
Introduction to Health Impact Assessment

*Wednesday, December 1, 2010
9:30-11:00 a.m.*

Nancy Goff *Oregon Public Health Division*
Jennifer Lucky *Human Impact Partners*
Steve White *Oregon Public Health Institute*
Mac Gillespie *Benton County Health Department*



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Agenda

- 9:30** **Welcome**
- 9:40** **Introduction to HIA**
- 9:50** **Case Study 1: *Portland to Lake Oswego Transit***
- 10:00** **Q & A**
- 10:10** **The Steps of HIA**
- 10:30** **Case Study 2: *Accessory Dwelling Units***
- 10:40** **Q & A; Discussion**
- 10:50** **HIA Resources; Evaluation**

Introduction to Health Impact Assessment

Health is a state of
complete physical, mental and social well-being
and not merely the absence of disease or infirmity.

Factors Responsible for Population Health



The world would look different



Development



Farm Policy



Incarceration

Immigration



Ports



Education



Limitations to economics-based decision-making

Externalities

Disparities

Money is not the same as happiness



A health frame can be persuasive

People understand health personally

Health is an indicator of quality of life and well-being

Health is a shared value

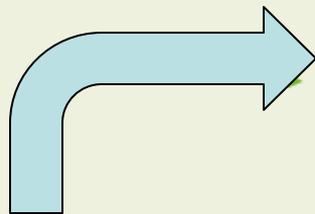
People are morally outraged by health inequities

Health Impact Assessment

A combination of procedures, methods and tools that systematically judges the potential, and sometimes unintended, effects of a policy, plan, program or project on the health of a population and the distribution of those effects within the population. HIA identifies appropriate actions to manage those effects.

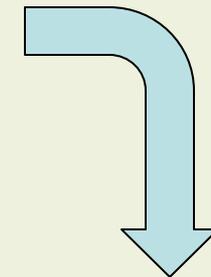
International Association for Impact Assessment, 2006

How does the proposed project, plan, policy



affect

- Democratic process
- Housing
- Air quality
- Noise
- Safety
- Social networks
- Nutrition
- Parks and natural space
- Private goods and services
- Public services
- Transportation
- Social equity
- Livelihood
- Water quality
- Education



and lead to health outcomes

Primary

- Judge health effects of a proposed project, plan or policy
- Highlight health disparities
- Provide recommendations
- Shape public decisions & discourse
- Make health impacts more explicit



Secondary

- Engage & empower community
- Emphasize everyday experience
- Build consensus
- Build relationships & collaborations

A Brief History of HIA



- 1969 National Environmental Policy Act (NEPA) requires study of environmental & health effects (*however, health impacts have not been adequately addressed in EIA*)
- 1980s WHO encourages Health Promotion/Healthy Public Policy in 1986 Ottawa Charter
- 1990s England, Acheson Report recommends analysis of impacts of policy on health inequities
WHO publishes *Gothenburg Consensus Paper on HIA*
First HIA in US (SFDPH, Living Wage)
- 2000s World Bank requires HIA of all large projects
HIA on proposed Alaska North Slope Oil Lease
- 2010s HIA used around the world and, recently, across the U.S.
North American HIA Practice Standards Released

HIA continues to gain momentum



Steps of a HIA



Screening	Determines the need and value of a HIA
Scoping	Determines which health impacts to evaluate, methods for analysis, and a workplan
Assessment	Provides: <ol style="list-style-type: none">1) a profile of existing health conditions2) evaluation of potential health impacts3) strategies to manage identified adverse health impacts
Reporting	Includes: <ol style="list-style-type: none">1) development of the HIA report2) communication of findings & recommendations
Monitoring	Tracks: <ol style="list-style-type: none">1) impacts on decision-making processes and the decision2) impacts of the decision on health determinants

