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Part of the UNSW Research Centre for Primary Health Care and Equity

Health Impact Assessment: From the Global to the Local

Welcome to the twenty-second issue of the HIA eNews. There continues to be a lot of interest in HIA, with increasing activity in all Australian states and more work being undertaken across the Asia Pacific region. We recently held a panel on HIA as part of our Annual Forum that discussed some of the topics and HIAs outlined in this issue.

While it's encouraging that there is so much interest in HIA internationally it's clear that real understanding and credibility only comes from doing HIAs. As practitioners we need to ensure that our discussions about the future of HIA are always informed by real HIA cases - linking the global and the local.

Elizabeth Harris
Director

Marilyn Wise
Manager, Healthy Public Policy Program



Colleen Gunning from the Queensland Tropical Population Health Unit and Michelle Maxwell from Sydney South West Area Health Service presenting their work on HIA at the Annual Forum



Ben Harris-Roxas and Patrick Harris from CHETRE discussing Australian and international developments

Community-Led Health Impact Assessment The Goodooga Equity Focused HIA

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The community of Goodooga recently undertook an equity focussed health impact assessment on changes proposed to their local community health service.

Goodooga is a small remote community in Northern New South Wales, about 80 kms from the town of Lightning Ridge. Currently the health service provides some emergency services, assessment (acute cases are transported to hospital), first aid and transport.



Photo: NSW Nurses' Association

Goodooga Health Service

When Greater Western Area Health Service commissioned a review of the service in late 2008 the community undertook their own equity focused health impact assessment to respond to the review's proposed changes and provide recommendations to inform Greater Western Area Health Service's planning. The equity focused HIA drew on data routinely collected by the health service, data the community collected themselves, and the national and international literature on service provision to rural and remote indigenous communities.

Overall the community welcomed the opportunity to comment on their own terms to the recommendations in the review, which they found to propose generally positive changes. However there were a range of specific concerns, and recommendations

Issue 22

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In this issue

Equity Focused HIA	2
HIA in North Queensland	3
Revamped HIA Connect Website	4
Western Australian HIA Network	4
Second Asia Pacific HIA Conference in Thailand	5
Second New Zealand HIA Practitioner Workshop	5
HIA Practice Standards Issued by North American Group	6
Forthcoming WHO Guide on Health in Development Lending	6
UNSW HIA Publications	7
Learning by Doing HIA Training Packages	7
What's New?	8

"The HIA gave our community a way to speak to the health system and from that platform they seem to listen."

The Goodooga Equity Focused HIA

made, concerning the proposed changes. For example the proposed provision of an after-hours emergency phone line led to concerns for members of the community without a phone or without the confidence to call and accurately assess the situation. If the phone line is introduced, the community recommended the whole community be given training on recognising emergency health issues that require referral via phone and how to discuss these with phone operators.



Other issues of concern included moving the ambulance

service to the already busy Lightning Ridge Service 40 minutes away, and relocating the health service manager out of the community.

In response the community also recommended they will form a Community Health Council or equivalent as a representative of the broader community to oversee and assist the work of the health service. This body will work with Greater Western Area Health Service concerning both the provision of services in Goodooga and the development of strategies to help community members to improve their health.

Reflecting on the HIA, the community member who coordinated the HIA made these comments:

“Equity is the only lens through which this issue should be looked at. Without health you cannot have wellbeing and education, and without wellbeing and education you can't have health. And as communities we can't be expected to communicate our needs to providers, organise the health education of community, and make sure health providers are doing their job.

By looking at the main issues and considering who will ‘slip through the cracks’ we realised that we all have. We are largely forgotten out here. The HIA gave our community a way to speak to the health system and from that platform they seem to listen.”

The full HIA report and recommendations made can be found at <http://bit.ly/LEjMy>

Equity Focused Impact Assessment

Elizabeth Harris, Centre for Health Equity Training, Research and Evaluation (CHETRE), University of New South Wales e.harris@unsw.edu.au

“How is EFHIA different from HIA? Equity audits? Equity lenses?”

