**Health Equity Impact Assessment for New and Existing Policies**

**Background**

The Lawrence-Douglas County Health Department (LDCHD) is committed to the pursuit of health equity for all residents in Douglas County. LDCHD’s shared definition of health equity is “that everyone, regardless of social advantage or disadvantage, has a fair and just opportunity to be as healthy as possible by addressing social inequities in opportunities and resources needed to be healthy.” Part of the pursuit of health equity is ensuring that policies, programs, ordinances, resource allocations, and regulations promote and are not detrimental to the pursuit of health equity.

One tool to assist with this pursuit is the Health Equity Impact Assessment (HEIA). The HEIA is based on the Health Impact Assessment process and can be used to identify and address potential unintended health impacts (positive or negative) of a policy on specific groups. It can be used prior to implementing a new policy or may be used to evaluate existing policies that may not initially have been developed through an equity lens. When applied retrospectively, the HEIA seeks to strengthen the focus on equity by identifying the unintended impacts of an existing policy or practice to inform future action. By focusing specifically on equity issues in a way that may not have previously been done, the lessons learned can be used to change existing practice, provide insights on the awareness of equity considerations, strengthen considerations of equity within future planning processes or inform implementation strategies.

**Goal:**

* Guide decision-making using an equity framework.
* Reduce the potential for unintended consequences that may perpetuate disparities, either directly or indirectly, and advance health equity.
* Prospectively build health equity into the planning of new policies, programs, ordinances, resource allocations, regulations, or other initiatives.

**Procedure**:

This tool should be used during the decision-making process about a new or revised policy or may be used retrospectively to evaluate existing policies through an intentional health equity lens.

The assessment may be applied to the development or review of community policies, programs, ordinances, resource allocations, regulations, or other initiatives, such as those considered by the Douglas County Commission, municipalities, school boards, or other decision-making bodies and could accompany a position statement submitted to those organizations.

**Health Equity Impact Assessment (HEIA)**: The questions below are designed to ensure that policies promote health equity. The questions below may not be able to be answered for every policy but serve as a platform for further discussion prior to the adoption of any new policies.

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| Date: | Person/Group Completing HEIA: |
| Policy Name: |
| What is the question to be answered by this HEIA?  |

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| **Section 1: Screen** |
| 1a. Does the policy have the potential to impact the agreed-upon definition of equity (everyone deserves a fair and just opportunity to be healthy)?[ ]  Yes, continue with HEIA [ ]  No, consider discontinuing HEIA [ ]  Unsure (*If you are unsure, contact the Community Health Team at the Health Department or visit with someone at the organization that is considering the policy)*  |

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| **Section 2: Scope** |
| 2a. Please provide a background and rationale for this policy:  |

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| **Table 2: Health Equity Impact Analysis** *(Contact Health Department for assistance or an example)* |
| **Policy** | **Direct impacts**(What will happen as a result of the policy?)  | **Intermediate impacts**(Which CHP Issue Areas/causes of health inequity are impacted?)  | **Geographic impact** (Will one of the below be primarily impacted?) | **Impacted population groups**  | **Projected impact on health equity**  |
|  | Potential positive impacts: Potential negative impacts:  | CHP Issue Areas: [ ]  Economic stability (Poverty and Jobs) [ ]  Safe and Affordable Housing [ ]  Behavioral Health [ ]  Healthy built environment[ ]  Food Security Other: [ ]  Education [ ]  Social and community context (discrimination) [ ]  Health and health care (access to services) Please describe your answer:  | [ ]  Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Census Tract: \_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Municipality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Neighborhood: \_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  No specific geographic areas identified | [ ]  Racial/ethnic minority[ ]  Age group [ ]  Gender group[ ]  Low income[ ]  Low education[ ]  Immigrants/ refugees[ ]  Incarcerated/ formerly incarcerated[ ]  Sexual minority[ ]  Limited English proficiency[ ]  Person with a Disability[ ]  Homeless[ ]  Substance Use Disorder[ ]  Mental Health[ ]  Unsure | [ ]  Improve [ ]  Harm[ ]  UnclearPlease describe your answer:  |

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| **Section 3: Assessment Findings** |
| 3a. To what extent does evidence (data, literature, subject matter expertise) from other communities or organizations support the connections between similar policies and the health equity impacts identified above?  |
| 3b. Have you engaged the potentially impacted populations, and what are their perspectives on the potential impact of this policy?  |
| 3c. What are the projected positive or negative impacts of the policy? |

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| **Section 4: Recommendations** |
| 4a. How could the decision-making body maximize opportunities and minimize harm to the affected populations? |

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| **Section 5: Monitor and Evaluate** |
| 5a. How will data be used to monitor the impact on health equity resulting from this policy? |
| 5b. How will results and outcomes of the policy be shared and communicated with affected groups? |

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| **Section 6: Summary** |
| 6a. Please provide a short summary to be provided to your group’s leadership and policy decision-makers that summarizes the findings and recommendations.  |