Health Impact Assessment on the Flaxmere Urban Design Framework: The results of a process and impact evaluation

Velma McClellan & Louise Signal
Health, Equity and Wellbeing Impact Assessment Research Unit, University of Otago

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The authors of this report would like to thank the people who participated in this evaluation for their time and thoughtful reflections on the HIA process and outcomes.
Executive summary

Background
This report presents the findings of a process and impact evaluation of a Health Impact Assessment (HIA) on the Hasting District Council (HDC) *Flaxmere Town Centre Urban Design Framework*. The HIA was led by the Hawke’s Bay District Health Board (DHB) HIA team. The evaluation was undertaken by the HIA Research Unit, University of Otago and was supported by funding from the Ministry of Health’s HIA Support Unit’s *Learning by Doing Fund*.

Methods
The evaluation was conducted alongside the HIA. Data were gathered for the evaluation using a mix of methods that included; participant observation, workshop participants’ evaluation feedback, documentary analysis and interviews with nine key stakeholders.

Results
The evaluation’s key findings suggest the HIA process was effective. While the evaluation results are somewhat skewed towards the HIA team members’ views on the effectiveness of the HIA process, the feedback from the community stakeholders, the evaluators’ observations of the process, and documentary analysis collectively suggest that, on balance, the HIA worked very well. The HDC adopted all nine of the HIAs’ recommendations and all five of its objectives were met.

Conclusion
The HIA on the HDC’s *Flaxmere Town Centre Urban Design Framework* is another example of the value gained from the use of HIA in the Hawke’s Bay Region. It is also another example of the Ministry of Health’s *Learning by Doing* fund being put to good use.
Section 1: Introduction

This report presents the findings of a process and impact evaluation of a Health Impact Assessment (HIA) on the Flaxmere Urban Design Framework. HIA is a practical assessment approach to ensure that health, wellbeing and equity are considered as part of the policy development process. The HIA was lead by the Hawke’s Bay District Health Board (DHB) HIA team in partnership with staff from the Hastings District Council (HDC) and Quigley and Watts Limited consultants. The evaluation was undertaken by the HIA Research Unit, University of Otago, with funding support from the Ministry of Health, HIA Support Unit’s Learning by Doing Fund.

Background

Over the past two years, the Hawke’s Bay District Health Board (DHB) has been working with local and regional government agencies in its region to incorporate health impact assessment (HIA) into its planning processes. In October 2007, the Hawke’s Bay DHB offered to carry out an HIA on the Hastings District Council’s (HDC) draft Flaxmere Town Centre Urban Design Framework. Following discussions both parties agreed to proceed with an HIA, in partnership with Wellington-based HIA consultants Quigley and Watts Limited. This report presents the results of an evaluation of that HIA process and its short-term impact. The evaluation was undertaken by the HIA Research Unit, University of Otago for the Hawke’s Bay DHB’s HIA team.

Funding for the Hawke’s Bay DHB’s current HIA programme and their respective evaluations was provided through the Ministry of Health’s HIA Unit’s Learning by Doing fund.

The Flaxmere Town Centre Urban Design Framework

Flaxmere, a suburb of Hastings, has a population of 9,800. Flaxmere has a high deprivation index and significant health issues. It has a relatively high proportion of single parent and low income households and Māori and Pacific peoples, who are disproportionately represented in terms of low income and educational outcomes. Local cultural initiatives, for instance kura kaupapa, are expected to improve future educational outcomes (Thornley & Marsh 2009).

The privately owned town centre of Flaxmere was developed in the 1970s. It consists of a small supermarket, a number of other small commercial premises including a post shop, a pharmacy and a medical centre. The town centre is linked to several community and recreational facilities. It is built on 5.63 hectares of HDC land, including a sizeable vacant section (Rohleder & Apatu 2009).

As part of the Council’s implementation project plan for its Flaxmere Community Plan 2015 it was HDC decided to explore the urban design of the town centre. A three-day, HDC funded workshop on this issue was facilitated in August 2007 by Chow Hill Urban Design Consultants for community representatives and local community people. Participants generally supported an urban redevelopment concept design that would provide a township centre with a ‘sense of place’, that has good connections with other local recreational amenities, is safe to shop in, and fulfils resident’s essential shopping needs (McKay 2009).
Subsequently the HDC’s draft *Flaxmere Town Centre Urban Design Framework* (the draft urban design framework) was adopted by Council and approved for further public consultation. That plan aims to revitalise the services and amenities available to Flaxmere’s residents, using best practice and urban design and land use planning (McKay 2009). About this time, Hawke’s Bay DHB offered to carry out an HIA on the draft urban design framework in collaboration with the HDC, an offer that the HDC accepted.

During this time the Flaxmere Town Centre had a change of ownership when it was sold to a Hong Kong business corporation resulting in delays to progress on the urban design framework while the Council endeavoured to get the new owners on board with the idea of redeveloping the town centre.

**A definition of HIA**

HIA is defined as “a combination of procedures, methods and tools by which a policy, program or project may be judged by its potential effects on the health of a population, and the distribution of those effects within the population” (European Centre for Health Policy 1999). It is a practical way to ensure that health, wellbeing and equity are considered as part of policy development in all sectors. It also helps facilitate policy-making that is based on evidence, focused on outcomes and encourages collaboration between a range of sectors and stakeholders. HIA is used in many countries, including New Zealand. In recent years policy-level HIA has been increasingly embedded in this country (Signal et al 2006).

HIA typically involves a four-stage process, namely:

1. Screening: a selection process where policies are quickly judged for their potential to affect the health, wellbeing and equity of populations, and hence the need (or not) to undertake HIA
2. Scoping: planning the HIA including identifying the aims and objectives, identifying key stakeholders, determining resources needed and identifying possible data sources
3. Appraisal: describing the potential benefits and risks to health and their nature and magnitude and identifying potential changes that could be made to a policy to enhance its positive and mitigate its negative impacts on health, equity and wellbeing
4. Evaluation: assessing the process of the HIA in order to determine how it was done and to provide useful information for future HIAs, assessing the impact of the HIA to determine the extent to which the recommendations were taken on board in the policy decision-making process; and assessing the outcome of the HIA, namely its long-term effects on health, equity and wellbeing (Public Health Advisory Committee 2005).

**The HIA’s aims and objectives**

**Aim**

To improve the health and wellbeing of Flaxmere residents by assessing the positive and negative health and wellbeing impacts of the Flaxmere Urban Design Framework and make recommendations about how to enhance the positive and mitigate the negative impacts and to achieve the following HIA
Objectives

- Enhance partnership working between the Hastings District Council and Hawke’s Bay DHB through shared planning and resourcing.
- Contribute to an increased awareness about public health, equity and inequalities, health impact assessment and the link between health and urban design for Hastings District Council and the Hawke’s Bay DHB.
- To build capacity for Hawke’s Bay District Health Board and Hastings District Council staff to use HIA in Hawke’s Bay.
- To deliver the findings in a user-friendly manner to both the DHB and the Council
- To disseminate the HIA findings into the wider policy arena of all relevant agencies (Rohleder & Apatu 2009).
Section 2: The evaluation objectives

The evaluation of the HIA on the HDC’s Flaxmere Town Centre Urban Design Framework aimed, in terms of process, to determine:

- If the objectives of the HIA were met
- What processes were used to analyse the findings and write the HIA report
- The strengths of the HIA process
- The constraints of the HIA process
- Possible ways the HIA process could have been improved
- The resources used throughout the HIA process
- The alignment between the HIA and the HDC’s Long-term Council Community Plan.