HIA can evaluate many types of projects, plans, policies

Development projects

Housing developments, mixed-use retail

Transportation plans

New transit stations, roadway expansions, new rail lines

Comprehensive or specific area plans

Guides for future development

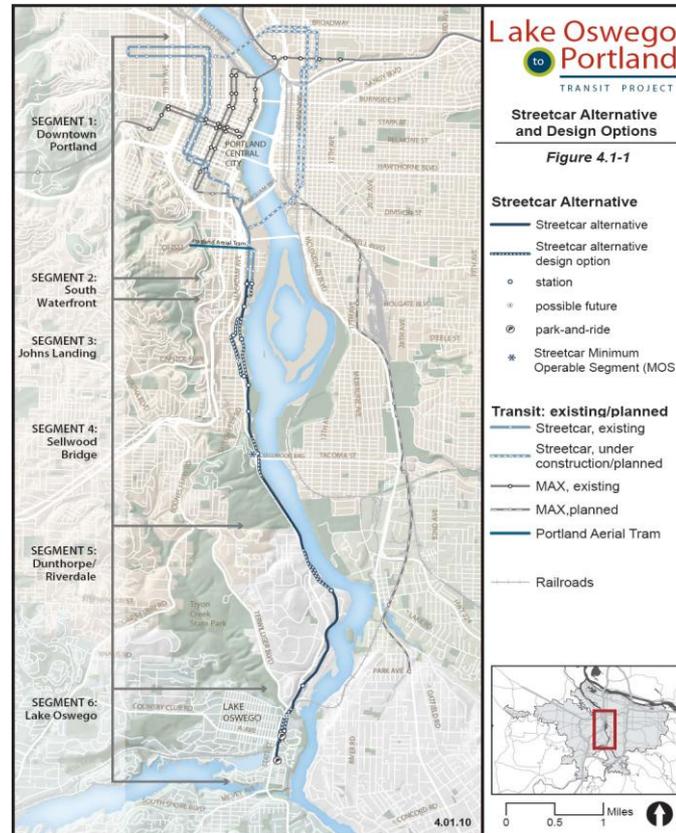
City, state, or national policies

Labor, education, incarceration, immigration

Case Study: *Lake Oswego to Portland Transit Study*

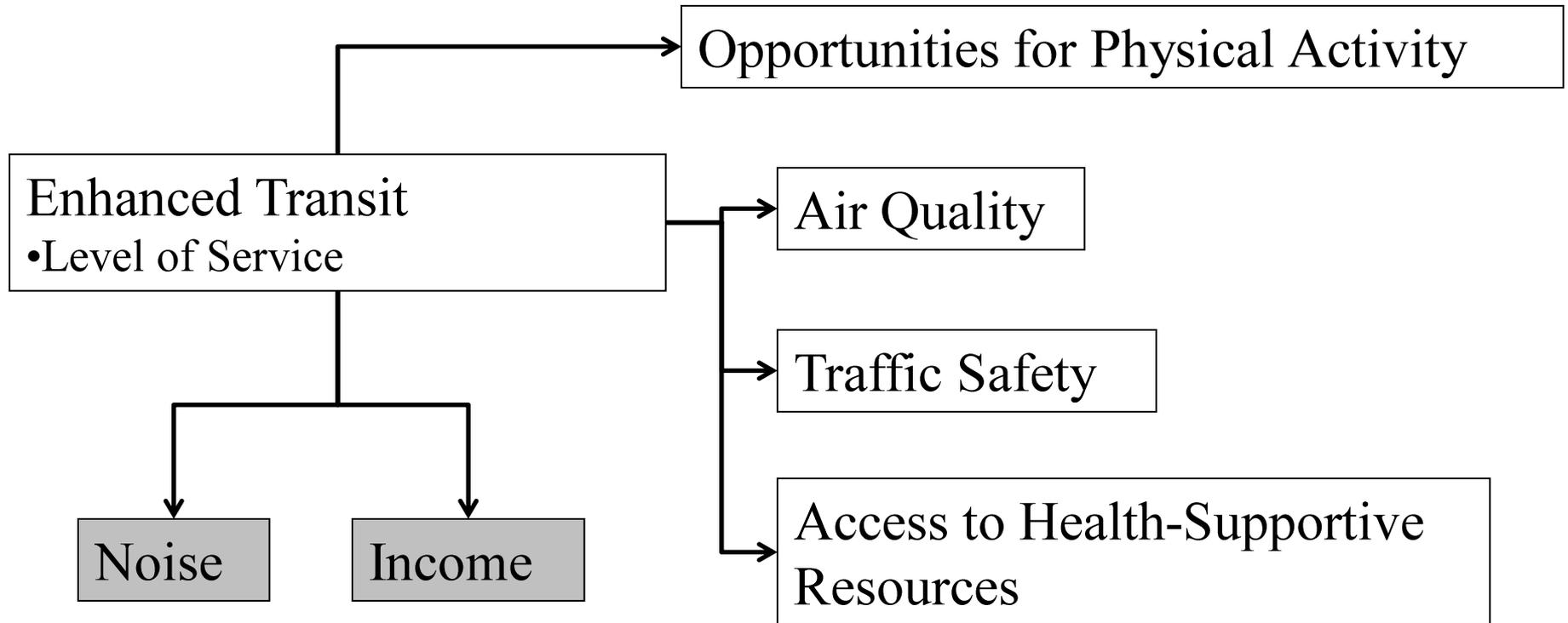
Three Scenarios

1. **No Build**
2. **Enhanced Bus**
3. **Streetcar**
 - **Various design options**



Case Study:

Lake Oswego to Portland Transit Study



SCOPING

Case Study:

Lake Oswego to Portland Transit Study

1. Existing conditions
2. Scenario components
