IDENTIFYING AND PRIORITIZING SEEDs* OF HEALTH AND DIMENSIONS OF INEQUITY USING THE SEEDs EQUITY IDENTIFIER

*SOCIAL, ECONOMIC AND ENVIRONMENTAL DETERMINANTS (OF HEALTH)
Identifying and Prioritizing SEEDs of Health and Dimensions of Inequity
using the SEEDs Equity Identifier
Practical Guide

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Note: This practical guide is designed to assist UNDP project managers and developers to identify and prioritize SEEDs of health and dimensions of inequity in development projects. It constitutes Part A of UNDP’s methodology to integrate multisectoral action on the SEEDs of health and health equity. Part B of the practical guide – on optimizing, monitoring and evaluating health and development co-benefits and health equity improvements is currently being developed and will be available soon. Please note that the SEEDs of health and health equity methodology and toolkits and this accompanying guidance note are products of a development and pilot phase. The tools and guidance notes will be further tested and developed in consultation with development partners and adjustments will be made where necessary.
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SEEDs of Health and Health Equity

SEEDs of Health and Health Equity
1. INTRODUCTION AND RATIONALE

Social, economic, and environmental development both determine and are reflections of population health and the distribution of health outcomes. While this is widely acknowledged, the effects of social, economic and environmental determinants (SEEDs) of health and health equity are rarely fully addressed in development policy and practice. This means that opportunities to maximize co-benefits for health and development are often missed, hindering progress towards Agenda 2030’s *Leave No One Behind* core tenet.¹

Enlarging people’s choices by expanding their capabilities and opportunities in ways that are socially, economically and environmentally sustainable implies improving the present health and wellbeing today without compromising development prospects in the future. This requires acting across the whole of government and the whole of society to support countries to adopt sustainable development pathways, build and strengthen inclusive and effective democratic governance, and build resilience.

While health and development are inextricably linked, health and development practitioners often operate in organizational silos. In order to realize potential and strengthen existing co-benefits for both health and development and to prioritize areas for action, it is necessary to take specific steps to integrate health and development. The *SEEDs Equity Identifier* – UNDP’s Social, Economic and Environmental Determinants of Health and Health Equity Screening Tool for Development Practitioners – has been designed to support the UN and national partners to respond to the increasing complexity and interconnectedness of health and development by joining the dots across the Sustainable Development Goals (SDGs) with a systematic approach that puts people at the core of sustainable development. Its primary purpose is to help project developers and managers identify SEEDs of health and health equity in multisectoral development projects during planning, implementation and evaluation².

This guidance note is designed to assist the screening process. It is primarily targeted at UNDP staff and national counterparts, who are planning, implementing and evaluating country projects. However, the guidance note and methodology are designed to be applicable to multisectoral development programming beyond UNDP. The target audience for this guidance note therefore also includes other UN agencies, including UN Habitat, UNEP, UNESCO, UNFPA, UNHCR, UNICEF, WHO, WFP and UN Women.


² The *SEEDs Equity Identifier* can also be used to analyze SEEDs of H/HE in development programmes, but the primary target audience for the tool and this guidance note are project developers and project managers.
2. WHAT ARE SEEDS OF HEALTH AND HEALTH INEQUITIES?

Social, economic and environmental factors are embedded in development as the three interlinking pillars of sustainable human development. They also, to a large extent, determine population health and the distribution of health. Health inequities are avoidable and unjust systematic differences in health between groups with different levels of social advantage and disadvantage.

UNDP’s SEEDs of health and health equity methodology systematically applies a checklist comprising 27 social, 24 environmental and 14 economic determinants of health, as well as a checklist comprising 14 dimensions of inequity and sub-categories in its methodology and toolkit to integrate SEEDs of H/HE into development programming.
3. WHEN SHOULD PROJECTS BE SCREENED?

It is recommended that the screening process is carried out during the project conceptualization and design stage as part of a participatory planning process. However, the SEEDs Equity Identifier can be used at any stage during the project cycle – from planning, implementation, through to monitoring and evaluation.

The screening process should be repeated during the mid-term evaluation phase of a project to see whether the focus of the project has changed or whether there needs to be a change in approach. This will ensure that during the implementation and monitoring, the focus on potential health and development co-benefits is maintained or strengthened, as necessary.
4. WHO SHOULD SCREEN PROJECTS?