In terms of impact the evaluation aimed to determine:

- The impact of the HIA on the draft urban design framework
- If the HIA added value to the planning process? If so in what ways?

With regards to overall issues the evaluation aimed to identify:

- Key factors or ‘hooks’ that achieved buy-in into the HIA process and outcomes, particularly at a senior management and political level
- Possible resources that could be developed for future use in HIAs, such as manuals/handbooks, planning templates, workshop letters of invitation, and workshop evaluation questionnaires
- Key lessons from this HIA for the key HIA players in the Hawke’s Bay (the Hawke’s Bay DHB, the WDC and other potential community agency partners).
Section 3: Data collection methods

This evaluation was conducted in the spirit of ‘learning by doing’ in accordance with the funding source criteria for the HIA and its evaluation. While the two-member evaluation team conducted the evaluation independently, they also worked with the HIA team and the HIA consultant as participant observers. In this role they listened, took notes throughout the key HIA-related workshops and meetings, and reviewed the various key draft documents once completed. The evaluators also provided feedback to the HIA team throughout the HIA process and prompted those involved to reflect on their practice. This feedback and reflection provided opportunities for the HIA team to pause and to make changes where required.

The evaluation was conducted concurrently with the HIA, with the evaluators first formally engaging at the scoping stage. Evaluation data were gathered using the following methods – participant observation, workshop evaluations, documentary analysis and key stakeholder interviews. The evaluation was undertaken over more than two years. The HIA process began in October 2007 with screening. The impact of the HIA was not known until an HDC decision on the HIA report’s recommendations in November 2009.

Observation of the HIA process

Dr Louise Signal the principal evaluator attended and observed the HIA’s scoping and community appraisal workshops. Velma McClellan subsequently observed a one-hour appraisal workshop, with a group of Flaxmere College students, which included consideration of the redesign of the Flaxmere Town Centre. The evaluators’ role in these workshops was primarily one of observing. This also involved taking note of who attended, recording observations throughout the workshop’s proceedings, reflecting on the process and documents arising from the process, and providing feedback to the DHB’s HIA team and the HIA consultant. The evaluation team also participated in key HIA planning meetings and teleconferencing with the HIA team and the HIA consultant. Feedback on documents produced for the HIA was provided orally and via email.

Analysis of HIA workshop participants’ feedback

The key appraisal meeting with the business community was evaluated. Eleven of the 17 workshop participants completed a questionnaire (six people left early and were not asked to complete the evaluation). The 11 evaluation responses were subsequently analysed for key themes. An evaluation report for this workshop were prepared and emailed to the HIA team and the HIA consultant for their information and comment.

Post-workshop evaluation feedback was not sought from the scoping meeting or the appraisal with Flaxmere college students, in the later case due to the limited time available.

Review of relevant HIA documentation

All key documents relevant to the HIA were read to:

- inform the evaluation by providing background and context to the HIA
provide information on the HIA’s content, process and impact. The key documents reviewed included:

- The Hastings District Council’s draft *Flaxmere Town Centre Urban Design Framework* (HDC 2007).
- The HIA screening, scoping and appraisal workshop notes and reports prepared by the HIA team (Rohleder & Apatu 2009).
- The minutes from other HIA team meetings and teleconference calls.

**Key stakeholders interviews**

Two interview schedules were developed for the key stakeholders interviews (see appendices 1 & 2 for copies of the schedules). The first was prepared for those directly involved in developing and implementing the HIA process; i.e. the two Hawke’s Bay DHB HIA team members, the Wellington-based HIA consultant and the HDC’s environmental policy team leader. The second was developed for the interviews with other local community stakeholders who attended either one or both of the HIA workshops.

**Interview sample selection**

The evaluation team developed an initial list of 10 stakeholders, considered representative of the range of stakeholders involved in the HIA process. Of the original list of 10 stakeholders, seven subsequently responded, although two subsequently declined to be interviewed due to more pressing work commitments. One of the latter, however, emailed his general thoughts about the value of the HIA. That assessment was included in the subsequent data analysis.

Two further names were added to the interview list. One was interviewed by telephone while the other (the Australian-based urban design consultant) completed the stakeholder questionnaire and returned it by email. A total of eight stakeholders thus responded to the evaluation but only seven were interviewed.

Those interviewed by telephone included the four members of the HIA team (two DHB staff, the HDC Team Leader Planning and the HIA consultant), the Australian-based urban design consultant (contracted by the HDC to help develop the draft urban design framework), a local community resident and licensing trust member, and an HDC community development manager.

The non-respondents included one HDC councillor and two local business owners.

All seven stakeholders were sent an email with an evaluation information sheet and an interview consent form attached (see appendix 3). The interviewer checked to see if participants had read the information sheet prior to interview. All had read it.

**Data analysis**

All data were analysed for key themes specific to the HIA evaluation objectives and any other relevant issues that emerged during analysis. Data from the
different methods were triangulated to form a picture of the process and impact of the HIA.

**Ethics**

Ethics approval was sought from the multi-region ethics committee. The committee noted ethics approval was not required as the evaluation was an audit of work being undertaken by the DHB.
Section 4: Process evaluation results

This section of the evaluation report outlines the HIA process used by the Hawke’s Bay DHB to assess the HDC’s draft urban design framework. The information presented in this section is supported by data collected from a review of key documents, the HIA team member’s evaluation feedback, the evaluator’s observations at the scoping and appraisal workshops and evaluation feedback from community people who attended the workshops.

The ‘HIA team’ as described in this report includes the two Hawke’s Bay team members, the HDC’s environmental policy team leader, and the HIA consultant, unless otherwise stated.

HIA screening phase

This first HIA stage was held in October 2007. A template of seven questions were examined by the four member screening group to determine: the positive and negative health impacts from the proposed urban design framework; the causal pathways of those impacts; the likely impact on Māori and whānau; the potential scale of the impacts; the potential for the urban design plan to increase or decrease health inequalities between Māori and non-Māori, or other groups; which other sectors of government might the proposed plan have potential impacts on, and what, if any, concerns have local residents’ expressed about the current Flaxmere town centre.

Responses to all the above screening questions showed an HIA was appropriate to apply to the draft design plan. The group’s decision to proceed with an HIA process was subsequently ratified by Council.

The scoping phase

The scoping workshop was held at the Te Aranga Marae on 15 April 2008, approximately six months after the HIA’s initial screening phase. The workshop was facilitated by Robert Quigley HIA consultant from Wellington-based Quigley and Watts Limited. Robert was supported by Maree Rohleder of the Hawke’s Bay DHB and the HDC’s Senior Environmental Planner HDC, Dawn McKay. Dr Louise Signal of the University of Otago evaluation team was also present as an observer. Also in attendance were 9 community stakeholders. The latter included two HDC Councillors, both residents of Flaxmere, representatives from the Hawke’s Bay Pacific Health Services, Sport Hawke’s Bay, and Te Aranga Marae. A staff person from Tairawhiti DHB also attended to observe the process.

