



Rijksinstituut voor Volksgezondheid  
en Milieu  
*Ministerie van Volksgezondheid,  
Welzijn en Sport*

# Institutionalisation of HIA in the Netherlands

Process, outcomes, and lessons  
learnt



# Institutionalisation...

“the process of embedding something (for example a concept, a social role, a particular value or mode of behaviour) within an organisation, social system, or society as a whole” (wikipedia)

How was HIA embedded in the Netherlands and what can we learn from that process?

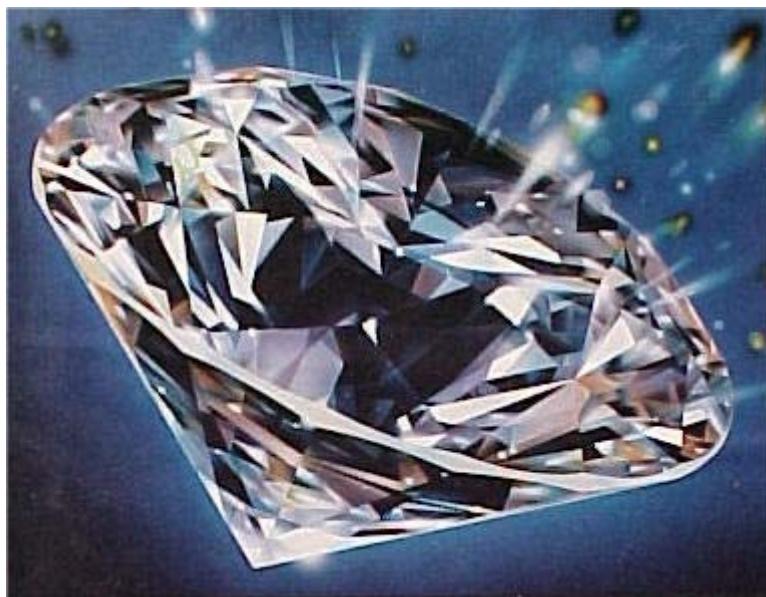
Let us take a closer look...





## HIA NL developed on a national level

- 1966 'general' health policy versus 'specific' health policy
- 1986 health in other policies ('facet' policy) as a strategy to improve the population's health
- 1994 facet policy implies development of HIA.
- 1995 installation 'Intersectoral Policy Office'. Assignments: develop HIA expertise AND carry out HIA





# Cooperation Ministry of Health – Intersectoral Policy Office

IPO	MHO
Screening	
Advice to MOH	
	decision on HIA
Scoping	
	Assignment
Commission HIA	
Report	
	Policy development

Research  
institute



## 25+ HIAs carried out 1996-2002

### Examples:

- **Energy tax regulation (ecotax)**
- **High speed rail**
- **Tobacco policy**
- **Housing policy**





## HIA on local/regional level

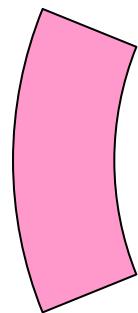
- **Public Health Act (2002): municipalities are obliged to consider health impacts of all municipal policies**
- **City and Environment Act (2006): temporary act that enables municipalities to carry out projects despite environmental regulations. HIA for city and environment was specifically developed.**
- **Implementation of inclusion of health in EIA/SEA. Development of training and tools suitable for EIA/SEA legal framework**



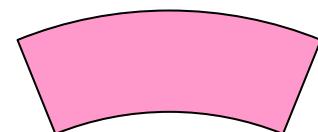


# Prevention cycle

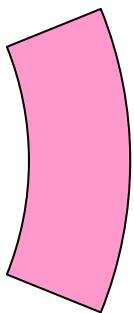
**Public health  
status & forecast**



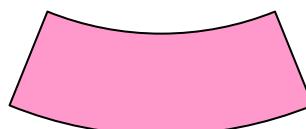
**National prevention  
statement**



Public  
Health  
Act



**Health Inspectorate  
monitoring**



**Local prevention  
statements**



# Being healthy and staying healthy: a vision of health and prevention (2007)

- **Intersectoral cooperation is a 'must'**
- **Look for parallel interests**
- **Different actors and sectors as well as different policy levels should connect to one another**





# HIA on local level in practice

- **Mainly in major cities**
- **Embedded in HiAP framework**
- **Positive attitude, yet need for practical advice**
- **Soft sectors are easiest to connect to**





## Lessons learnt

- **Joint ownership (HIA process)**
- **Changes in government needs and related structures occur**
- **Expert knowledge versus process management**
- **Legal requirements work best when combined with practical tools and support**
- **Networks and dissemination**





*Thank you for your attention!*