The screening tool is designed for development practitioners’ use while planning, implementing, monitoring and evaluating development projects. For projects at the planning stage, the project developer drafting the project document should assume primary responsibility for screening the project. During later stages of the project cycle, the project manager should take the lead in applying the SEEDs Equity Identifier.
5. HOW TO NAVIGATE THE SEEDS EQUITY IDENTIFIER?

The Microsoft Excel-based SEEDs Equity Identifier enables project developers and managers to screen projects for SEEDs of health and dimensions of inequity.

The SEEDs Equity Identifier comprises seven worksheets and incorporates nine steps, described below, to identify SEEDs of health and dimensions of inequity, which are impacted by projects. Project developers and managers can subsequently prioritize SEEDs and inequities and decide which should receive a particular focus with the aim of optimizing health and development co-benefits throughout implementation.

The SEEDs Equity Identifier comprises the following worksheets:

- **01-Background** sheet of the tool explains the rationale for screening projects for SEEDs of health and dimensions of inequity.

- **02-Contributors and Contacts** sheet gives the names and contact details of those involved in the development of the SEEDs Equity Identifier.

- **03-Guidance Note** sheet gives instructions on how to conduct each step of the screening process.

- **04-Project Details** sheet asks users to select the region, country, area of work as well as applicable Strategic Plan outcomes using drop down options provided. Users are also asked to provide the name of the project manager, name and ID of the project, and indicate the project budget as available.

- **05-SEEDs** sheet contains a checklist of SEEDs of health, categorized into social, economic and environmental determinants in three columns. Four consecutive steps are required to identify, prioritize and strategize on strengthening health and development co-benefits during project implementation.

- **06-Inequities** sheet contains a checklist of dimensions of inequity and sub-categories. Five consecutive steps are required to identify, prioritize and strategize on reducing inequities during project implementation.

- **07-Coding** sheet includes coding used to create the drop-down menus on sheets 04-Project Details, 05-SEEDs and 06-Inequities.
6. HOW TO SCREEN PROJECTS FOR SEEDs

Four consecutive screening steps are required to identify and prioritize SEEDs of health and strategize on optimizing health and development co-benefits during project implementation:

Step 1: Identifying SEEDs of health

Step 1 in the SEEDs screening is to reflect on whether the project in question has a direct, indirect or no impact on each of the SEEDs of health. (This may include both positive and negative effects, the likely intensity of which is identified during Step 2). The SEEDs of health are categorized into social, economic and environmental determinants in three columns. Please complete all three columns, as applicable to your project. Please indicate the nature of the project impact (direct, indirect or no impact, including both positive and negative impacts) on SEEDs of health using the drop-down menu that appears under Column 1 when you click on the chosen SEED in the SEEDs checklist. The project impacts on SEEDs of health are classified as follows:

- Direct impact, coded as 3: When the SEED is impacted by project aims and objectives. For example, a sustainable urban development project aims to cut urban greenhouse gas emissions by improving the transportation and mobility infrastructure. This means that the SEEDs greenhouse gas emissions and transportation and mobility infrastructure are likely to be directly impacted by the project goals and objectives. Thus it should be categorized as having a direct impact.

- Indirect impact, coded as 2: When the SEED is impacted as a result of project implementation, while there is no explicitly intended effect on the SEED described as part of the project aims and objectives. For example, a sustainable urban development project may lead more people to use active means of transport by gradually improving the transport infrastructure and traffic situation, thereby indirectly impacting physical activity. While the project does not explicitly aim to improve ‘physical activity’, it should be categorized as having an indirect impact due to some of its interventions.

- No impact, coded as 1: When the SEED is not impacted as a result of the project’s aims, objectives and activities.

Step 2: Selecting the level of intensity of project impacts on SEEDs of health

Step 2 in the SEEDs screening is to indicate the level of intensity of the project impact on those SEEDs identified by coding 3 and 2 in the first step. Please indicate the level of intensity of the project impact on SEEDs of health using the drop-down menus in the Step 2 Columns on the 05-SEEDs sheet. The level of intensity of project impacts on SEEDs of health are classified as follows:

