



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## Task overview

### *Aim of the Task*

The aim of this Task is for you to learn how to appraise a Health Impact Assessment (HIA) report, consistently applying the criteria and procedures that are also used in the appraisal of other types of impact assessment, such as Environmental Impact Assessment (EIA).

The outcome of the appraisal will be one of the following decisions:

- Reject the HIA report as inadequate.
- Require that the HIA report be improved.
- Accept the HIA report with minor corrections.
- Accept the HIA report as it stands.

Your decision should be accompanied by an adequate justification.

### *Output*

The output of this Task will be an appraisal report. The task focuses on the appraisal of the recommendations for preventive and mitigating measures, and for health promotion made in the draft HIA report of the Nam Theun 2 dam.

At the end of this Task, you will present a report of your findings. At that point in the appraisal you will have to decide whether the recommendations made in the HIA report meet independent quality standards; colleagues in other groups will have appraised whether the quality of the assessment procedures and conclusions actually warrant appraising the recommendations derived from the HIA.

Each step in this Task ends with the requirement to write one or more short paragraphs for the appraisal report. In this way the report is written as the group goes along.

### *Questions*

What is meant by an appraisal?

What is the purpose of appraising a Health Impact Assessment report?

**Discuss these questions, then turn to the next page.**



5% completed

## Introduction

**Appraisal is the quality assurance** component in the HIA procedures. An appraisal is carried out against a set of agreed criteria. Its objective is to establish and maintain independent quality standards. The starting point of the appraisal of an HIA report must be the Terms of Reference (TOR) that were given to the consultant(s). TOR may be found in an annex to the reports of the HIA, EIA and/or feasibility study.

Your instruction for the present task is to carry out the sequence of activities listed below for the second part of the appraisal of the draft health impact assessment report of the Nam Theun 2 dam in Lao PDR, focusing on recommendations. Following are the activities for you to carry out:

1. Decide whether the recommended measures are technically adequate.
2. Decide whether the recommended measures are socially acceptable.
3. Decide whether the recommended measures are cost-effective and economically feasible.
4. Verify whether all options for safeguarding, mitigation and promotional measures have been explored.
5. Prepare a summary appraisal table for the recommendations contained in the HIA report.

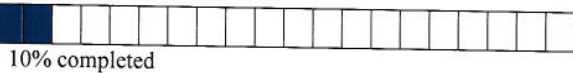
With the members of your group, you will need to consider and agree on criteria for your appraisal as you come to each step in turn.

Have a look at the draft HIA report and leaf through it, familiarizing yourself with its structure and contents. Discuss and decide which sections are relevant to the part of the appraisal you are performing.

### **Question**

What can be the nature of the recommended measures addressing health in the context of a development project?

Discuss this question in your group and draw up a list of types of measures. Think of process rather than outcome. When the group is satisfied with the list, turn to the next page.



10% completed

### Nature of recommendations

Too often, HIA reports simply state that "the project is acceptable if health services are improved". Such a general recommendation provides no useful information for planners to improve the project design or operation. It places the responsibility for dealing with the additional burden of disease entirely on the health services.

Specific recommendations should address the underlying causes of the changes in health risks and in health opportunities that have been identified, for a particular project phase and in relation to the vulnerability of a particular community or community group.

The recommendations that achieve these outcomes may be:

- Technical design and operational changes.
- Environmental management measures
- Regulations.
- Economic tools (subsidies, taxes, incentives).
- Strengthening of health services in terms of capacity and capability.
- Strengthening of other services relevant to health.

The first four types of recommendations are unlikely to be sufficient, so some re-orientation and strengthening of health and other services will normally be required, taking into account the forecast (or predicted) changes in health outcome of community (vulnerable) groups.

#### **Questions**

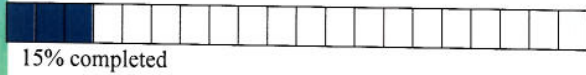
What kind of health hazards and risks may be associated with a large dam project in a tropical country?