Robert Quigley ‘set the scene’ with an outline of the purpose of the workshop and an explanation of the HIA process as applied to the HDC’s draft urban design framework.

The HDC’s Senior Environmental Planner followed with a PowerPoint presentation that provided a valuable overview outlining:

- the linkage between the draft framework and the HDC’s Flaxmere Community Plan 2015 (HDC 2005)
- the urban design framework project priorities (creating and maintaining a safe environment; improving economic opportunity and raising domestic income; promoting and enhancing economic identity, pride and a sense of
belonging)

- the elements considered important to include in the Flaxmere Town Centre design (access, safety and vitality; sense of place, sustainable environments, economic activity)
- proposed process for developing the project.

This introductory session effectively set the scene for the day’s proceedings.

**The determinants of health and wellbeing**

Following a brief description of the concept of determinants of health and wellbeing, participants identified a list of those determinants they considered important to include in the project brief for Flaxmere urban design framework, namely housing, transport, cultural and spiritual, economic, access to services, personal behaviours, safety and education. Participants were subsequently asked to select three measurable, achievable, and time-bound determinants from the list of eight for the HIA to focus on, given there was insufficient time for the HIA to cover all eight. Three post-it notes were distributed to each of the participants to indicate their top three priorities. They were then grouped on a whiteboard. Some participants indicated having difficulty in narrowing the focus down to just three determinants, due to Flaxmere being such a high needs community. However, this selection process resulted in four broad determinant being identified – transport, economy, safety and neighbourhood housing. It was suggested the remaining four determinants could be ‘picked up’ in other parts of the project.

**The populations affected**

The same post-it notes selection process was used to identify the population groups most likely to be affected by the urban design framework. This exercise resulted in four population groups for the HIA to focus on:

- Pacific families
- Māori youth
- Elderly.

Potential sources of evidence and data were also identified. They included:

- a literature review and community profile (a component of the HIA)
- on-going consultation with stakeholders and the community (a list of individuals/ agencies was drawn up to this effect).
- data elicited by the HIA team from the workshop and subsequent stakeholder interviews.

Participants were informed that this HIA’s appraisal phase would be linked into the HDC’s consultation round.

**Level of participant engagement in the scoping workshop**

While no formal evaluation of this workshop was undertaken, the evaluator observed an open process with good participation from a range of attendees.

Learnings from observing this first HIA scoping conducted by the Hawke’s Bay DHB included:

- using a Pacific health model when the audience includes Pacific people
having a Pacific representative who can speak to the needs of the Pacific community (not done in this case but asked for by a Pacific participant)

- clarifying both the purpose of the workshop and the HIA process in the introductory session of all HIA-related workshops is important

- a presentation of the workshop’s focus, in this case, the urban design plan, appears to always be necessary to ensure everyone in the meeting understands the policy or plan under discussion

- it is important to be clear about what is in and what is out of the HIA and what can be picked up in other processes

- it is valuable to come in early in the process with an HIA.

The appraisal phase

Four appraisal workshops/meetings and a literature review were carried out during the HIA’s appraisal phase.

**HDC consultation meeting with the business community**

The first appraisal workshop held in the afternoon on 29 April 2009 was preceded by an official HDC consultation meeting with the Flaxmere business community.

In attendance at this earlier meeting were at least three members of the business community, two HDC councillors, the HDC deputy mayor, the urban planning consultant contracted by the HIA, the HDC’s chief executive officer, the two-member Hawke’s Bay DHB’s HIA team, their HDC team partner, the HIA consultant and the principal evaluator and other Council staff.

Henare O’Keefe, Hastings District Councillor for Flaxmere and local resident, formally opened the meeting with a karakia. The Deputy Mayor welcomed everyone to the meeting. She noted that:

- Council began this work in 2007
- Council has a significant land holding in Flaxmere
- They are seeking a vibrant town centre that works well for all involved
- Today’s meeting was the first phase of the Council consultation providing an opportunity to explain the draft plans and get feedback
- That Council were seeking a partnership – an opportunity for everyone to work together.

**Scene setting presentation**

Phil McKay, HDC environmental planner, provided a scene setting introduction, which included a PowerPoint presentation. He presented the information clearly and succinctly and took questions at the end of the presentation. He noted that:

- HDC ‘wanted to consult the landowners and business people’.
- The HDC then plans to consult the wider community – asking for strengths and weaknesses of the key themes of the various options presented.
The Hawke’s Bay DHB is working with Council in partnership to undertake an HIA on the framework plan.

Changes to the District Plan and the Long-term Council Community Plan (LTCCP) will likely be required if the plan is implemented.

He invited all the retailers to come to the afternoon’s HIA session but understood that people would need to come and go given that it would be held in what is the middle of the business day.

Urban planning consultant’s presentation

Mike Cullen the urban planning consultant working with the HDC on its Flaxmere Urban Design Framework then provided a very effective presentation on the challenge of undertaking urban renewal in Flaxmere. He described Flaxmere as ‘the world’s longest cul-de-sac’. He also noted that:

- Currently the town centre is a shopping centre sitting in a landscape and car park.
- The aim is to create a traditional village, a mixed-use village that will provide opportunities to improve Flaxmere residents’ quality of life and enhance wellbeing. The leading argument he made was around obesity.
- Keeping the community informed about the urban planning process is essential.
- The plan is anchored on the idea of developing a supermarket in the town centre.

Following a period of open discussion about the plan and the process from here on, the meeting was officially closed at 12:30pm. Participants were invited to stay on for lunch and the afternoon’s HIA appraisal workshop. However, a number left following lunch.

HIA appraisal workshop

Henare O’Keefe, HDC councillor and Flaxmere resident welcomed the 22 participants present at the afternoon’s HIA appraisal workshop. Henare’s welcome was followed by a brief presentation from HIA team member Ana Apatu who outlined key information concerning the Flaxmere community.

Scene setting presentation

Robert Quigley, HIA consultant to the Hawke’s Bay DHB’s HIA team, set the scene by briefly outlining the concepts and purpose of an HIA, including the impact of socioeconomic determinants on health and wellbeing and the focus of the days’ appraisal workshop.

Process for brainstorming on determinants

This session focused on two key determinants - business and neighbourhood safety. Participants broke into three groups for the brainstorming exercise. Two focused on neighbourhood safety while the third group concentrated on business.

Each group was facilitated by a member of the HIA team. The groups used a set of questions to direct the discussion. The facilitator recorded notes on large sheets of white paper. Participants were asked to brainstorm the possible positive and negative impacts from the urban design framework arising from the determinants they were working on. On completing this task they were
asked to select those they considered key and track a cause and effect pathway for each.

The conversation ensuing from these small group discussions was very robust.

The facilitators then reported back to the whole group. Following the report back session the HIA consultant outlined the steps of the HIA from this point on. People were asked to complete a workshop evaluation form before leaving the workshop session. The meeting closed with a karakia.