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3 Please note that some SEEDs in the checklist are expressed in positive terms (such as affordable housing), while others are expressed in negative terms (such as harmful use of alcohol), and some are expressed in neutral terms (trade). These terminological differences should not affect how the level of intensity of project impacts on SEEDs should be categorized and scored. For instance, a project with a strong effect on reducing ‘harmful use of alcohol’ is inherently positive for health and the project impact should be scored as 3. Similarly a project which is likely to promote ‘affordable housing’ is also likely to be positive for health and thus the project impact should also be coded as 3. For neutrally expressed SEEDs, project managers need to consider whether the project impacts on ‘trade’ are likely to be positive or negative, and then identify the likely level of intensity of impact.
- **High positive impact, coded as 3:** When the project has the potential for a strong positive effect on the SEED for large population groups, geographic areas and/or a lasting benefit for future generations. This may be based on whether the SEED addresses structural causes of policy and development issues or whether there are major capacity building elements that can sustain processes/work initiated by the project beyond its lifetime. This is for example the case where a sustainable urban development project enacts legal and regulatory changes to the spatial and urban planning processes that are assumed to have a positive effect on health and which take effect at the national, rather than just local and regional levels. Legislative and regulatory changes address the structural causes of urban planning processes and tend to have long-term effects. The project’s impact on the SEED urban planning would therefore be categorized as *high positive* and the project should prioritize the SEED during implementation to achieve the highest possible impact for health and development co-benefits.

- **Moderate positive impact, coded as 2:** When the project has an effect on the SEED, but is likely to be limited to specific population groups, geographical areas and/or short term. For example, improving transportation and mobility infrastructure and thereby reducing traffic in urban centres, as part of a sustainable urban development project, may reduce noise pollution. Health benefits however, will most likely only be felt by residents of urban centres living in close proximity to busy roads. The project’s impact on noise pollution should therefore be categorized as *moderate positive*. Project managers should consider the SEED for prioritization during implementation based on what impact the project could realistically have on optimizing health and development co-benefits.

- **Low positive impact, coded as 1:** When the project may have a positive impact on the SEED, but it is likely to be negligible in terms of magnitude (e.g. very small population groups, geographical areas and very short term) and therefore not relevant for optimizing health and development co-benefits from a programming perspective. For example, replacing inefficient street lighting with LED technologies in pilot cities as part of a sustainable urban development project may have some positive impact on the level of crime at night in urban areas. But the benefits are likely to be limited in areas with low levels of crime. Taking into account the project goals and resources, prioritizing the impact on levels of crime would be inappropriate, as the LED technologies would realistically have a very limited impact for optimizing health and development co-benefits. The project’s impact on level of crime would therefore be categorized as *low positive*.

- **Low negative impact, coded as -1:** When the project may have a negative impact on the SEED, but is likely to be negligible in terms of magnitude (e.g. very small population groups, geographic areas and very short term). For example, a water and sanitation infrastructure project may create noise pollution during the construction of sewage or irrigation systems. The negative project impact on noise pollution is however likely to be low, if it is limited to few communities living around construction sites and has an effect only during the relatively short construction phase. *Low negative* impacts do not necessarily require any mitigation, but the possibility of mitigation measures should be assessed, and the noise pollution related risks should be re-assessed during mid-term evaluations.

- **Moderate negative impact, coded as -2:** When the project has potential for a negative effect on the SEED, but it is likely to be limited to specific population groups/geographical areas and/or short term. For example, a project promoting alternative sources of energy by constructing wind farms may disturb birds’ habitats or migration routes. The impact on biodiversity should be categorized as *moderate negative*, as it may be limited to specific geographical areas. However it will likely be long-term and therefore requires mitigation measures.

- **High negative impact, coded as -3:** When the project potentially has significant adverse impacts on the SEED for large populations, geographic areas and/or lasting or irreversible negative implications for future generations. For example, project activities to reform ‘urban planning’, may have lasting adverse impacts on affordable housing, if project activities result in displacing residents, and the impacts will be felt both by those displaced and urban communities at large. The impact of such a project on affordable housing will likely be *high negative* and therefore its negative impacts require close monitoring and implementation of mitigation or avoidance strategies.
Step 3: Prioritizing SEEDs of health

Step 3 in the SEEDs of health screening is to give a priority ranking for the five most project-relevant SEEDs identified. While the scores given in steps 1 and 2 may be used for orientation, the primary criteria should be the feasibility of achieving the highest possible impact of co-benefits for health and development during project implementation taking into account the project resources and national context. Users should rank the five most project relevant SEEDs from 1 (most important) to 5 (least important).