What kind of health promoters and opportunities for health may be associated with this type of project?

What kind of measures may be appropriate to deal with these hazards, promoters, risk factors and health opportunities?

Considering the types of measures, the nature of the measures and the key criteria for appraisal of the recommendations, please draw up a summary table that will help you to synthesize your findings concerning the adequacy of recommendations at the end of the Task. Then turn to the next page.





15% completed

### Format summary table

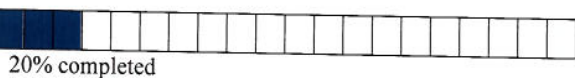
Complete this Table for recommended measures as appropriate. The next sections of the Module guide elaborate on the issues of technical adequacy, social acceptability and economic soundness

Recommendation	Safeguard, mitigating or health promotional measure	Project stage	Community addressed (vulnerable group)	Technical soundness	Social acceptability	Economic feasibility and cost-effectiveness
----------------	---	---------------	--	---------------------	----------------------	---

- 1.
- 2.
- 3.
- 4.
- 5.
- .....

Now read through the section of the HIA report where recommendations are presented. As a group, agree on five, preferably diverse recommendations which you will appraise one by one. Consider different types of measures (safeguards, mitigating measures and health promotional measures). If there are differences of opinion in the group, note on what basis the final decision to chose the five recommendations was made.

List the five selected recommendations in the Summary Table. Make a characterization for each recommendation (i.e. safeguard, mitigating measure, health promotional measures) and indicate this in the Table. Then turn to the next page.



20% completed

### Technical soundness

You now have your work carved out for you. Work through the table recommendation by recommendation. For each recommendation the first four activity points on your list of five (page 6) must be performed, and detailed guidance is provided on the following pages.

#### ***Question***

Starting with technical soundness, please discuss the question which criteria apply when appraising recommended measures for their technical soundness?

List the criteria you agreed on in the group and document the rationale for the criteria listed. Then turn to the next page.



25% completed

### Technical soundness: design

The technical adequacy of the recommendations depends on:

- Design.
- Operation and maintenance implications.
- Geo-physical setting.
- Climate.
- Local availability of materials.

The design of infrastructural works reflects the technological state-of-the-art available to achieve the project's objectives in an optimal way. At a secondary level, tradition, national pride or political decisions may influence design. Usually, there are a number of design options, and selection criteria are mainly economic. Environment and health issues may remain external to this selection process, unless impact assessments are carried out and their conclusions and recommendations are taken on board in a final decision on design.

*Examples:* cement lining of irrigation canals can prevent seepage and the formation of stagnant pools where mosquito vectors breed. Cement may, however, crack if it is of low quality or stressed by seismic activity. Experience has shown that mosquito breeding sites resulting from cracked cement-lined canals are more localized and more limited in number, but their average surface area tends to be larger.

Housing design can play a critical role in improving community health status. Screening of windows, doors and eaves can prevent mosquito vectors from entering into the house. Separating the kitchen from other parts of the house and ensuring good ventilation reduces indoor air pollution (IAP) and, as a result, the burden of respiratory infections. Resettlement provides good opportunities for housing improvements.

Some species of *Anopheles* mosquitoes (vectors of malaria) prefer to breed in rock pools that appear in rivers during the dry season or in canals during periods when irrigation is interrupted. Flushing small rivers and canals has a proven effectiveness in eliminating vector breeding. Managing malaria risks in this way is, however, only possible in areas where there is enough water available even in the dry season. The design of flushing devices (e.g. automatic syphons) should therefore allow for an optimal flushing schedule within the limitations of water availability.

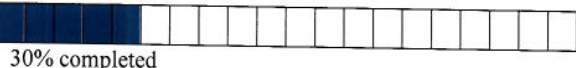
Dam design will influence changes in the hydrological regime downstream from the dam. It will allow for different options of so-called “rule curves”, decision-making regimes on the release of water which will influence agricultural practices (irrigation, crop selection, use of chemical inputs) and their human health implications for farmer communities.