 - Enhanced transit service
 - Additional infrastructure
3. Exposure-response relationship
 - Direction
 - Magnitude
 - Likelihood
4. Results
5. Recommendations

•Enhanced
Transit Level
of Service



Corridor
Region



Changes in health
determinants

- Opportunities for physical activity
- Air quality
- Exposure to traffic accidents
- Access to health supportive resources

ASSESSMENT

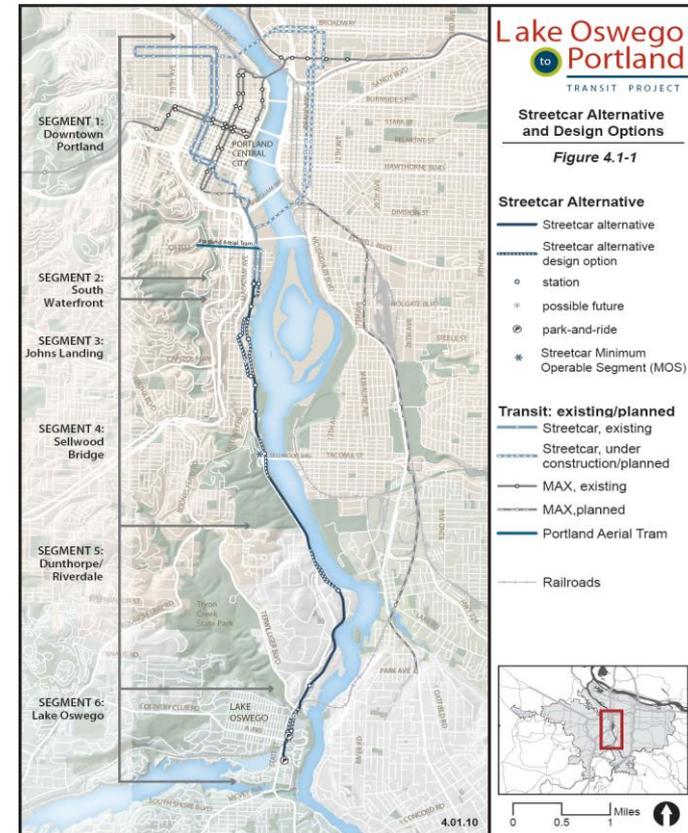
Case Study:

Lake Oswego to Portland Transit Study

Key Feature:

Focused on process

- develop interest and capacity in partner organization (Metro)
 - Brown bags
 - Project team
- Concern over methodology and its validity
- Address concerns about conducting HIA in conjunction with DEIS



Case Study:

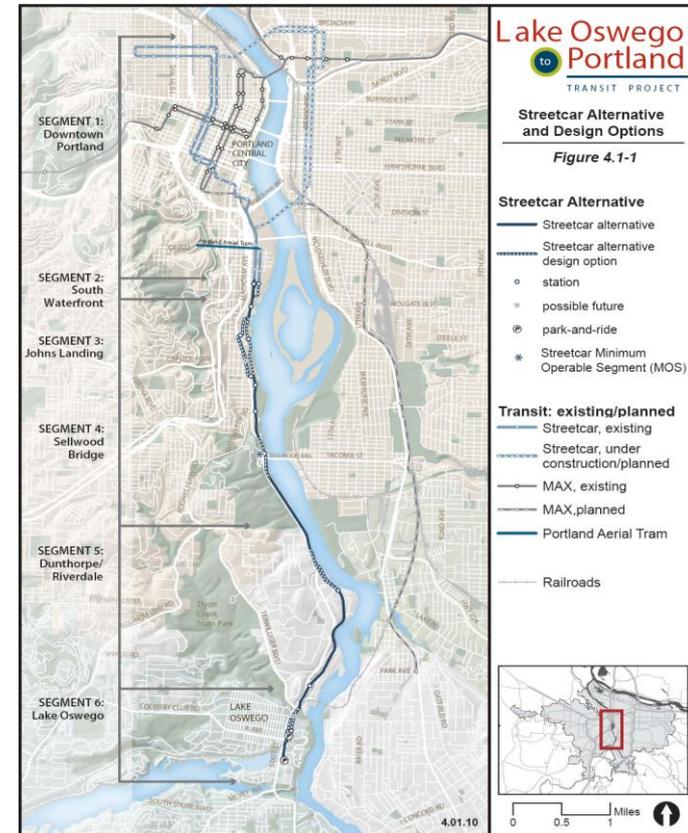
Lake Oswego to Portland Transit Study

Current status:

- reporting and dissemination

Key issues/lessons learned (so far):

- HIA vs. C-B analysis
- Significant overlap between positive health outcomes and alternative transportation.
- (Lack of) control over timeline



Questions?

The logo for the Oregon Health Authority is centered within a light blue, curved banner at the bottom of the slide. It features the word "Oregon" in a smaller, orange, serif font positioned above the "H" of the word "Health". "Health" is written in a large, dark blue, serif font. Below "Health", the word "Authority" is written in a smaller, orange, serif font.

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The HIA Process



Screening



Scoping



Assessment



Reporting



Monitoring

Step 1: Screening



Objective

To decide whether a HIA is feasible, timely, and would add value to the decision-making process.

Tasks

Key points

Tools

Resources

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

Screening



Scoping



Assessment



Reporting



Monitoring

Objective

To create a plan and timeline for conducting a HIA that defines priority issues, research questions and methods, and participant roles.

Tasks

Key points

Tools

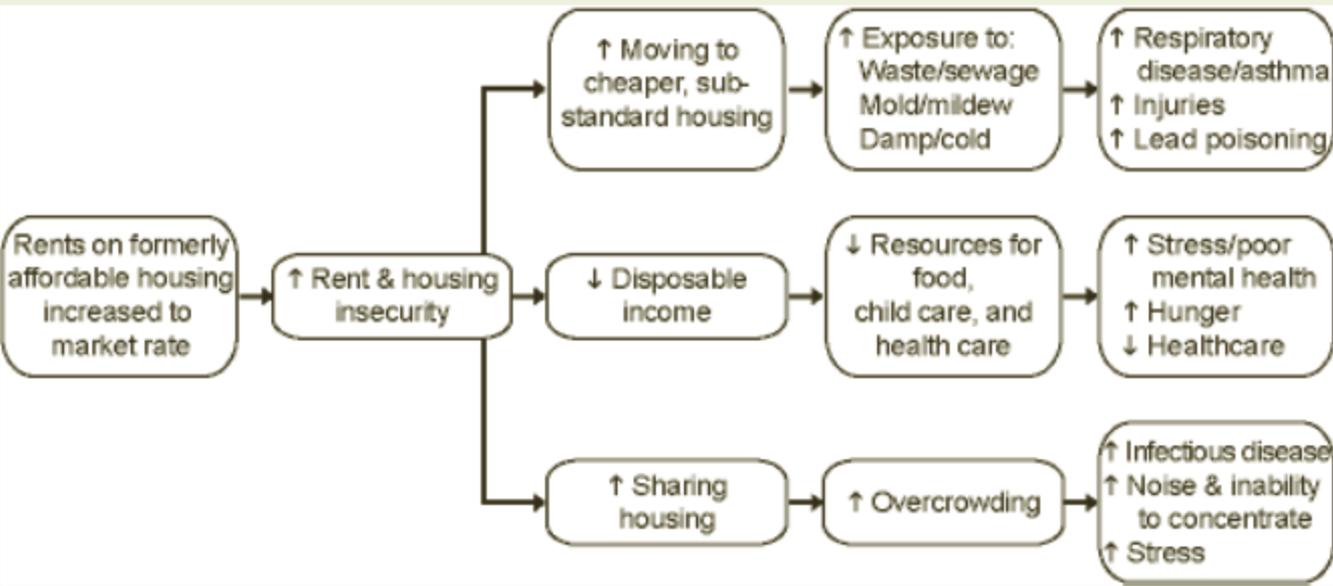
Resources

HIAs can vary greatly in scope. How will available resources impact the scope?