Step 4: Summarizing the proposed SEEDs focus during implementation

In step 4 a final decision has to be made about which SEED(s) out of the 5 SEEDs prioritized in step 3 should become the active focus during project implementation and monitoring, with the aim of optimizing health and development co-benefits as project outcomes. The brief narrative should include the explanation of the selection(s) made. Decisions should primarily take into account what is realistically achievable during the project period and beyond – if the project is expected to trigger lasting interventions and impact. Furthermore, the availability of indicators and data should be considered in making the final selection, in order to monitor the modifying effects both on the SEED(s) and potentially health outcomes.
Seven consecutively screening steps are required to identify the potential impact of projects on inequities, to prioritize those dimensions of inequity likely to be most affected, and develop strategies for reducing inequities during project implementation:

**Step 5: Identifying dimensions of inequity**

Step 5 in the screening is to reflect on whether the project in question has a direct, indirect or no impact on each of the dimensions of inequity. This may include both positive and negative impacts. The nature of the project impact (direct, indirect or no impact) on inequities should be indicated by clicking on the chosen dimension in the inequities checklist and using the drop-down menus in column 1.

While interventions that address disadvantaged groups directly can impact inequities, the impacts are generally lower than those of interventions that address the needs of the whole of society and those of disadvantaged groups proportionately through the national standards, which may on the other hand be more effective and less stigmatizing. Sometimes, development projects combine both strategies, i.e. some interventions are directed at national standards or capacity and other interventions within the project address disadvantaged groups directly.4

Project impacts on inequities are classified as follows:

- **Direct impact, coded as 3:** When an inequity dimension is positively impacted by the project's aims and objectives, so that project interventions directly address either large-scale inequalities across the population as a whole or sub-populations that are particularly disadvantaged, aiming to improve equity in participation rates or standards of living. For example, a project fostering sustainable management of peatlands aims to generate multiple social, economic and environmental benefits and livelihoods for rural communities living around these. Its activities explicitly address the needs of these populations, and if the populations living in these places are disadvantaged, then the impact on reducing the inequity they experience is direct.

- **Indirect impact, coded as 2:** When an inequity dimension is impacted as a result of project implementation, but the project aims and objectives do not include an explicit intended effect on the inequity dimension. For example, a sustainable urban transport project may not directly aim to improve accessibility of urban transport for people living with disabilities, but being implemented in line with high quality national accessibility standards, it will likely meet the needs of people living with disabilities. As such, the project may, by removing barriers to travel for disabled or elderly, improve access, even if this is not a direct objective.

- **Not at all, coded as 1:** When a project has no impact on a dimension of inequity.

4 Please note that the categorizations for direct and indirect project impacts on inequities, as well as the level of intensity of project impacts on inequities, are aligned with UNDP's mandates and programming standards. This means that activities favouring disadvantaged groups are categorized as having direct and high impacts.
Step 6: Selecting the level of intensity of project impacts on dimensions of inequity

Step 6 in the inequities screening is to indicate the level of intensity of the project impact on those inequities identified by coding 3 and 2 in step 5. Two aspects are relevant in modifying inequities: a) the extent to which inequity is likely to be reduced for the individuals impacted by the project and b) the number of individuals, whom are likely to benefit from reduced inequity. Differential impacts across the population, for example, higher impacts among the most disadvantaged and lower impacts among those with lesser disadvantage, can combine to reduce overall population inequities. Therefore, in indicating the overall level of intensity of project impacts on inequities, both the degree of disadvantage among those impacted by the project, and the likely impact at each level of disadvantage should be considered. The drop-down menus in the Step 6 column in the 06-Inequities sheet should be used to categorize the level of intensity of project impacts on dimensions of inequity as follows:

- **High positive impact, coded as 3:** When a project aims to have a strong positive impact on inequities in large population groups and geographic areas with lasting benefits for future generations, by tackling structural causes of exclusion and inequity, proportional to need as part of its aims and objectives. For example, a health project improves access to healthcare, healthcare quality and healthcare infrastructure, but simultaneously tackles specific health conditions and the burden of disease in various critical life stages, such as injury prevention during early childhood (i.e. pre-school and school), promoting adolescent sexual health or providing maternal health promotion through preventive interventions (i.e. transition between education and employment; family-building). Such interventions include health improvements among at-risk populations at different life stages, so that individuals and communities will benefit from project interventions across all life course stages. The project’s impact on life course stage would therefore be categorized as high positive and consideration should be given to making it a focus area during implementation in order to have a high level of impact in promoting equity.