There is a high level of interest internationally in finding ways to make the call by the Commission on the Social Determinants of Health for greater use of Health Equity Impact Assessment a reality.

In June, 2009 I was fortunate to attend the International Society for Equity in Health (ISEqH) in Crete where we ran a small workshop on Equity Focused HIA(EFHIA). Participants to the workshop came from Africa, Canada, USA, Europe and Australia.

Participants to the workshop came from Africa, Canada, USA, Europe and Australia.

Internationally we seem to be facing similar issues:

- ◆ How is EFHIA different from HIA? Equity audits? Equity lenses?
- ◆ In the context of minimal resources when is it most effective to use EFHIA as opposed to other planning and policy development processes?
- ◆ Where should the capacity to undertake these assessments be built-in government, in universities or in the private sector?

There are also few countries where HIA has been systematically adopted into the planning or policy development and approval

processes. There are different views on whether having a recognised mandate is fundamental to the development of EFHIA. Some people see that having a mandatory requirement to undertake EFHIA as critical to its long term sustainability while others are concerned that mandating EFHIA may limit its use as a decision support tool as there is more scope for formal challenges to the EFHIA, especially as there is a lack of strong predictive methodologies and data on which to base predictions.

Later that week I was lucky to visit the Venice Office of

Equity Focused Health Impact Assessment

WHO Europe where Sarah Simpson (one of the original CHETRE HIA team) is now working. WHO Europe is also trying to find ways of making EFHIA “real” and is working on a global discussion paper to provide guidance to member countries. Work on EFHIA is also being undertaken by IMPACT in the UK and by the Public Health Agency of Canada.

Meanwhile CHETRE continues to work on a series of EFHIAs. These tend to be undertaken on health-related policies where there is concern that there may be unintended consequences on equity if usual planning processes are used and not interrogated to see if there may be unintended winners and losers.

Further Reading

HIA Connect - EFHIA
<http://bit.ly/g0CDI>

EFHIA Framework
<http://bit.ly/36hs6C>

EFHIA of the South Australian Better Health Initiative
<http://bit.ly/123i62>

Goodooga Equity Focused HIA
<http://bit.ly/LEjMy>

EFHIA Literature Review
<http://bit.ly/TeCnt>

WHO Commission on the Social Determinants of Health Final Report
<http://bit.ly/4sfjiu>



WHO Europe's Venice Office

Health Impact Assessment in North Queensland

Colleen Gunning

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Queensland Health's Tropical Population Health Services (TPHS) exist to protect health; prevent disease, illness and injury and promote health and well-being in north Queensland. With offices in Cairns, Townsville, Mackay, and Mount Isa, TPHS works for a population of over 600,000 people, from St Lawrence south of Mackay to the northernmost islands of the Torres Strait. Tropical Queensland is a distinctive and challenging environment characterised by rural and remote communities, a large Aboriginal and Torres Strait Islander population, high urban growth, a young population and a large number of international and Australian visitors.

In 2007 Queensland Health's *Population Health Plan 2007–2012* identified the “facilitation of the creation of healthy physical and social environments” as one of its key strategic directions, and indicated that Population Health Services is seeking to achieve an “established process within Queensland Health and other government departments for the systematic consideration of the health impacts of

state and local policies and major developments”.

TPHS recognising that Health Impact Assessment (HIA) was a process which could meaningfully contribute to the establishment of environments that both promoted and protected health embarked on an HIA strategy that aimed to:

- Improve HIA skills among TPHS Health Promotion Services and other staff
- Strengthen collaborative partnerships within TPHS and across sectors
- Increase community involvement in planning processes
- Build safer communities
- Improve local opportunities for community members to be physically active, to access healthy food and to interact with each other

In order to build its broader workforce capacity to undertake HIA in north Queensland, TPHS adopted a modified version of the New South Wales (NSW) Health System's ‘learning by doing’

approach which was developed by the UNSW Centre for Health Equity Training, Research and Evaluation (CHETRE) and seen as successful in building regional health service capacity to undertake HIA.