**Participant’s evaluation feedback**

Of the 22 participants at the workshop, 11 completed evaluation forms. The five directly involved in delivering the HIA and six others who left the workshop early did not complete an evaluation form.

For the 11 participants who did complete an evaluation form, the HIA appraisal meeting appeared to have been a positive experience. Responses showed they had found the workshop:

- a useful and positive learning
- a good opportunity for them to develop or maintain links with people across the sector/s
- a good opportunity to contribute their views and ideas for the enhancement of the urban design framework plan.

Key strengths identified by the workshop’s participants included:

- the different perspectives brought to the discussion
- the involvement of those that know what is needed to grow the Flaxmere community
- hearing the views of other people added to the pool of understanding and was likely to produce good outcomes
- the presentations
- the structured process.

In the concluding section of the evaluation form, one participant noted ‘This is the second HIA I’ve been involved in and as always I loved it! I saw improvements from the last one I attended’, namely the HIA introduction was considered shorter and more succinct’.

Three participants suggested the following possible improvements:

- the involvement of more business people, including people from Omahu Road and surrounding areas
- the causal pathways is always a difficult one to get your head around, so some how making it an easier task for non-government agency people to understand would be [an] improvement
- the meeting would have been better held in a community hall rather than a church.

This was a very well run meeting that participants appeared to view very positively. This is borne out from the observations of the evaluator, the feedback from people in the room and from the completed evaluation forms.
People seemed to be very comfortable with the process and the degree of direction that was given. Participants in the small groups seemed to be very engaged. It appeared that everyone spoke an equal amount in the groups.

Only five of the 19 meeting participants were business people. The others were consultants, DHB staff, HDC staff or councillors. It is interesting to consider how much this workshop was a consultation with business people and how much it was the HDC and DHB staff and councillors reflecting on the issues? Those business people who did participate seemed well engaged with the issues and the HIA process. The two owners of the village attended the whole day and actively participated in the HIA discussion. In one small group the two village owners and a long-term resident had a very productive discussion about the health and safety issues in the Plan.

Keriana Poulain, a HDC councillor and Flaxmere resident spoke very positively about Mike Cullen's influence on the project. She thanked him for his knowledge and expertise and general contribution to the planning process. The evaluator noted the strong working relationship between the Hawke’s Bay DHB’s HIA team, their HDC partnering team member and other HDC personnel.

Holding the HIA business appraisal workshop immediately after the HDC’s consultation meeting with the business community was valuable as the earlier meeting set the scene for the HIA workshop and meant that some of the key players remained to participate in the appraisal workshop. More than five business people may have attended the appraisal workshop had it been held at a later date. The commitment to two meeting/workshops on the same day was acknowledged as likely to impact significantly on the business peoples' time.

**HIA appraisal meeting with Flaxmere college students**

This second HIA appraisal workshop for the Flaxmere Town Centre Urban Design Framework was held at Flaxmere College at 2:15pm on 5 March 2009. This one-hour workshop was attended by 12 year 11 and 12 students. All but one of the students was of Māori and/or Pacific ethnicity. The workshop was facilitated by HIA consultant, Robert Quigley and the two members of the Hawke’s Bay DHB HIA team. A University of Otago evaluation team member was also present.

The HIA consultant briefly outlined the workshop objectives which were two fold – to gather student opinion on the redevelopment of the Flaxmere town centre and the proposed change to the way oral health services will be delivered to adolescents in the Flaxmere community. The results of the later consultation are not contained in this report.

**The workshop process**

The 12 students present were split into two groups. Two HIA facilitators ran one group, while one ran the other. Student observations and comments were recorded on large sheets of white paper.

Evaluation forms were not distributed at this student HIA workshop as this was considered inappropriate given the time constraints and the age group involved.

**Workshop evaluation findings**

The 12 students present were generally attentive throughout the
course of the workshop. The female students appeared to provide more constructive input than their male counterparts, an assessment confirmed by the facilitators’ feedback following the workshop. The facilitators considered the young people’s input especially valuable because their responses and suggestions were seen as ‘open and honest’. The students’ suggestions were also seen by the HIA team as potentially useful for formulating the HIA’s recommendations.

Other HIA appraisal workshops
A further two appraisal workshops were held at the Te Aranga Marae on 9 April 2009. One workshop’s audience was predominantly Māori Flaxmere community stakeholders. The other was held at the same venue on 11 May 2009 for representatives from the Flaxmere’s Pacific community. Neither of the evaluators was able to attend the two workshops. Records of the meetings were not kept by the HIA team other than those they used to inform their subsequent HIA work on the causal pathways and the content of the final HIA report. The details of these workshops are not included in the HIA report.

The literature review
The literature review was undertaken by Quigley and Watts Limited as a component of the HIA’s appraisal phase in mid 2008 (Thornley & Marsh 2009). This literature review focused on the linkages between health/wellbeing and four determinants of health selected in the scoping workshop for the HIA. The determinants were transport, economic development, safety and neighbourhood housing. The review also had a focus on the three population groups identified in the scoping phase - Pacific families, Māori youth and older people - in relation to urban development in Flaxmere. The following four research questions were examined for each determinant of health:

1) What are the impacts of the determinant on health and wellbeing in general?
2) What is the relevant local evidence on the determinant for Flaxmere or Hastings?
3) What is the evidence on the determinant in relation to Pacific families, Māori youth and older people?
4) What potential strategies could be used to reduce adverse effects on health and wellbeing?

The review’s methodology involved a mix of methods:

- A search of two website databases – The Social Sciences Citation Index (Web of Knowledge, Index New Zealand and Google
- A search of Google for relevant New Zealand reports and documents on Pacific and Māori youth
- Hawke’s Bay specific data provided by the Hawke’s Bay DHB and the HDC.

The above approach resulted in 96 references, 15 of which were recent and specific to Hastings/ Flaxmere. Due to the HIA’s extended timeframe the original literature review required some updating to reflect the situation in mid to late 2009 when the HIA was completed.
**Key strengths of the review**

The key strengths of the literature review were that:

- It’s methodology is clearly described
- It states the limitations of the review’s evidence
- The review’s executive summary is concise
- It is well written
- It identifies a range of strategies to minimise potential adverse impacts and maximise potential positive impacts under each of the HIA’s four identified determinants of health and wellbeing.

**Stakeholder evaluation feedback on literature review**

Stakeholders who participated in the evaluation spoke favourably of the HIA’s literature review.

- ‘It supports the community’s voice’
- ‘There’s good evidence in there … including the tucked in urban profile’
- ‘It’s got good local evidence on Flaxmere. I’ve already used this in other areas of my work role’
- ‘It’s looked at urban design in its widest sense i.e. transport, cycle use, roading’.

Three evaluation participants believed the literature review had added strength to the HIA. One HDC staff member suggested the literature review would continue to be helpful throughout the entire urban design project, both as a reference point and as a background document.

Two participants considered literature reviews ‘a vital component of any HIA’, as they serve to inform both the causal pathway work and the HIA’s recommendations.