	Review of available reports
Least Resources ▲	Literature review
	Analysis and mapping of existing data from the census, public agencies, etc.
	Expert opinion
▼	Application of quantitative forecasting methods using existing studies
Most Resources	Interviews or focus groups
	New quantitative data collection and analysis

Causal Pathways

A Pathway Diagram demonstrates the links between health determinants and outcomes.



Example Scoping Questions



For each health issue of concern:

Existing Conditions	What do we know about existing conditions, potential health impacts, and vulnerable populations?
Populations	What are specific populations (age, gender, race, income, place) that will be impacted by this project/policy proposal?
Research Questions	What research questions do we want to answer?

What are your goals for this HIA?

The HIA Process



Screening



Scoping



Assessment



Reporting



Monitoring

Step 3: Assessment



Objective

To provide a profile of existing conditions data, an evaluation of potential health impacts, and evidence-based recommendations to mitigate negative and maximize positive health impacts.

Tasks

Key points

Tools

Resources

United States Census Bureau, American Fact Finder

Population data on demographics, social and economic characteristics, at state, county, city, zip code, census tract, block group, and block level

Centers for Disease Control, Behavioral Risk Factor Surveillance System

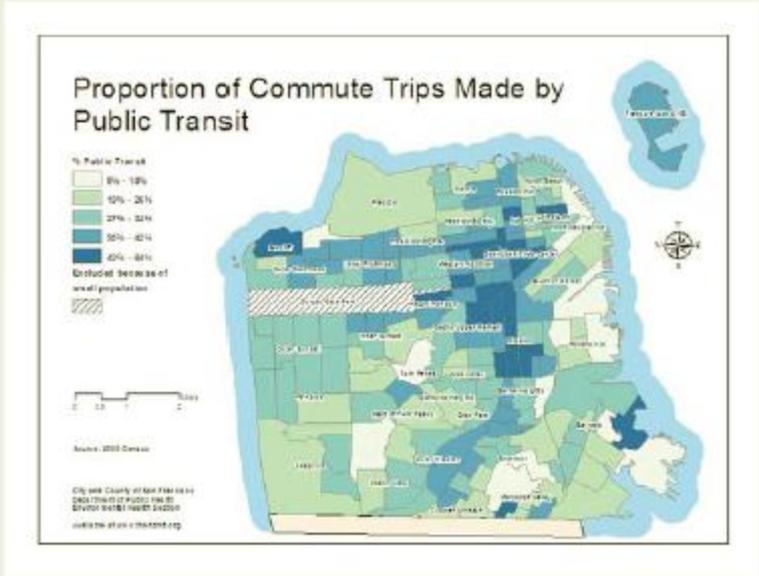
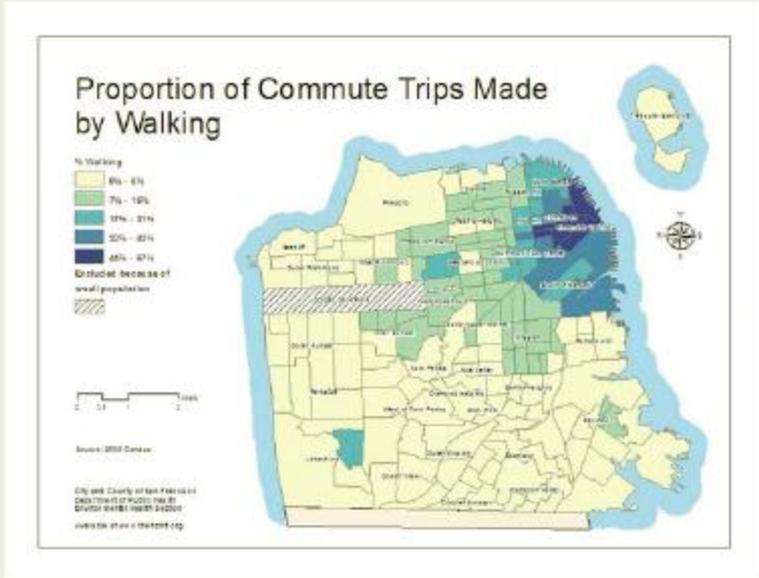
The world's largest, on-going telephone health survey system, tracking health conditions and risk behaviors in the U.S.; data are collected monthly

Public Agencies

Health, transportation, environment, planning

See "HIA Data Sources"
link on HIP's website

Transportation Commuting



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."