In November 2008 TPHS staff from across north Queensland, and key partners from Mackay (Department of Infrastructure and Planning and Department of Communities staff), completed a CHETRE HIA training workshop. Since then various HIA projects in north Queensland have received CHETRE help-desk support and/ or a site visit by CHETRE personnel. To date, two HIA's have been completed: of the redevelopment of the Flinders Street Mall in Townsville and of the Alternative Patterns of Development associated with the Whitsunday Hinterland and Mackay Regional Plan.

References

Queensland Health (2007) *Queensland Health Population Health Plan 2007–2012*. Brisbane: Queensland Government. <http://bit.ly/13d3LW>

Revamped HIA Connect Website

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The HIA Connect website has been extensively overhauled to make it easier to use and to add new material.

New Pages

More than 60 HIA Reports
<http://bit.ly/jDtL>

Australia & New Zealand HIA
<http://bit.ly/tunTU>

Evidence HIA Works (Evaluations of HIAs)
<http://bit.ly/ct7he>

Evidence Summaries
<http://bit.ly/NKRWJ>

HIA Blog
<http://bit.ly/3LEPe1>

Western Australian HIA Network

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HIA enthusiasts and practitioners in Western Australia have recently formed a local network to exchange information about HIA and increase support for the concept.

The first network event was a dinner meeting held in late May. Outcomes from the HIA2008 Asia Pacific HIA conference in Thailand were presented by Dianne Katscherian and Judy Edwards. Jeff Spickett outlined some of his HIA experiences and professional development opportunities such as the short courses available in Western Australia.

Emerging developments in WA were outlined, including the work being undertaken at local government level. Great examples were given of the HIA implementation in the Shire of Serpentine Jarrahdale, and in the North Metropolitan Area Health Service. There is also a great opportunity to embrace HIA and public health assessments with the presentation of a new Public Health Act in the Western Australian Parliament shortly.

The network currently has a small but diverse membership. New members are very welcome and visitors passing through Perth, who could share their experiences and insights with WA network members, would receive a warm reception (and dinner)!

For further information contact Judy Edwards at
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HIA Connect
 Building capacity to undertake health impact assessment

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Learning by Doing

Health Impact Assessment

The HIA Connect website provides resources and information about health impact assessment (HIA). Health impact assessment:

- Assesses plans, projects, programs or policies before they are implemented;
- Predicts the health impacts of these proposals; and
- Recommends changes to maximise positive health impacts and minimise negative health impacts. (*Health Impact Assessment: A Practical Guide*)

About HIA Connect

HIA Connect was developed as part of the NSW HIA Project to support people to undertake HIAs. The site is maintained by the Centre for Health Equity Training, Research and Evaluation (CHETRE), part of the UNSW Research Centre for Primary Health Care and Equity at the University of New South Wales in Sydney, Australia.

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News

Can foreseeable consequences be unintended?

More news on HIA in New Zealand: Funding opportunities and evaluation survey

US EPA Graduate Fellowships, including HIA

European Health Forum, Gastein

News on Health Impact Assessment in New Zealand

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More Info

For more information on the list go to
<http://bit.ly/Es5Pu>

Second Asia Pacific HIA Conference in Thailand

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The HIA2008 Second Asia Pacific Health Impact Assessment Conference was held in Chiang Mai, Thailand in April. The conference has more than 180 participants from 16 countries.

Highlights from the conference included the development of the *Chiang Mai Declaration on Health Impact Assessment for the Development of Healthy Societies in the Asia Pacific Region* and the “at scene conference”, where participants visited projects or sites to understand the health impacts of development.

The Declaration sets out principles for HIA’s use in the Asia Pacific region and seeks to promote its use through the Association of South East Asian

Nations (ASEAN) and international development and financial agencies.