**The HIA report and its recommendations**

The Hawke’s Bay DHB HIA team conducted the analysis of the HIA data gathered at the appraisal stage. The HDC’s staff member who partnered the DHB’s indicated he was involved enough in the HIA process ‘to have some ownership’ of what was in the report, including its recommendations. As such,

*There is a close alignment between the recommendations of the HIA and the principles of the Flaxmere Design Plans (McKay 2009).*

The report includes a concise and useful executive summary, an informative contextual outline of the Flaxmere community, including that of its town centre and its development. It also summarises the HDC’s Flaxmere Urban Design Framework, the literature review, and the HIA’s focus. The description of the HIA process is, however, overly brief. For instance, it provides no detail regarding how many appraisal workshops were held, how many attended the workshops and what the workshops main outputs were.

Each of the HIA’s nine recommendations is usefully followed by supporting evidence from the HIA’s literature review.
In summary, the HIA report recommended that the HDC:

1. proceed with implementing the Flaxmere Urban Design Framework
2. ensures ‘sense of place’ and connectedness issues are addressed in the redesign of the Flaxmere Town Centre
3. incorporates the concept of the Te Aranaga Māori Cultural Landscape Design Strategy and other local initiatives in the Flaxmere Urban Design Framework
4. ensure quality building design of new buildings, especially housing, ensuring control standards are used to prevent sleep disturbance resulting from mixed use housing
5. incorporates the principles of *Crime Prevention Through Environmental Design*
6. continues to explore the economic and employment opportunities for Flaxmere to facilitate positive pathways which were identified during the HIA
7. be aware of the potential for fast food restaurants and additional alcohol outlets to become established as result of the Flaxmere Urban Design Framework
8. investigates increased public transport and active movement options for the community of Flaxmere
9. the Hawke’s Bay DHB and HDC along with other stakeholders undertake a benchmarking exercise of the current health and wellbeing indicators in Flaxmere and then monitor these at regular intervals after the implementation of stage 1 of the Framework (Rohdler & Apatu, 2009: pp 12-14).
Section 5: Results of the stakeholder interviews

This section of the report presents findings from an analysis of data resulting from the interviews with the seven stakeholders who took part in the final interview phase of the evaluation. It should be noted that the interview schedule used for the interviews with the four HIA team members was more complex than that used for the community stakeholders because of their in-depth knowledge around the development of the urban design framework and the HIA process (see appendices 1 & 2 for copies of the interview schedules). As a consequence the two groups’ responses are generally reported separately.

Were the HIA objectives met?

The HIA stakeholders were asked a series of open-ended questions to determine if the HIA objectives were met.

HIA objective 1
To enhance the working partnership between the Hastings District Council and the Hawke’s Bay DHB through shared planning and resourcing

Three of the four HIA team members considered the HIA had been very helpful, while the fourth perceived it had been helpful in enhancing the working partnership between the two organisations, through the sharing of knowledge, expertise, and resources, which reportedly was there ‘right throughout the entire HIA process’. The positive commitment of the HDC environmental policy team leader to the HIA over what was quite an extended time was commended by his DHB colleagues. HDC had also willingly facilitated the HIA to piggy-back on to its own consultation meetings with regards to the urban design framework project. One HIA member team member saw both agencies as having gained a greater understanding of each others’ business’. The HDC also considered the HIA’s literature review a ‘bonus’, as reviews of this kind are generally not a part of their policy development process.

The continued and committed involvement of the HDC planner in the HIA was seen as having ‘kept the HIA on the Council’s radar’ throughout the extended period over which the HIA was conducted.

Both the Hawke’s Bay DHB and the HDC’s chief executive officers (CEO) had reportedly shown considerable interest in ensuring the HIA’s recommendations are actioned. The HDC and Hawke’s Bay DHB have both expressed interest in re-engaging at the implementation phase of the urban design framework.

The two HDC councillors who attended the HIA’s scoping and appraisal workshops were said to have worked closely with the HIA team throughout the HIA process.

HIA objective 2
Contribute to an increased stakeholder and public awareness about public health, equity issues and the link between health and urban design

All four stakeholders directly involved in the HIA process considered the HIA helpful in raising awareness of the linkages between public health and equity issues, and between urban design and health and wellbeing. The HDC’s HIA team partner saw some difficulties in raising awareness among the
‘uninitiated’, though he himself had found ‘the learning very helpful’.

One of the two Hawke’s Bay DHB’s HIA team members saw the HDC’s knowledge and understanding about the determinants and impact of its work on community health and wellbeing as having strengthened as a consequence of its involvement in the HIA.

The HIA allegedly provided several opportunities to get the HIA’s public health messages across at HDC level, thereby achieving ‘a cumulative effect’ on its audience. The HIA’s literature review which covered equity issues was used to support a presentation to an HDC meeting that included ‘very senior people’. The presenter at this same meeting expressed ‘a hope’, in his emailed evaluation response, that the HIA process had helped increase awareness of the linkages:

\[
\text{It is universally important for planning and design to recognise a nexus with public health. Planning was after all founded as a public health discipline. Indeed I would argue that public health is more important than economic or social issues. With improved public health performance as the target for planning AND urban design, improved economic and social performance is inevitable.}
\]

**HIA objective 3**

*To build capacity within the Hawke’s Bay DHB and the HDC to use HIA in the region*

The HIA appeared helpful in broadening both agencies’ capacity to continue using HIA and partnering each other in future HIAs. Despite this HIA having been one of the first of a cluster of HIAs the Hawke’s Bay HIA team had undertaken over a three year-period, and one of the last to be completed, it was perceived as having run ‘very smoothly towards the end’ as a result of the HIA team’s learnings from working on the other HIAs.

The facilitation and mentoring skills of HIA consultant, Robert Quigley, of Quigley and Watts were described as ‘excellent’ and were credited with having been particularly valuable in helping to build capacity within both agencies for HIA purposes.

**HIA objective 4**

*To deliver the findings in a user-friendly manner to both the DHB and the Council*

The responses to the question concerning objective four (Q8) and another regarding the HIA’s literature review (Q7) suggest the HIA was delivered in a relatively user-friendly HIA report. However one HIA team member was ‘unsure’, while the HDC urban planning consultant had yet to see the final HIA report. However, based on the draft he noted that:

‘… it the [report] is interesting, but it only goes part of the way to determining whether or not these changes [in the urban design framework] will be meaningful. It merely suggests they might be’.

He saw a need to monitor the longer-term impact of the proposed urban design changes ‘to fully evaluate the evolution of this community’. He considered a time series cohort study would be a particularly robust and feasible way to monitor given the ‘contained nature’ of the Flaxmere community.
Of the remaining two evaluation participants external to the actual delivery of the HIA process, one considered the HIA report’s executive summary ‘user-friendly’. The second, an HDC staff member, rated the report ‘very good … It confirms the town centre design plan framework is a good idea’. This same participant also considered the HIA report’s recommendations ‘realistic’ … ‘they have merit and will strengthen the design framework’. Another participant considered the report well set out. ‘Having the summary and recommendations right up front was commended.’ ‘…The detail is there if the reader needs it’.

One participant considered the HIA report ‘overly wordy’ and, as a consequence, ‘a bit bulky’. However, the report’s summary was rated ‘good’.