Focus groups

Surveys

Interviews

Surveys can help provide information that cannot be found in other data sources

April 17 2009 12:02 PM
ENVIRONMENTAL ISSUES

1. Are you concerned about air quality in your community?
 Yes No I don't know.

If so, what is the main source of your concern?(e.g., exhaust from local roads or from the freeways, industrial pollution)

2. Are you concerned about water quality in your community?
 Yes No I don't know.

If so, what is the main source of your concern?(e.g., pollution from industry)

3. Are you concerned about noise in your community?
 Yes No I don't know.

If so, what is the main source of your concern?(e.g., traffic, industry)

4. Are you concerned about the condition of your housing?
 Yes No I don't know.

If so, what is the main source of your concern?(e.g., lead paint, mold, air quality, physical condition, insects)

5. Is your neighborhood walkable and/or bikeable?
 Yes No I don't know.

If not, why not? (e.g., too much traffic, inadequate sidewalks, streets too hard to cross, too much crime)

6. Do you have other concerns about the environmental quality in your neighborhood? If so, please list these.

For example

What is the health status of the community?

What are residents perceptions of environmental conditions and community needs?

What is the likely effect of a change in policy?

A key function of HIA is to identify opportunities for public decisions to promote health

HIA may suggest

Recommendations: alternative ways to design a project, plan, or policy its location, or timing to benefit health

Mitigations: strategies to lessen anticipated adverse health effects of a decision

Step 4: Reporting



Objective

To develop the HIA report and communicate findings and recommendations.

Tasks

Key points

Tools

Resources

HIA Reporting Formats



Letters to proponents & decision-makers

Comment letters on draft EIAs

Formal report

Presentations

Peer-reviewed publications

September 1, 2006
Karlton Fong
Project Manager
East Bay Asian Local Development Corporation
370 9th Street, Suite 200
Oakland, CA 94607

RE: Jack London Gateway Phase 2

Dear Karlton,

First, we wanted to thank you for your participation in and our Health Impact Assessment (HIA) of the Jack London Gateway. Considering the diverse ways that land use affects health, incorporating design and mitigation strategies into new developments can reduce disease and illness among Oakland's most vulnerable.

Growth and development currently happening in Oakland pose to address long standing disparities in health, and we hope this tool for achieving this goal. Health evidence can support and resource-efficient land use strategies such as mixed-use development, transit-oriented development, and high traffic areas.

Supporting beneficial planning projects.

- Multi-use path for pedestrians and bicyclists across BART's basin, proposed by Urban Ecology, funded by TCE.

through:

- community meetings
- input from planners, public health officials, teacher officials, and others
- secure meetings and
- necessary data analysis

Health concerns were prioritized, researched

Estimation of Health Benefits From a Local Living Wage Ordinance

The study estimated the magnitude of health improvements that may be realized through implementation of the Ordinance. Estimated improvements include an increase in health care expenditures in their county, resulting in a projected increase in health care expenditures in the county of \$1.2 billion per year. The study also estimated that the Ordinance would result in a projected increase in health care expenditures in the county of \$1.2 billion per year. The study also estimated that the Ordinance would result in a projected increase in health care expenditures in the county of \$1.2 billion per year.

FACTS ABOUT THE HEALTH IMPACTS OF THE RAILROAD AVENUE GREENWAY PLAN

- High housing costs = less \$ for health care spending, especially for low- and middle-income households.
- High housing costs = more walking, less car use, and less air pollution.
- Location of housing = access to services, retail public transit options, rates of pedestrian injury, and exposure to air pollution from industry.

How will the Railroad Ave. SMART housing plan impact health?

- Location of housing = access to services, retail public transit options, rates of pedestrian injury, and exposure to air pollution from industry.

How can this plan do a better job?

The HIA Process



Screening



Scoping



Assessment



Reporting



Monitoring

Objective

To track the impacts of the HIA on the decision-making process and the decision, the implementation of the decision, and the impacts of the decision on health determinants.

