NOT ONLY HIA: HEALTH AND IMPACT ASSESSMENT

IAIA, WHO EUROPE, EUPHA

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HIA or Health in IA?
Research process

- WHO Europe, EUPHA and IAIA health section: research proposal focusing on 4 questions
- Internationally recognised IA specialists: analysed how health is addressed in their respective fields.
- Preliminary findings were presented by the researchers at IAIA 2013
- Joint discussion further refined the papers, the overall conclusions, and recommendations
- Booklet ready by the end of the year

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Key questions

1. How can the assessments contribute to promoting and protecting human health?
2. How can integration of health support IAs? What experiences can be shared?
3. What forms / levels of integration advisable?
4. What priorities for further development?
IAs commonalities

Combination of intersectoral action and proactive attitude, at intersection of science and decision making

IAs now widely agreed on as a necessary and useful: societal needs of “foresight”

Shared concerns: effectiveness; balancing economic benefits with other impacts; community engagements; equity; cumulative effects; IA capacities; transparency

Environmental IA (EIA)

- Most developed form of IA & practiced in most countries of the world. Still evolving as more complex themes get included.
- Tends to look less at opportunities for health promotion and more at illnesses prevention.
- In Sweden, health aspects are gradually introduced in EIA; in addition, methodologies for HIA are developed.
- In Estonia the introduction of separate HIA is not considered to be very practical, so more efforts into including health in EIA.

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Sustainability A (SA)

- Beyond covering the three pillars (social, economic, environmental), SA attempts to direct decision-making towards sustainability.
- In SAs of English local plans determinants of health are included and implicitly help to promote good health. Engagement with health professionals was sporadic; health professionals did not always understand how planning worked; tended to focus on the expected demands on health infrastructure.

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40 countries with formal SEA requirements and legislation; substantial voluntary practice

Increasingly portrayed as a broader “framework”

Health plays an important role, with physical determinants (e.g. emissions) considered routinely, social / behavioural aspects only occasionally

Health stakeholders often not engaged because (i) not statutory consultees and (ii) often uncomfortable with getting involved
Social IA (SIA)

- SIA is about “the processes of managing the social issues associated with planned interventions”
- Health has a central place in SIA
- Health pathways not always clearly defined
- Many times a narrow definition of health is utilized
- Health experts not always involved
- FPIC
IAIA 2013 – Calgary Discussion
Initial conclusions

There is no single answer to the question how best to bring together health and IAs. Main avenues for moving ahead (not mutually exclusive):

- better coverage of health within the range of existing IAs beyond HIA
- further development of specific HIA
- assuring adequate coverage of health in emerging forms of more integrated assessments
Health and sustainable development
IA can assist

DEVELOPMENT GOAL
Sustainable well being for all

HEALTH

DETERMINANTS OF HEALTH:
gender, equity, wealth, education,
nutrition, environment, security,
safety, human rights, etc...

IMPACT ASSESSMENT

HEALTH GOAL
Maximising healthy lives

Accelerate the MDG Agenda
Reduce the NDC Burden
Ensure universal health coverage

Contributions of other sectors to health

Adapted from: http://www.worldwant2015.org/health

Priorities regarding Health in IA

- A common and plausible understanding of health as a concept, beyond health practitioners, is needed.
- Public health specialists and health institutions should have a stronger role in other IAs.
- Health coverage in IAs profits from access to study results concerning all determinants of health, providing also temporal, spatial, and social dynamics of the relation.
- Both programmatic endorsement and legal requirements of health coverage in IAs are useful, although they do not guarantee efficient practice.
Questions? Thanks!

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