**HIA objective 5**

*To disseminate the HIA findings into the wider policy arena of all relevant agencies*

Copies of the final HIA report with its summary and 10 recommendations were distributed to the senior management team members of both the Hawke’s Bay DHB and the HDC. The report was also tabled at the HDC’s Development and Environment Committee meeting and the 20 November 2009 HDC council meeting, in which the 10 recommendations were subsequently endorsed. A copy of the report was also sent to the HIA’s funding body – the Ministry of Health’s HIA Unit.

Copies of the HIA report’s executive summary were distributed to each of the other community stakeholders who participated in one or more of the HIA workshops. The latter were informed a full copy of the report could be accessed from the Hawke’s Bay DHB should they want one.

The HIA report was also the subject of a 21 November 2009 Hawke’s Bay Today newspaper article entitled *DHB backs changes for Flaxmere* (Hawke’s Bay Today 2009).

‘**Hooks**’ that helped achieve senior management and political buy-in

The Hawke’s Bay DHB’s HIA team members considered themselves fortunate, in the first place, to work with the HDC’s senior planner Dawn McKay. She was described as ‘pivotal’ in getting the initial buy-in at the HDC’s senior management level, while, the interest and commitment shown by two HDC councillors throughout the HIA helped achieve buy-in at the political level. Phil McKay, the HDC’s Team Leader of Environmental Planning and the HIA team’s working partner was considered ‘good to work with’ and helped keep the HIA on ‘the HDC’s radar’ as did the HDC’s urban planning consultant’s involvement.

The Hawke’s Bay DHB’s HIA team had reportedly already worked with two ‘key’ HDC councillors, both of whom were Flaxmere residents and had established good collegial relationships with them. One of the HIA team members also suggested that the Council liked the idea of ‘lots of local consultation’ and the urban design framework project ‘had good positive prospects’ in that it had the trappings of ‘a good news story.’

The HDC’s HIA team partner identified three factors he saw as having helped get the HDC’s senior management buy-in. Firstly, the Hawke’s Bay DHB’s presentation on HIA to the HDC was ‘convincing’ in terms of demonstrating the
value of HIA as a policy development and planning tool. Secondly the presence of senior manager planner, Dawn McKay, herself an advocate of HIA, proved valuable in getting buy-in from the Council. Thirdly the DHB offered to cover the costs of the HIA.

The impact of the HIA on the urban design framework
Six of the seven people who participated in the evaluation indicated the HIA had added value to the Flaxmere urban design framework planning process. One person was unsure because of his limited involvement in the process. Value was perceived to have emanated from the HIA because:

- Its recommendations were endorsed by the Council
- It ‘supported’/ ’strengthened’ the Flaxmere Urban Design Framework
- It provided a robust assessment of the proposed framework
- ‘It provides a good sense of direction’ for the continued planning of the project
- ‘It helped raise the community’s awareness of the proposed urban design’
- ‘It’s a good news story for Flaxmere.’ The proposed changes in the plan are ‘needed and wanted’
- It was a good extension to the HDC’s consultation process
- It gathered input from groups less likely to get engaged in HDC consultations, for example students and Pacific people.

Two participants with knowledge and experience in urban design and planning held that both in theory and practice urban design planning should always consider the likely impacts of an urban design plan on a community’s health and wellbeing. However one of these same participants added that HIA:

…is a follow-up discipline that is missed in all urban design processes. It should be integral to all that we do. At the end of the day we are designing to make people healthy and happy (something we tend to forget).

Likely ongoing impacts on the HDC’s urban design framework plan
The Council’s endorsement of the HIA’s recommendations was considered the most 'significant' impact flowing from the HIA. The fact that the Council would continue to use the HIA as both a reference and check point meant the HDC will continue using it to inform their ongoing work on the Flaxmere urban design project.

The urban planning consultant, who assisted the HDC to develop the urban design framework, was reportedly developing baseline community health and wellbeing indicator measures for the HDC to use for ongoing monitoring purposes. The HIA’s literature review will help to inform that work. The indicators will be used to determine the longer-term impact of the proposed urban design changes.

Other likely impacts identified included the likely development of a supermarket in the town centre and the proposed co-location of an oral health
clinic alongside the present medical centre in the remodelled town centre.

The HIA’s overall strengths
All seven evaluation participants were asked what they thought were the main strengths of this HIA’s process. Their responses are presented below.

The constructive partnership between the HIA’s partners
Following an introductory presentation on HIA to HDC staff, given by current HIA team member Ana Apatu, the HDC’s then senior planner, Dawn McKay, approached Ana and expressed interest in working with the DHB on a HIAs. Having herself worked previously on an HIA (the Avondale urban redevelopment project), Dawn was reportedly both ‘supportive’ and expressed ‘a willingness to engage with the DHB on an HIA’ in the future. Dawn’s interest and leadership was considered ‘important’ as it led to the HDC and DHB subsequently engaging on the Flaxmere urban design framework HIA. The HIA team members and their Council partner all indicated the constructive working partnership between the two organisations was one of its key strengths. The interest and involvement of two HDC councillors (both Flaxmere residents) throughout the course of the HIA provided leadership and support at the political level.

The HDC’s willingness to have the HIA ‘piggy-back’ on to its own consultation processes for the Flaxmere Urban Design Framework and enabling the HIA team to work in with its urban planning consultant were both considered important strengths. Having the HDC’s planner review the HIA report and ‘word-smith’ a potentially controversial recommendation concerning fast food outlets was one of several strengths identified as emanating from the close working relationship between the DHB’s HIA team and the HDC environmental planner.

Community participation in the consultation
All seven people who participated in the evaluation identified community participation as a major strength. The linkage between the HIA and the Council’s own consultation programme, around the urban design framework, had reportedly broadened the scope of the consultation for both HIA party’s efforts. This was because it drew members of the business, Māori, and Pacific communities, as well as HDC councillors, senior management executive members from both partner agencies, college students and Flaxmere residents. The consultation was considered more ‘robust’ and ‘systematic’ as a consequence of the two parties having joined forces.

One HIA team member suggested the ‘non-threatening environment’ in which the HIA was presented attracted input from a broader audience than might normally have been expected. This latter view is in a general sense supported by that of the community resident who participated in the evaluation who saw the HIA as ‘having come out of left field’ in that he had not anticipated the health focus. He considered the HIA a ‘very positive step forward’ and was generally ‘feeling more optimistic’ that the town centre redevelopment might actually take place.

Other strengths
The two Hawke’s Bay DHB team members both acknowledged the mentorship and facilitation skills of the HIA consultant as having been a real strength for
them throughout this HIA, as well as the others they had worked on together.

Other identified strengths included the Council’s endorsement of the HIA report’s recommendations, and the future potential to monitor the longer-term impact of the proposed urban design changes. The ‘benchmarking’ social indicators made available through the HIA’s literature review, provides the potential to carry out longer-term monitoring to see if the desired improvements in the Flaxmere community’s health and wellbeing occurs as a result of the urban changes.

