Health Impact Assessments
HIA

An Overview

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An Overview HIA

A *structured process* that uses *scientific data*, *professional expertise*, and *stakeholder* input to identify and evaluate public health consequences of *proposals* and suggests actions that could be taken to *minimize* adverse health impacts and *optimize* beneficial ones.

*Source: “Improving Health in the United States: The Role of Health Impact Assessments” by the National Research Council, September 2011*
Completed HIAs 2007
(N = 27)

- CA 15
- CO 1
- MN 1
- GA 3
- FL 1
- MA 2
- NJ 1
- AK 3
Completed and In Progress HIAs
2014 (N = 319)

Map created through a partnership between Health Impact Project and the Centers for Disease Control and Prevention’s Healthy Community Design Initiative
Factors That Make-up Health
Tips for Good Health

TRADITIONAL

- Don’t smoke. If you can, stop. If you can’t, cut down.
- Follow a balanced diet. Keep physically active.
- Manage stress, e.g., make time to relax.
- If you drink alcohol, do so in moderation.
- Cover up in the sun.
- Practice safer sex.
- Be safe on the roads.

SOCIAL DETERMINANTS TIPS FOR BETTER HEALTH

- Don’t be poor. If you can, stop. If you can’t, try not to be poor for long.
- Don’t have poor parents.
- Own a car.
- Don’t work in a stressful, low paid manual job.
- Don’t live in low quality housing.
- Afford to go on a vacation.
- Practice not losing your job and don’t become unemployed.
- Don’t live next to a busy major road or near a polluting factory.
- Attend high quality schools from daycare up to college.
What Causes Obesity?

No Simple Solutions

- Socially and politically complex
- Multi-causal with many interdependencies
- Not static
- Behavioral Interventions not enough
The Problem

So many daily policy decisions made outside of the health sector have significant health implications that go unrecognized.
Health In All Policies: Considering the causes of the causes

- Policies to promote economic development, reduce poverty, and reduce racial segregation
- Policies to promote child and youth development and education, infancy through college
- Policies to promote healthier homes, neighborhoods, schools, and workplaces

HEALTH
Key Ideas
When is a HIA carried out?

The purpose of HIA is to inform decision-makers before they make decisions.

A HIA is most often carried out prospectively - before the decision is made or the policy is implemented.

HIA is used to assess a defined project, plan or policy.
HIA Addresses Social Determinants of Health

How might the proposed project, plan, policy affect:
- Housing
- Air quality
- Noise
- Safety
- Social networks
- Nutrition
- Parks and natural space
- Private goods and services
- Public services
- Transportation
- Livelihood
- Water quality
- Education
- Inequities

and potentially lead to predicted health outcomes?

Slide courtesy of Human Impact Partners (www.humanimpact.org)
Social Structure

Cultural Toolkit
- Shared values, language, religion, rituals, norms of behavior, and systems of belief. A set of distinctive spiritual, material, intellectual, and emotional features a society uses to interpret phenomena, data, and experiences.

Institutions & Systems
- Labor market
- Educational system, policies
- Social welfare state
- Access to productive resources & social goods
- Human and civil rights

Policies, Rules, Regulations
- Lack of affordable housing
- Job security
- Hazards
- Community decay
- Poverty – low wages
- Transportation

Inequitable Distribution of the Social Determinants of Health

Social Status
- Gender, racial, class inequalities
- Power and wealth imbalances
- Absence of civic capacity & political influence

Psychosocial and Physiological Stress

Lack of access to material resources

Unhealthy Behaviors

Health Inequities

Andress, 2001
HIA Addresses Health Equity

Prioritizing Projects—Health Analysis

There is a strong link between the lack of physical activity and health (e.g., heart disease, obesity, and other chronic conditions).

Research has also shown certain population groups have a higher disparity. These groups include:

- Low Income
- Minority
- Older Adults (over 65)
INCORPORATING EQUITY INTO HIA
HIA and Democracy

Community Expertise

Knowledge or perceptions about conditions, vulnerabilities, day-to-day experiences of those potentially impacted by a decision

Residents
Neighborhood organizations
Medical practitioners
Public officials
Health agencies

“It affects my community, making residents sick. We need to stop the diesel trucks from passing through residential areas, also diesel buses, and if possible make it the law or policy.”
Stakeholder Participation in HIA

A diverse group of stakeholders should be involved in the HIA process.

HIAs are inherently multidisciplinary.

Some stakeholder groups, like public health agencies, may be responsible for taking more of a lead on the HIA project than others.

Other stakeholders to involve include: community residents/organizations, public agencies, policy makers, businesses.

Populations likely to be impacted by a decision should be involved and have an oversight role in the HIA process.
Purpose and Use of Pathway Diagrams

Pathway diagrams
A visual tool for explaining what the HIA will study
Help generate research questions
Help stakeholders and decision-makers understand potential effects of decision making, and their relative importance
Can show how changes to a proposal or other conditions may lead to changes in health outcomes
Identify where there is uncertainty about causes and effects or magnitude of impacts
Help guide the selection of recommendations
Pathway Diagram: Hypothesis of potential impacts resulting from decision

Scenario C: Sick worker does not take time off

- Worker gets sick
- Worker does not take time off
  - Co-workers/customers infected
  - Longer recovery time for worker
  - Illness may worsen
  - Increased stress
  - Lower productivity (could lead to loss of job or lack of advancement)
  - More illness and more medical care needed
  - More treatment (e.g., doctor visits, meds) needed
  - Unnecessary ER visit and/or hospitalization
  - Decreased immune function
HIA Minimum Elements

