**Northwest HIA Network Mission, Vision, and Governance**

**Part A of the Working Strategic Plan - Updated February 2014**

**Preamble**

The Northwest Health Impact Assessment Network (the “Network”) is a participant-led community of practice that supports addressing regional health equity and public health issues in decision-making processes with Health Impact Assessments (HIAs) or other appropriate tools. This strategic plan will be revisited at least once every three years.

**Vision for HIA Practice in the Northwest**

By 2020, the Northwest HIA Network will be a coordinated, inclusive, well-supported, interdisciplinary community of practice that:

1. Has built and maintained established relationships, while fostering emerging connections, in the Northwest in multiple sectors, across organization types, for the conduct of HIAs and HIA-like projects (i.e. using a health in all policies approach), and
2. Continues to support new and established HIA practitioners in being innovation leaders that contribute actively to a regional, national, and international community of practice.

**Mission**

The Network will be responsive to current issues, topics, and needs that participants bring forward related to supporting HIA practice and to addressing local/regional health equity and public health issues. The Network will continue to:

* Provide opportunities to practice HIA elements such as screening ideas, scoping projects, or developing tools for use in the region.
* Provide opportunities to build relationships of HIA practitioners and the HIA-curious.
* Provide information about HIA funding opportunities.
* Disseminate information (i.e. streamline access to existing resources especially those related to culturally, linguistically, and socially responsive tools that advance equity and identify relationships between social health determinants and health outcomes).
* Provide education in response to opportunities and facilitate access to education and training opportunities with other groups in the NW who provide these resources.

The Network participants include those who might only do an HIA once, frequent or advanced practitioners, and the HIA-curious. The Network has an online presence through a website and listserv hosted by the Oregon Health Authority’s Health Impact Assessment Program. Network history, HIA resources, active partners and existing HIAs in the region are kept up to date by Network participants. “Listserv subscribers” are those who have signed up to receive information and resources through the listserv and may or may not be active Network participants. “Northwest” means at minimum the Oregon and Washington region, although it may expand in the future.

**Constraints to Realizing the Mission**

1. There are insufficient funds to respond to all HIA training, education, technical assistance, and other service requests.
2. The Network is currently unfunded with some organizations providing limited donations of voluntary staff time to attend meetings.
3. The organizations who are involved in the Network have unpredictable finances to do this work.
4. The bulk of the resources committed to the Network are in the Portland-Vancouver metropolitan region, and the scope of the Network is much larger. In order to be fully inclusive and meet participant needs across a larger geography, the Network will need additional resources.

**Governance and Decision Making**

The Steering Committee is a planning, implementation, and decision-making body made of six to eight volunteer Network participants. The Steering Committee oversees the Network and provides vital support. Steering Committee members will serve one-year term commitments. The existing strategic planning participants will select the initial Steering Committee (SC) in 2014 from a pool of volunteers. From that point forward, current SC members will make appointments to the SC for new members with an eye to cross-region geographic representation, sector and content expertise, ethnic and cultural diversity, a mix of individuals “new” to HIA practice and those who are established in the practice. Network participants and listserv recipients can contact existing SC members, who will be listed on the Network’s website, to be considered for a seat on the SC. Steering Committee members are expected to:

* Attend a majority of calls/meetings including at least one SC meeting between each quarterly Network meeting by phone
* Keep the Network focused on its mission and coordinate work groups (Part B of the strategic plan)
* Take leadership to develop, update, and implement activities to fulfill the strategic plan
* Contribute to preparing, planning, facilitating, and coordinating Network meetings
* Coordinate and manage information sharing including updating the website and administering the listserv
* Make decisions about governance or structure before bringing issues to quarterly meetings
* Communicate to the Network about major decisions to maintain transparency
* Convene the Network for prioritized activities

SC members will be asked to reaffirm their year commitment if they consecutively miss more than two meetings. The rest of the SC may ask a member to step down if extended absences continue in order to maintain the integrity of the SC’s efforts.

**Affiliations and Practice**

The Network participants are committed to maintaining integrity in the practice of HIA and will utilize the North American HIA Practice Standard Minimum Elements of HIA.The Network aligns itself with Society of Practitioners of Health Impact Assessment and the health section of the International Association of Impact Assessment and supports the following HIA values:

* Democracy: emphasizing the right of people to participate in the formulation of decisions that affect their lives.
* Equity: emphasizing the reduction of inequity that results from avoidable differences in health determinants and/or health status within affected populations.
* Sustainability: emphasizing that decisions should meet the needs of the present generation without compromising the ability of future generations to meet their own needs.
* Ethical use of evidence: emphasizing that transparent and rigorous processes are used to synthesize and interpret evidence, that the best available evidence from different disciplines and methodologies is utilized, that all evidence is valued, and that recommendations are developed impartially.
* Comprehensive approach to health: emphasizing that health and disease are determined by a broad range of factors from all aspects of the physical, social and economic environment.

*[Values adapted from: Quigley et al. Fargo, USA: International**Association of Impact Assessment, 2006.]*

**Use of the Northwest HIA Network Name**

* If a sub-group of the Network chooses to form and advocate for region-wide activities, for example data collection efforts, they can do so under a different name. This ensures organizations or individuals who have conflicts of interest are not affected by other partner’s efforts.
* If participants of the Network create resources or materials for use in the region specifically for Network participants, they have the option to use the Northwest HIA Network brand. The brand is to appear prominently on the front page in addition to the contributing organization’s logos/brands. Any material created for this purpose needs to be submitted to the Steering Committee for approval before releasing it with the HIA Network brand.