Factors that constrained the HIA

Three evaluation participants identified the sale of the village soon after the HIA process started, as one of the HIA’s main constraints. The HIA process was initiated in October 2007, according to one of these participants, and was only completed towards the end of 2009. The HIA virtually had to be restarted, as a consequence of the sale. Everyone directly involved in the HIA ‘had to work very hard’ to keep the relationship between the two agencies going over the time ‘when nothing was happening’. Keeping to the HIA’s original timeframes proved impossible given the sale and the DHB’s HIA team’s need to fit in with the HDC’s process and timeframes.

The HIA’s social profile in the literature review was completed 18 months prior to the HIA’s completion. This needed updating given that unemployment, for example, had since become a more significant issue with the impact of the recession from late 2008.

Two evaluation contributors expressed disappointment in the less than planned for number of participants in the HIA’s scoping workshop. This was seen to have possibly compromised the workshop’s representativeness. One of the latter participants considered the workshop’s outcome could well have been different if all those invited had participated.

One participant considered the HIA process required ‘a detailed understanding of the integrity of the urban design framework’ whereas the HIA assessors were perceived as having largely ‘taken this as a given’. This participant went on to say:

There is also the issue of degree of change (in public health performance etc) which is at least partly an issue of built form quality. In other words urban design can only take us so far. If the quality of the built form is poor then much of the framework is undermined (as it may not be an attractive place to walk in for instance).

The community resident indicated that the HIA’s health focus had not been made that clear when he was offered the opportunity to be involved in the HIA, ‘but I certainly came out with a better understanding of the links’.

Suggested improvements

Two of the seven evaluation participants suggested improvements. One saw a need to look at different approaches to attracting broader community representation into HIA, while the other saw a need to reflect on how to better ensure that ‘key stakeholders’ invited to HIA workshops attend. One other participant noted they were ‘unsure’ what could have been done to improve the HIA, ‘It was possibly the best it could be.’
HIA resource needs
The evaluation participants’ suggestions for resources included those identified in earlier evaluation interviews regarding completed Hawke’s Bay DHB HIAs, namely:

- A practical handbook for newcomers to the HIA process.

New ideas on possible resources that would be useful to develop included:

- A template for the causal pathway work
- A stakeholder consultation framework/checklist.

This HIA generated a number of resources, for instance the key stakeholder and other community key informant interview questionnaires, the consent forms and interview background information. The resources could be useful for future HIAs (see appendices 1&2). This evaluation report also provides an example of an HIA evaluation.

Key learnings from the HIA
The four members of the HIA team noted the following learnings from this HIA that would help to inform their future HIAs programme:

- Establish ‘good working relationships’, and ‘regular contact’, from the outset, with the partnering agencies, as well as other key stakeholder groups/individuals – this HIA team and its Council partner found conversations over a cafe coffee was a good way to keep the relationship going over the prolonged period over which this HIA ran
- Be aware that HIAs are usually driven by the policy process therefore timeframes will need to be flexible
- ‘Get some senior management involvement, but be aware this is not always easy to achieve’
- Inviting participants in the HIA process to a feedback session is a useful way to conclude an HIA
- Be prepared for media interest ‘so there are no surprises’ for the HIA’s partnering agency
- Get the draft HIA report peer reviewed by the HIA partner in the team as this helps ensure that the HIA’s recommendations ‘are pitched right’ for that agency.
Section 6: Conclusions

This report has presented the results of a process and impact evaluation of a HIA on the HDC’s Flaxmere Town Centre Urban Design Framework. The evaluation’s key findings suggest the HIA process was effective. While the evaluation results are somewhat skewed towards the HIA team members’ views on the effectiveness of the HIA process, the feedback from the community stakeholders, the evaluators’ observations of the process, and documentary analysis collectively suggest that, on balance, the HIA worked very well. The HDC adopted all nine of the HIAs’ recommendations and all five of its objectives were met.

Managing and controlling the HIA’s timeframes and deadlines was the major constraint and challenge faced by this HIA team, and one that other HIA practitioners may well encounter should the experience of the Hawke’s Bay team be anything to go on. Each HIA within the cluster of HIAs undertaken by the Hawke’s Bay DHB over the past two years has taken more time to complete than originally planned. This feature appears largely due to the interdependence between an HIA’s milestone timelines and the policy process as well as external factors beyond either agency’s ability to control. The external factor in this case was the sale of the Flaxmere town centre, unknown to the HIA team and their HDC colleague until after the event. The sale led to at least a 12-month lag in the HIA process.

The lengthy delay we suspect impacted on the interviewees’ ability to clearly recall the HIA process, especially the recall of the community stakeholders. It was possibly also a reason for the limited response we got from the business people we had planned to interview. Despite these limitations the Council’s endorsement of all the HIA’s recommendations is a very positive response and bears the hallmark of the close working relationship established between the Hawke’s Bay DHB’s HIA team and their HDC colleague, which was identified as a key strength of this particular HIA.

This report’s authors are inclined to agree with the suggestion of the HDC’s urban planning consultant that this HIA would be well worth revisiting in terms of the degree of implementation of the HIA’s recommendations and the impact of the redevelopment on the Flaxmere community’s health and wellbeing. The contained nature of the Flaxmere community would lend itself to further evaluative study. While it would be difficult to directly pin the shape of the town centre’s development on to the HIA’s, the HDC environmental planning team would have some idea on the degree of influence the HIA recommendations had on the end result.

One concern the evaluation team has is that Flaxmere Town Centre Urban Design Framework could fail should there be no supermarket to anchor it. Can the HDC guarantee that the redeveloped town centre will get one? If not, what else could be constructed that would serve to anchor the development?

The HIA on the HDC’s Flaxmere Town Centre Urban Design Framework is another example of the value gained from the use of HIA in the Hawke’s Bay Region. It is also another example of the Ministry of Health’s Learning by Doing fund being put to good use.
Section 7: References


Appendix 1

HIA evaluation key stakeholder interview schedule

Stakeholders’ name: ........................................................................................................................................
Organisation: ....................................................................................................................................................
Position: ...........................................................................................................................................................

Thank you for agreeing to my interviewing you today. Have you had time to read the information sheet that I emailed you earlier, which explained:

1. the evaluation objectives of the health impact assessment (HIA) process evaluation with regards to its use in helping to develop the urban redesign framework proposal for the Flaxmere town centre, and
2. how we plan to protect your anonymity.

If the response is yes ask – would you like me to go through these again, or, do you have any questions about the evaluation before we start?

The first evaluation questions focus on the actual HIA process
1. Based on your experience, what do you think were the main strengths of the HIA process?
2. Are you able to identify any factors that acted to constrain the HIA process?
3. What, in your opinion might have been improved this HIA’s process?

The following questions focus on the impact of the HIA on the urban design framework for the Flaxmere Town Centre
4. Based on your experience, do you think the HIA achieved its objectives? For instance did it ….

4a Assist to enhance a working partnership between the Hastings District Council (HDC) and the HBDHB in terms of shared planning and resourcing Yes If yes, ask in what way? No If no, ask why not?

4b Contribute to increasing the stakeholders’ awareness of the link between health and urban design Yes If yes, ask in what way? No If no, ask why not?

4c Assist to raise awareness of the linkages between equity and urban design Yes If yes, ask in what way? No If no, ask why not?

4d Assist to build capacity for both the HBDHB and HDC to use HIA in the Hawke’s Bay region Yes If yes, ask in what way? No If no, ask why not?