#### **Question**

With respect to the recommendation under scrutiny, are there any design issues with a bearing on public health?

If so, have these design issues been addressed adequately?

Discuss these questions, and write a paragraph on this aspect for your report. Refer to the criteria you applied. Then turn to the next page.



30% completed

## Operation and maintenance

The design of recommended measures may be excellent, but their performance can still be jeopardized by poor operation and maintenance or poor estimation of resources needed.

*Examples:* Water contact patterns are an important behavioural determinant of infections with water-based parasites such as schistosome worms. Electric pumps for irrigation water distribution can reduce water contact and, thereby, infection risk. They depend, however, on a reliable supply of electricity.

An unreliable supply of piped drinking water can lead to domestic storage in recipients that support breeding of *Aedes* mosquitoes that transmit the dengue virus.

Ambulances can strengthen health services, but only if properly maintained and if fuel availability is guaranteed.

Increased availability of irrigation water downstream from a dam may lead to an increased use of pesticides. The lack of safe storage capacity, insufficient safety standards in their use and improper disposal of left-over pesticides all imply human health hazards.

A shift from traditional agriculture to intensified irrigated agriculture using electrical pumps will only be successful if the farmers are supplied with electricity from the hydropower installation. Otherwise malnutrition will be the result.

### Questions

With respect to the recommendation under scrutiny, are there any operation and maintenance issues implied by the proposed measure(s)?

If so, have these issues been taken into account adequately from the perspective of capacity and capability of the local community?

Discuss these questions. Write a paragraph for your appraisal report. Then turn to the next page.



35% completed

## Social acceptability

The technical adequacy of measures recommended in the HIA report becomes irrelevant if the measures meet with resistance from the local or affected communities.

Community characteristics may change as a result of the project. The acceptance level for certain interventions may be different in a changed community.

*Examples:* Residual spraying of houses for vector control has suffered as much from decreasing social acceptance as it has from technical problems such as insecticide resistance.

Improvement of the socio-economic status of the community will result in increased buying power including access to health services, medicine and personal protection measures.

Leaving ancestral lands is likely to create high levels of social anxiety among tribal peoples. Resettlement will have important mental health implications.

Using the services of sex workers may be a socially acceptable practice in a community of all-male construction workers, yet it may be a social taboo in nearby traditional communities.

### Questions

With respect to the recommendation under scrutiny, is it clear from the HIA report that social acceptability of the proposed measure(s) was considered adequately?

Could the proposed measure(s) under this recommendation lead to mental health problems or to social tensions?

Write a paragraph on the issue of social acceptability, then turn to the next page.



40% completed

## Knowledge, attitude, practice and belief

A first indicator of whether or not the consultant has considered social acceptability in the formulation of his recommendations is the performance of a Knowledge, Attitude, Practice and Belief (KAPB) study of affected communities as part of the HIA.

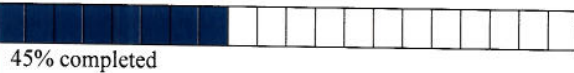
Based on the information resulting from KAPB studies and on demographic forecasting, specific social issues can be tackled in detail, and the social acceptability of recommended measures can be appraised.

- Knowledge** Did the consultant investigate the knowledge of the community when designing certain measures? For instance, there is little point in relying on the labelling of pesticides as a safeguard against poisoning if the illiteracy rate in a community is high.
- Attitude** In rural communities in many parts of the world, the attitude towards sexuality hampers open discussions on sexual issues. This reduces, for example, the effectiveness of promoting the use of condoms among groups at risk from sexually transmitted infections (STIs).
- Practice** Agricultural practices may be based on deep-rooted traditions. They may also imply important health risks. To change these practices with the objective of reducing exposure to health hazards, it is essential to understand their background. Also, the identity of the person proposing the changes is important: an agricultural extension worker is likely to have more credibility with local farmers than the community health worker when it comes to recommending changed agricultural practices aimed to reduce health risks.
- Belief** Religious convictions may hamper the impact of health safeguards and health promotional measures. For certain religious groups, for example, western medicine is not compatible with their beliefs. Strengthening of health services along the principles of western medicine will not have significant impact as long as this belief persists.