Tasks

Key points

Tools

Resources

Objective

To evaluate the process of conducting the HIA.

Tasks

Key points

Tools

Resources

Case Study: Accessory Dwelling Units

Benton County, Oregon

- History of ADUs in Benton County
- Existing policies
- Opportunities to impact decision making
- Decision alternatives
- Outcomes



Case Study: Accessory Dwelling Units

Benton County, Oregon

Health impact indicators:

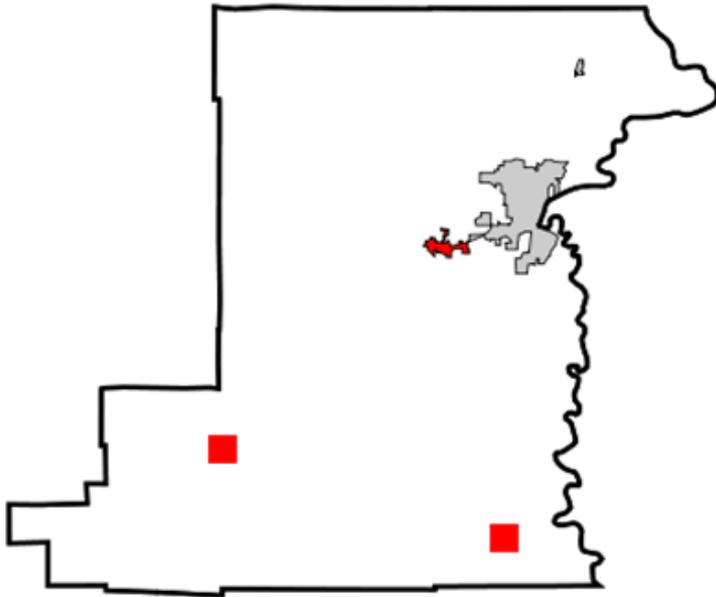
- Access to goods and services
 - Schools/childcare, food markets, etc
- Social and family cohesion
 - Caregiver living space, “ageing in place”, maintaining family unit
- Transportation and mobility
 - Accessibility of public transit, walkability, reliance on autos
- Environmental considerations
 - Increased air pollution, vehicle miles travelled
- Healthy housing
 - Proper property maintenance, substandard housing



Case Study: Accessory Dwelling Units

Benton County, Oregon

Rural Focus Groups



Monroe – pop 600

Alsea – pop 1100



Case Study: Accessory Dwelling Units

Benton County, Oregon

Outcomes:

- Recommendations for this project
- Relationships built

	Impact Categories			
Policy Options	Healthy Housing	Access to Goods/Services	Social Cohesion	Transportation And Mobility
Option 1: No Policy Change	*	*	*	*
Option 2: Restriction of Current Rules	-	+	-	+
Option 3: Dependent ADUs	+	--	+++	-
Option 4: Independent ADUs	++	---	++	--
Option 5: Independent ADUs in UGB zones	+	--	+	-

Case Study: Accessory Dwelling Units

Benton County, Oregon

Next Steps:

- Report to Benton County Planning Commission, Benton County Board of Commissioners, and community
- Evaluate project and outcomes
- Continue the integration of HIA into future work!

Questions?

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Discussion

What are some projects or policies suitable for HIA in your community?

Resources

Oregon Public Health Division HIA Website:
www.oregon.gov/dhs/ph/hia

HIA Request for Proposals: Due 12/10/10

HIA Network: Next meeting 1/13/11

**HIA Webinar Series: Second Wednesdays,
January-April 2011**



Health Impact Assessment (HIA) Webinars

Introduction to HIA

December 1, 2010

Screening, Scoping and Collaboration

January 12, 2011

Assessment

February 9, 2011

Recommendations, Reporting, Monitoring and Evaluation

March 9, 2011

Intervention Points in Policy Processes

April 13, 2011

This free webinar series is intended for public health professionals, community planners, partners, and local leaders interested in health, social and economic decision making. The Introduction to HIA webinar will define Health Impact Assessment (HIA) and provide an overview of the steps of HIA. The subsequent webinars will walk through the steps of HIA while also highlighting the role of collaboration, and opportunities to apply HIA to decision making contexts in Oregon.

The HIA Process



All webinars take place from 9:30-11:00 a.m. (PST)

Registration information will be sent via email for individual modules to the HIA Network listserv

Questions? Email: nancy.m.goff@state.or.us