4f Help to deliver the HIA findings to both the HBDHB and HDC in a user-friendly way? Yes If yes, ask in what way? No If no, ask why
Help to disseminate the HIA findings into the wider policy arena of all the relevant agencies  
**Yes**  *If yes, ask in what way?*  **No**  *If no, ask why not?*

**Impact of HIA**

5  Has the HIA added value to the Flaxmere design framework planning process?  *If so ask - in what ways?*

6  What, if any, are the likely ongoing impacts of the HIA on the work of the HDC, with regard to the Flaxmere Urban Centre design framework planning, and or with other organisations it's been working on with this project?

**Overall issues**

7.  What resources did your organisation provide to support the HIA process?  *Prompts - staff, financial, other*

8.  In what ways has the HIA process helped to get buy-in into the HIA process and outcomes at the …

8a  HBDHB senior management level  *If yes, ask in what way?*  **No**  *If no, ask why not?*

8c  HDC senior management, level  *If yes, ask in what way?*  **No**  *If no, ask why not?*

8d  Council’s political level  *If yes, ask in what way?*  **No**  *If no, ask why not?*

9  Are there any of the current HIA resources that you think could be used or modified for future use by either the HBDHB or the HDC?  **Yes**  *If yes, ask what are these?*  **No**

10 What do you think are the key lessons from this HIA for the HBDHB, HDC and other potential HIA partners?

11 Have you seen either the draft or the final health impact assessment reports with regards to the urban design framework?  **Yes**  *If yes, what did you think of it?*  **No**

12 That’s the end of the set evaluation questions, is there anything that we didn’t cover earlier that you would like to raise before we finish the interview?
HIA Evaluation community key informant interview schedule

Stakeholder's name: ………………………………………………………………………………………………………
Organisation: …………………………………………………………………………………………………………………
Position: ……………………………………………………………………………………………………………………………

Thank you for agreeing to my interviewing you today. Did you have time to read the information sheet that I emailed you earlier which explained:

- the evaluation objectives of the health impact assessment (HIA) process evaluation with regards to its use in helping to develop the Council’s Graffiti Strategy, and
- how we plan to protect your anonymity.

*If the response is yes ask* – would you like me to go through these again, or, do you have any questions about the evaluation before we start?

**The first evaluation questions focus on the actual HIA process**

1. Based on your experience, what do you think were the main strengths of the health impact assessment process?

2. Based on your experience, were there any factors that acted to constrain the health impact assessment process? Yes *If yes, ask in what way* No

3. What might have been done to improve the health impact assessment process?

**The following questions focus on the impact of the HIA on the urban design framework for the Flaxmere Town Centre**

4. Based on your experience, do you think the HIA process contributed to increasing stakeholders’ awareness of the link between the health and urban design? Yes *If yes, ask in what way?* No *If no, ask why not?* Not sure

5. Based on your experience, did the health impact assessment process help to raise awareness of the linkage between health, health inequalities and urban design? Yes *If yes, ask in what way?* No *If no, ask why not?* Not sure

6. Have you seen either the draft or the final health impact assessment reports with regards to the urban design framework for the Flaxmere community? Yes *If yes, what did you think of it?* No

7. Do you think the health impact assessment process added any value to the Flaxmere design framework planning process? Yes *If yes, ask in what way?* No *If no, ask why not?* Not sure
8. Have you seen the draft or the final health impact assessment reports with regards to the urban design framework? Yes *If yes, what did you think of it?* No

9. That’s the end of the set evaluation questions, is there anything that we didn’t cover earlier that you would like to raise before we finish the interview?
Appendix 2

Information sheet for key informants

Please read this information sheet carefully before deciding whether or not you wish to participate. We would very much appreciate your participation. However, if you decide not to participate there will be no disadvantage to you of any kind and we thank you for considering our request.

What is the aim of the evaluation?

- To provide practical knowledge and feedback to the Hawke’s Bay District Health Board’s (HBDHB) health impact assessment (HIA) team at key stages throughout the HIA development process to assist the DHB to reflect on the team’s progress and make changes to its HIA processes where appropriate.

- To provide evaluation feedback to the Ministry of Health’s HIA Unit that has funded the various HBDHB’s HIA assessments through its Learning by Doing fund.

Who are we interested in speaking to?

Key stakeholders namely participants or observers of the HBDHB’s HIA planning and development processes.

What will we ask you to do?

- You will be asked to participate in an open-ended telephone interview lasting for between 15 to 30 minutes.

- Please be aware that you may decide not to take part in the evaluation or refuse to answer any questions without any disadvantage of any kind to yourself.

Can you change your mind and withdraw from the evaluation?

- You may withdraw from participating in the project at any time and without any disadvantage to yourself of any kind.

What data or Information will be collected and what use will be made of it?

- You will be asked questions concerning the HIA planning and development process and its outcomes.

- The material we obtain will be made anonymous, to ensure that you are not identified. Your identity will remain confidential to the evaluation team. Personal names and other potential identifying information will not be used in any reports resulting from the evaluation.

- The results may be published but any data included will in no way be linked to any specific participant.
• A copy of the evaluation report can be sent to you should you wish.

• The data collected will be securely stored. At the end of the evaluation any personal information will be destroyed immediately except, as required by the University of Otago’s research policy. Any raw data on which the results of the evaluation depend will be retained in secure storage for five years, after which it will be destroyed.

• The evaluation involves an open-questioning approach where the precise nature of the questions has not been fully determined in advance.

• In the event that the line of questioning does develop in such a way that you feel hesitant or uncomfortable you are reminded of your right to decline to answer any particular question(s) and also that you may withdraw from the project at any stage without any disadvantage to yourself of any kind.

What if participants have any questions?

If you have any questions about the evaluation, either now or in the future, please feel free to contact either:

Velma McClellan
Research & Evaluation Services Consultant
Ph: 06-769-9444; Mob: 0274-303-577
Email: velma.mcclellan@xtra.co.nz

Dr Louise Signal
Director
HIA Research Unit
University of Otago, Wellington
Telephone (04) 385-5541 ext 6040
Email louise.signal@otago.ac.nz
Participants’ consent form

I have read the Information Sheet concerning this evaluation and understand what it is about. All my questions have been answered to my satisfaction. I understand that I am free to request further information at any stage. I know that:

1. My participation in the evaluation is entirely voluntary;
2. I am free to withdraw from the evaluation at any time without any disadvantage;
3. There will be use of an open questioning technique;
4. I do not have to answer any questions that give me discomfort;
5. I may withdraw from participation in the evaluation at any time and without any disadvantage to myself of any kind;
6. I may have access to the conclusions and any publications if I request them;
7. The results of the evaluation may be published and available in the library or on the internet but every attempt will be made to preserve my anonymity.

I agree to take part in this project.

..............................................................................................................................

(Signature of participant)

Date:..................

..............................................................................................................................

(Name of participant)

I would like a copy of the findings of the evaluation to be sent to me after it is completed (please tick the box that applies to you).

□ YES  □ NO

In order to send you a copy of the research could you please record your details below.

Name:...........................................................................................................................

Address:....................................................................................................................