### *Question*

Is there an indication in the report that the consultant carried out relevant KAPB studies?

Consider this question and write a paragraph for your report. Then proceed to the next page.



### **Participatory action**

Affected communities should be involved in a health impact assessment. This can have a beneficial effect on the sense of ownership and on the level of social acceptance of measures that are subsequently recommended for health protection and promotion.

Designing measures in such a way that the community can also participate in their implementation will contribute to the success and the sustainability of the interventions.

It is good practice to involve an anthropologist or cultural geographer in the process to ensure a professional approach to participatory action.

Community members can play an important role not only in the implementation of recommended measures, but also in the monitoring of health risk indicators during the construction and early operation phases.

### ***Questions***

Was an anthropologist or cultural geographer part of the team carrying out the HIA?

Is there an indication in the HIA report that the community was involved in the formulation of the recommendation under scrutiny?

Does the description of the measure(s) included in this recommendation make reference to the involvement of the local community in its/their implementation?

**Discuss these questions, write one or more paragraphs on the issue and then turn to the next page.**



50% completed

## Economic evaluation

Economics is the third aspect that needs attention in the appraisal of recommended measures. The HIA report should contain a section in which the economic evaluation of the recommended measures and their alternatives is presented.

Appraisal of the economic aspects will help ensure that:

- The cost estimate of recommended measures is complete.
- The recommended measures are affordable.
- The most cost-effective option has been chosen and there are no hidden costs.
- The costs of the recommended measures are significantly offset by the cost that would have been incurred to the health sector in case no measures were taken.

The next pages will guide you through a brief appraisal of the economic evaluation contained in the HIA report.

### **Questions**

What kind of economic evaluation can you distinguish?

In what way do they differ?

What would be the most appropriate way of evaluating the economic aspects of the recommended measure(s)?

Discuss these questions in your group. Explore references to basic economics. Then write a paragraph in your report about the most appropriate type of economic evaluation in the context of HIA recommended measures before going to the next page.





## Types of economic evaluation

For a comprehensive economic evaluation of the various options for health risk management measures, cost-effectiveness analysis is the preferred method.

Other sectors, such as the irrigation department in the agriculture sector, will use cost-benefit analysis in their project planning. In that case the benefit is always expressed in monetary terms.

In the case of measures with dual (health and agricultural) benefits, it is acceptable to make the two methods compatible by estimating their agricultural benefits in monetary terms and to deduct this amount from the costs incurred by the measures, before completing the cost-effectiveness analysis.

Less comprehensive but sometimes adequate is a simple cost analysis, considering both economic and financial costs.

### **Questions**

What kind of economic evaluation has been applied by the consultants to the measure(s) under the recommendation you are reviewing? (NB it is possible that the economic evaluation has been done in a generic rather than on a measure by measure basis).

If no economic evaluation was done, which type would you recommend be done in the context of this HIA report?

Examine these questions and write a paragraph with your observations. Then turn to the next page.



60% completed

## Financial cost estimation

You are probably familiar with the estimation of financial costs of project activities. Financial costs are actually incurred by an activity and are paid for from funds contained in a budget and earmarked for that activity.

For example, nurses' salaries are paid for from the health sector budget line for human resources. Vehicle maintenance is covered from a budget line for operations.

It is important to check whether the budget accompanying the recommended safeguards, mitigating measures and health promotional activities adequately covers all cost items.

A list of financial cost items is likely to include:

- Salaries for professional and support staff.
- Buildings: construction and/or maintenance.
- Other infrastructural work.
- Vehicles: purchase, maintenance, fuel.
- Equipment, drugs, utensils and other materials.
- Energy, water and other operational costs.

The costs of **not** including measures also need to be estimated. The absence of adequate health safeguards can incur direct costs (e.g. the expenditures of the health sector for health services delivery) as well as indirect costs (productivity or development losses associated with illness, typically valued by using a proxy such as loss in income earnings, or the level of school absenteeism).