- **Moderate positive impact, coded as 2:** When a project has an impact on an inequity dimension, but it is likely limited to specific population groups, geographic areas and/or short term. For example, a project introducing needle and syringe exchanges and opioid substitution therapy as part of harm reduction measures will have most impact on preventing HIV transmission among people who inject drugs, as well as their newborn babies and those who have condomless sex with them. However, without structural policies and legislation in place to reduce discrimination and violence against people who inject drugs, the beneficial impact on people who inject drugs would be moderate. Therefore, the project impact on marginalized groups should be categorized as moderate positive.

- **Low positive impact, coded as 1:** When a project is likely to have a particularly beneficial impact on a sub-category of an inequity dimension, without necessarily targeting that sub-category. For example, an urban transport and mobility infrastructure project that is implemented in line with high quality national urban planning norms and guidelines will benefit the general population, but may provide even greater benefits in terms of the mobility needs of people with reduced mobility, such as elderly people or people living with disabilities that limit their physical activity. However, the project does not explicitly direct more resources to the needs of people with reduced mobility and the main resources and benefits are to the population at large from infrastructure improvements. The project impact on the disability dimension of inequity will therefore be categorized as low positive.

- **Low negative impact, coded as -1:** When the project may potentially have a negative effect on the dimension of inequity, but it is likely to be negligible in terms of magnitude (e.g. small affected area, very low number of people affected) and duration (short-term). For example, in flood-prone areas, if emergency management and flood relief support is offered to everyone, but the overall spending in each area is based on a return on
investment calculation that uses property values to calculate expenditure, then areas with a larger proportion of higher value properties would get better quality emergency management measures than poorer areas. The project’s impact on the wealth dimension of inequity should therefore be categorized as low negative. While this risk doesn’t necessarily require any immediate management or mitigation measures, the project should reassess its impact on wealth-based inequities during the mid-term evaluation to ensure appropriate mitigation action is taken, if the project is proving to be regressive.

- **Moderate negative impact, coded as -2**: When the project potentially has a negative effect on the dimension of inequity, but it is likely to be limited in magnitude and duration. For example, a project promoting skilled job creation is likely to benefit those with higher educational attainment more strongly than those with lower levels of educational attainment. As a result, the project activities may increase inequities based on educational attainment. The project’s impact on inequities based on educational attainment should therefore be categorized as moderate negative. The project should include mitigating actions, such as simultaneous creation of employment opportunities and skill development for groups with lower educational attainment.

- **High negative impact, coded as -3**: When the project potentially has a significant adverse impact on the dimension of inequity, by excluding population groups or geographic areas and/or future generations for example by impacting structural issues that drive exclusion and inequity. For example, project activities to reform ‘urban planning’, may have lasting adverse impacts on inequities based on wealth or, if project activities result in driving out less well-off residents of their neighbourhoods due to gentrification. The impacts will be felt both by those driven out of their neighbourhoods, and communities at large, since gentrification affects the social structure and cohesion. The impact of such a project on wealth-based inequities will likely be high negative and therefore its negative impacts require close monitoring and implementation of mitigation or avoidance strategies.

**Step 7: Prioritizing Inequities**

Step 7 in the inequities screening is to give a priority ranking for the three most project relevant inequities identified. Criteria for the ranking will be derived from the coding of step 5 and 6. In addition, the feasibility aspects of achieving the highest impact on equity during the project implementation are to be considered by the project developer or project manager. Users should rank the three most project relevant inequities from 1 (most important) to 3 (least important) based on potential need of sub-groups.

**Step 8: Indicating sub-categories**

Step 8 in the inequities screening consists of indicating which sub-categories of identified inequities the project is likely to benefit most. This is particularly applicable where projects are likely to benefit some sub-categories more than others, regardless of the fact that the project may be intended to benefit the whole of society.

**Step 9: Summarizing the proposed inequities focus during implementation**

In Step 9, a final decision has to be made, as to which of the three prioritized inequity dimensions from step 7 should become the active focus during the project implementation and monitoring – with the aim of optimizing equity impacts as project outcomes. The brief narrative should include an explanation of the selection(s) made. Decisions should take into account what is realistically achievable during the project time period – and beyond, if the project is expected to trigger lasting interventions and impact beyond its lifetime. Furthermore, the availability of data and indicators to monitor the modifying effect on dimensions of inequity should be taken into consideration in determining the final selection.
This practical guide is part of UNDP’s Eastern Europe and Central Asia Series on SEEDs of Health and Health Equity
SEEDs of Health and Health Equity