Arizona Health in Policy & Practice
HIA Screening Criteria¹
Prepared by ChangeLab Solutions

**Summary of Criteria**

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**Tier 1 – Initial criteria**

1. **Is there a specific decision being made?** We do not want opportunities that look at a broad idea (like transit oriented development). We want opportunities attached to a specific policy, project, or planning decision.

2. **Policy area:** Does the policy, project, or plan fall into one of the policy areas of interest for HIP²?
   - a. Healthy community design, including school siting, safe routes to school, bicycling, pedestrian infrastructure
   - b. Transportation
   - c. Food environment
   - d. Climate change/extreme weather

3. **Proposal status:** What is the status of the policy, project, or plan?

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¹ ChangeLab Solutions prepared these health impact assessment screening criteria on behalf of HIP². These criteria will be used to identify potential HIA opportunities for HIA stakeholders throughout the state to pursue. Screening criteria based on Human Impact Partners’ Considerations for the Selection of Appropriate Policies, Plans, or Projects for Analysis using Health Impact Assessment, as well as HIP² project goals.
a. Active proposal
b. Planned proposal – rate likelihood as low, medium, high
c. Dead proposal, but will be re-introduced – most relevant in state legislature context
d. Proposal has been approved, but not implemented

4. **Proposal timing:** Will the decision be made by the end of 2014?

5. **Potential health impacts – initial screening**

We will do a cursory assessment of the potential health impacts for the initial screening phase. We will determine if the proposal has the potential to affect health outcomes that have been identified as priorities by HIP\(^2\). Proposals may have other important health impacts, but they must have an impact on at least one of the health outcomes prioritized by HIP\(^2\).

a. Reduce chronic disease rates\(^2\)

<table>
<thead>
<tr>
<th>Diseases(^3)</th>
<th>Risk factors</th>
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<tbody>
<tr>
<td>• Cancer</td>
<td>• Access to healthcare</td>
</tr>
<tr>
<td>• Heart disease</td>
<td>• Access to insurance</td>
</tr>
<tr>
<td>• Chronic lower respiratory disease</td>
<td>• Obesity</td>
</tr>
<tr>
<td>• Diabetes</td>
<td>• Poverty</td>
</tr>
<tr>
<td>• Alzheimer’s disease</td>
<td>• Limited access (cost and geography) to healthy foods</td>
</tr>
<tr>
<td>• Chronic liver disease &amp; cirrhosis</td>
<td>• Physical inactivity</td>
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</tbody>
</table>

b. Improve environmental Health\(^4\)\(^5\)

<table>
<thead>
<tr>
<th>Diseases/conditions</th>
<th>Risk factors</th>
</tr>
</thead>
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\(^2\) AZ Chronic Disease Strategic Plan 2012-2015

\(^3\) According to the AZ Chronic Disease Strategic Plan, chronic diseases represented 7 of the 10 leading causes of death in the state.


\(^5\) Office of Environmental Health: [http://www.azdhs.gov/phs/oeh/](http://www.azdhs.gov/phs/oeh/)
- Asthma
- Heat illness
- Skin cancer
- Lead poisoning
- Pesticide poisoning
- Valley fever

- Extreme weather
- Sun exposure
- Secondhand smoke
- Allergens
- Air pollution

c. Prevent transportation-related injuries
   i. Motor vehicle
   ii. Bicycle
   iii. Pedestrian

6. Impact on health disparities – initial screening
   We will do a cursory assessment of the potential disparities impacts for the initial screening phase. We will determine if the proposal has the potential to affect priority populations.
   a. Racial/ethnic
      i. Native Americans
      ii. Latinos
      iii. African Americans
      iv. Asian Americans/Pacific Islanders
   b. Low income
   c. Age
      i. Children
      ii. Older adults

7. Local versus state: Is it a local (city or county) or a state proposal? We are looking for 3-4 local opportunities and 1-2 state opportunities.

8. Discretion of stakeholder group: HIP² will have the option to eliminate or include options at their discretion. We will document the reasoning if it conflicts with established criteria.

Tier 2 – In-depth criteria

1. Potential health impacts – detailed screening
   We will attempt to quantify at a high level the potential impacts on the health outcomes

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prioritized by HIP\textsuperscript{2}. If time permits, we will also quantify the potential impacts on lower priority outcomes.

a. Evidence and data related to the health impacts exist, or could be collected
b. Connection between proposal and health outcomes
   i. Obvious – health data are already part of the process
   ii. Moderate – Connection is clear, but not being considered
   iii. Distant – Proposal may have indirect effects that are difficult to tease out.
c. Potentially significant health impacts
   i. Number of people
   ii. Magnitude of impact
   iii. Breadth of impacts

2. Impact on health disparities – detailed screening
   a. Racial/ethnic
      i. Native Americans
      ii. Latinos
      iii. African Americans
      iv. Asian Americans/Pacific Islanders
   b. Low income
   c. Age
      i. Children
      ii. Older adults

3. Receptivity of decision-makers
   a. Receptive decision-makers
   b. Process required to be open or required to incorporate health considerations
   c. Influential stakeholders who have access to decision-makers
   d. Possible to sway public opinion

4. Partners exist to help with HIA
   a. Identify interested organizations/agencies/individuals who could participate.
   b. Does the project encourage cross-sector collaboration?
   c. Level of interest from potential partners

5. Potential for systemic/institutional change (not exclusionary)
   a. Encourage cross-sector collaboration that has never happened before
   b. Change the way govt process or agency works
   c. Policy becomes model for other places

6. Availability of funding for HIA (not exclusionary)
   a. Are there agencies or organizations with funding to conduct the HIA?
   b. Could the HIA be funded by developers?
c.  Are there grant opportunities that could fund the HIA?

7.  **Discretion of stakeholder group**: HIP\(^2\) will have the option to eliminate or include options at their discretion. We will document the rationale if it conflicts with established criteria.