### *Questions*

Is there a transparent cost analysis for the measure(s) you are considering?

If not, can you indicate what the major cost components would be and how these relate to the cost of dealing with the health impact the measures aim to avert?

Write a paragraph on the subject of cost analysis, focusing on the adequacy of the report in this connection. Then turn to the next page.



65% completed

## Affordability

The affordability of recommended measures is to a large extent, but not exclusively, dependent on their **direct costs**. The financial costs should, therefore, be considered in the context of the overall project budget, the national budget for health services and the national foreign debt and annual debt payments.

Measures of an infrastructural nature (environmental modification) involve mainly **capital costs** (costs for goods with a useful life longer than one year), while measures that require regular and repeated operations incur **recurrent costs** (costs for goods and services that are used or replaced within a twelve month time span).

This differentiation of costs is relevant in relation to the economic concept of the **discount rate**. This means that future expenditures can be discounted at very much the same rate at which money saved in the bank gains interest. The implication is that at a low discount rate, capital investments in risk management measures of an environmental modification nature are economically more attractive than a commitment to recurrent expenditures for on-going environmental manipulation measures (or health services, for that matter). The opposite is true at high discount rates.

Many countries have limited foreign (hard) currency reserves which they need to buy essential commodities (such as oil or medicine) on the world market. The foreign currency requirements of the recommended measures need to be evaluated in this context, and the appraisal should pay attention to this aspect.

### *Questions*

Is the proposed recommendation you are considering affordable at the national level?

Does it require a substantial foreign currency lay-out?

Will it require mainly capital investment or mainly coverage of recurrent costs for an extended period?

Does the HIA report cover these questions adequately?

Write a paragraph focused on the last question. Then proceed to the next page.



70% completed

## Value for money

As a solid basis for the ensuing negotiations on division of responsibilities for implementation of recommended measures, the HIA report should contain a cost-effectiveness analysis comparing the recommended measures with feasible alternatives.

An appraisal of that analysis had best be done with the help of a health economist, but two key issues are mentioned on this page and the next: economic costs and estimating effectiveness.

**Economic costs** reflect the real value of all resources used, not just the value of the financial inputs. An important concept in this connection is that of **opportunity costs**. This covers, for example, the value of voluntary labour involved in the implementation of recommended measures. People providing voluntary labour forego the opportunity of other production-related activities. The cost of this lost opportunity should be reflected in the overall economic picture.

Market prices of certain goods or services may be distorted because of government policies (fixed exchange rates, food subsidies, taxation on imported vehicles). In order to overcome such distortions and arrive at the real economic costs of these goods and services, economists adjust these to "**shadow prices**".

Donated items do not incur a financial cost, but they should still be given a value in terms of economic costs.

### *Question*

If a cost analysis of the recommended measure(s) has been included, have economic costs been taken into consideration?

Write a paragraph on the way the report deals with economic costs of the recommended measures. Then move on to the next page.



75% completed

### Effectiveness indicators

Each intervention aimed at safeguarding or promoting health has an output that leads to an outcome. The outcome, in turn, leads to an impact on community health status. The choice of an **effectiveness indicator** from this sequence of events is important for the sensitivity of the cost/effectiveness analysis.

For very similar interventions, **output** or **outcome** can be the common indicator. For example, when providing sanitation for resettled people, different types of improved sanitation facilities provide **output indicators** of effectiveness. When considering different types of vector control (environmental management versus chemical interventions) vector density, vector longevity or entomological inoculation rate may be the **outcome indicator** of effectiveness.

For more disparate interventions the impact on community health status may be the first common denominator. The further down the chain of events, the greater the risk of confounding factors.

*For example, in a malaria vector control programme based on indoor spraying of houses with a residual insecticide, the **output** is the number of houses sprayed, the **outcome** is the reduced vector lifespan and the impact is a reduced incidence of malaria.*

### Questions

In case the consultants have subjected the recommended measure(s) to a cost-effectiveness analysis, have optimal effectiveness indicators been used?