Informs a decision-making process

Considers potential impacts on health outcomes as well as on social, environmental, and economic health determinants

Solicits and utilizes input from stakeholders

Establishes baseline conditions for health, describing health outcomes, health determinants, affected populations, and vulnerable sub-populations

Judges the magnitude, likelihood, distribution, and permanence of potential impacts on human health or health determinants

Findings are based on synthesis of best available evidence

Identifies appropriate recommendations, mitigations and/or design alternatives to protect and promote health

Proposes a monitoring plan

Includes transparent, publicly-accessible documentation of the process, methods, findings, sponsors, funding sources, participants and their respective roles
Steps of HIA

Screening

Scoping

Assessment

Recommendations

Reporting

Monitoring and Evaluation
Who typically leads an HIA?
Why NOT do an HIA? Example 1

Project Idea Being Screened

A school district wants to better understand the health impacts of the recent relocation of its elementary school.

- The relocation could potentially result in changes in children's health outcomes due to increased air pollution from nearby traffic sources.
Why NOT do an HIA? Example 1

Project Idea Being Screened
A school district wants to better understand the health impacts of the recent relocation of its elementary school.

- This HIA would not be informing a *proposed* decision. In this case there is no decision to influence, as the decision to site the school has already been made.

Applicants should consider upcoming decision-making processes where an HIA could add value. For example, if conducted earlier in the process, an HIA could have informed the proposed decision to relocate the school.
Project Idea Being Screened

A university would like to gather and share information about the current state of children’s health.
Why NOT do an HIA? Example 2

Project Idea Being Screened
A university would like to gather and share information about the current state of children’s health.

- There is not a specific decision to influence in this case. The university is proposing a study, but not an evaluation of a proposed decision.

The findings of this study about children’s health could be used as data in a future HIA that addresses a proposed decision that could impact children’s health.
Project Idea Being Screened

After a report about food deserts is released, a neighborhood association proposes to start a local farmer’s market in an area that was shown to have lack of access to fresh produce. The city and other stakeholders are very supportive of the proposal.

What do you think? How might you suggest to proceed in this situation?
Project Idea Being Screened

After a report about food deserts is released, a neighborhood association proposes to start a local farmer’s market in an area that was shown to have lack of access to fresh produce. The city and other stakeholders are very supportive of the proposal.

- Data and information about the health impacts of the proposed market on health are already being considered. Decision makers and stakeholders are already in support of this proposal, so an HIA may not have additional influence.

What do you think? How might you suggest to proceed in this situation?
Examples
HIA can be applied to a range of sectors

- Built Environment: 34%
- Transportation: 21%
- Natural Resources & Energy: 14%
- Agriculture & Food: 9%
- Housing: 7%
- Education: 5%
- Labor & Employment: 4%
- Other: 6%
Example: Farm-to-School Policies, Oregon 2011
Oregon House Bill (HB) 2800
Provided state funds to purchase locally-grown foods for schools.

Set up school teaching gardens, and conduct nutrition education.

School districts purchase Oregon produced, processed, packed and packaged foods receive 15 cents for lunch and 7 cents for breakfast in reimbursement funds.

Ensured students learn how to choose healthy, local food options in their cafeteria through grants that support school gardens, agriculture and nutrition education.

http://www.upstreampublichealth.org/sites/default/files/F2SHIA_FINALlow-res_0.pdf
Farm-to-School Policies, Oregon

Key Findings

- Farm to school reimbursement would
- Create maintain jobs for Oregonians
- Increase student participation in school meal programs
- Strengthen connections with states’ food economy.
- Food Garden & Agriculture grants would
- Increase childhood preferences for fruits/veggies
- Shape long-term healthy diet choices that affect children's learning and academic achievement while preventing obesity.

Recommendations

1. The current policy allows food produced or processed in other states or countries to qualify for a reimbursement. Amend HB 2800 to specify that schools can only get reimbursed for foods produced or processed in Oregon to increase economic activity in our state.

2. To improve health outcomes for vulnerable populations, specify that while grants are open to all school districts, Food, Agriculture and Garden education grants will be preferentially given to school districts serving:
   - Low income populations 40% are eligible for free/reduced meals or
   - Schools with racial/ethnic diversity defined as 20% are more non white or
   - Schools in rural or urban areas with limited food access defined as 12% or more of residents are low income and live 10 miles from a grocery store.

To improve child health outcomes, specify funding criteria for Food, Agriculture and Garden education grants to support schools developing multiple component programs that increase child health benefits.

Garden grants should be preferentially awarded to programs working toward having at least one element in each of the following categories:
- Education, Promotion, Procurement and Community Involvement.
<table>
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<th>Health Outcome or Health Determinant</th>
<th>Impact w/ HIA rec's</th>
<th>Impact w/o HIA rec's</th>
<th>Distribution</th>
<th>Quality of Evidence</th>
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<td><strong>Farm to School and School Garden Education Impacts</strong></td>
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<td>Child fruit &amp; vegetable consumption</td>
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<tr>
<td>Oregon fruit &amp; vegetable crops</td>
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<td>$756,000 — $15,120,000 in school purchases⁴</td>
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<td>Oregon food sectors</td>
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QUESTIONS?

Thank You!