If not, what effectiveness indicators would you choose for a cost-effectiveness analysis of the proposed measure(s)?

Write a paragraph on the issue of effectiveness indicators. Then proceed to the next page.



80% completed

### Comparing costs of risk management and costs of health services

One of the main goals of HIA is to ensure that "**hidden**" costs for the health sector, incurred by a development project, are eliminated by the incorporation of health safeguards, mitigation and health promotional measures in the project design and operation. It is therefore worth checking whether the consultant(s) investigated to what extent the costs of recommended risk management measures are offset by the reduction in health services costs.

Sometimes, the assessment overshoots its target – it may be possible that the resources required to carry out the recommended measures allow for important improvements and efficiencies in the health services to be achieved, particularly if synergies or economies of scale are brought into the equation. There have also been cases where project designers disguised project components (for instance, a drainage system) as health safeguard externalities, in order to boost the Internal Rate of Return of a project.

The HIA report should provide a final check of this point, if only to exclude that this could be used as a counter argument in the negotiations.

#### *Questions*

Have the consultants addressed the issue of cost comparison for the non-health sector preventative and promotional measures and for the remedial measures required by the health sector in the absence of such prevention/promotion?

Write a paragraph on the subject of cost comparison and how it is addressed in the HIA report.

Now return to page 10 for the appraisal of the next recommendation, and apply this exercise for all five recommendations you selected for your Summary Table. Once the appraisal of all recommendations has been completed, turn to the next page.



85% completed

## Synthesis

You have concluded the appraisal of the measures recommended in the HIA report for health risk management and health promotion.

The summary Table with the comments on the technical, social and economic aspects of each individual recommendation of the five you selected at the start of this Task will facilitate the synthesis of your findings.

Remember that there is no such thing as a perfect HIA report with water-tight recommendations. The appraisal serves as much to improve the current report and recommendations as it does to ensure that flaws in the framework for the present report (for instance, inadequate TOR) are corrected in future assessments.

### *Question*

Reflecting on the completed appraisal as a whole, can you justify an unbiased and sound decision?

Discuss this issue. Then proceed to the next page.



90% completed

### Justification and evidence base

Just like the Health Impact Assessment may allow bias, prejudice and convention to creep in because of lack of sufficient evidence and incorrect assumptions, the appraisal you have just completed may also be flawed by similar shortcoming.

To complete your appraisal, you need to make sure, therefore, that the process of drawing up your final verdict of the HIA report's recommendations is equally justified and based on solid evidence.

Sound statistics, reference to experience in previous projects (with a clear indication of the similarities and the differences) and a list of assumptions made will permit you to take a step back and consider your earlier decisions. This is also the moment to test how variations in the assumptions you made affect the final appraisal decision. If variations in the assumptions do not significantly alter the basis for your final decision, then they can be considered robust.

Once the group is satisfied with the comprehensive appraisal of HIA recommendations, you are ready for the final step.

#### *Question*

Does the synthesis indicate that the recommendations meet the technical, social and economic quality criteria?

This is the moment to come to a final consensus decision on the adequacy of the HIA report. Write a paragraph with the arguments on which your decision is based. Then proceed to the final page.





95% completed

### Outcome of the second part of the appraisal

You will now have come to your final verdict:


- Rejection of the HIA report as inadequate.
- Demanding major improvements of the HIA report.
- Acceptance of the HIA report with minor corrections.
- Acceptance of the HIA report as it stands.

In the following series of presentations, colleagues from some of the other groups will address the assessment procedure and conclusions, while colleagues from the group(s) with the same Task as you performed will shed their light on the quality of the recommendations.

In addition to the presentation, prepare a summary report with your final decision about the possible rejection, the need for improvement or the acceptance of the HIA based on the appraisal of recommendations. This assumes that the procedure and the conclusions' part of the appraisal has had a positive outcome.

Prepare a brief presentation of not more than ten minutes, summarizing your part of the appraisal report.

This concludes Task 2b.



100% completed