The “at scene conference” included visits to water resource management, urban development, industrial development, agricultural development and informal work sector sites.

The National Health Commission of Thailand hosted the successful event, along with eleven other organisations who sponsored the conference.

CHETRE contributed to the conference by organising a training workshop on “Linking HIA to the work of the local government in the

Asia Pacific Region”, run by Patrick Harris and Lynn Kemp. Patrick Harris also gave a plenary address on equity and HIA.

Numerous resources from the conference are available on the website, including video files and presentations - <http://bit.ly/u88fw>



Photos from the HIA2008 2nd Asia Pacific HIA Conference including the “At Scene Conference”

Photo: HIA2008 Conference

Second New Zealand HIA Practitioner Workshop

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The second New Zealand HIA practitioner workshop was held in Auckland in March and focused on the issue of evaluating HIA.

CHETRE conducted a groupwork session on evaluating HIA, drawing on a real case from New South Wales.

Information on the workshop is available at <http://bit.ly/gJfCo>



Workshop participants



Adrian Field from Synergia and Matt Soeberg from the Ministry of Health HIA Support Unit

HIA Practice Standards Issued by North American Group

Marla Orenstein on behalf of the North American HIA Practice Standards Working Group
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A working group established at the first North American Conference on Health Impact Assessment held September 2008 in Oakland, California, has issued a first version of practice guidelines, entitled Practice Standards for Health Impact Assessment (HIA). This was a collective endeavor under the leadership of the San Francisco Department of Public Health.

At the Conference (See the story in the IAIA Newsletter from January 2009), there was significant discussion around the issues of quality, standards and values in the conduct of HIA. Participants strongly felt the need for standards or benchmarks to clearly establish HIA quality. Without practice standards, it was felt the term HIA may become ambiguous and the practice misused or vulnerable to criticism.

The document is short—11 pages in total—and attempts to translate the values underlying HIA into specific "standards for practice" for each of the five typical stages of the HIA process.

These standards may be used by practitioners as benchmarks for their own HIA practice or to stimulate discussion about HIA content and quality in this emerging field.

Many of the organizations involved in the Conference have signed on as signatories, including the University of California Health Impact Group, Human Impact Partners, Habitat Health Impact Consulting, Environment Resources Management, and the San Francisco Department of Public Health, as well as a number of individual participants listed in the document.

The authors and signatories do not claim to have achieved all of these standards in our work to date. We recognize that real-world constraints will result in diversity of HIA practice. Overall, we hope these standards will be viewed as relevant, instructive and motivating for advancing HIA quality rather than rigorous criteria for acceptable or adequate HIA.

We also hope this document may provoke discussion on whether international practice standards for HIA are needed. Comments and suggestions for future versions of the Practice Standards are welcome.



Download the document from
<http://bit.ly/SvPMc>

Forthcoming WHO Guide on Health in Development Lending

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Large-scale development projects can have significant impacts on public health, safety and community well-being. Within the last three years, several banks, including the International Finance Corporation, the European Bank for Reconstruction and Development, and Equator Principle Banks, have explicitly integrated community health and safety requirements into their lending criteria. The implementation of this requirement provides a major opportunity for the development finance sector to promote measures that favour health and reduce vulnerability.

WHO is preparing guidance for development lending institutions on how to integrate public health and safety considerations into bank lending policies and practices. This guidance is being prepared in response to a request for technical advice from some of the development banks who were either considering or implementing new lending criteria that made explicit reference to community health, safety and security issues.

The WHO guide *Health in Development Lending* has been reviewed by impact assessment practitioners and development banks specialists and should be finalised by the end of 2009.

As a follow-up to this initiative, WHO and some of the development banks are discussing the possibility of convening a theme forum on health and development lending at the forthcoming IAIA Conference which will be held in Geneva in April 2010. Key aims of this forum will be to bring together IFIs, WHO and impact assessment practitioners to share experiences with community health/health impact assessment in the context of development investment projects, identify good practice examples, and highlight key areas for future action.

University of New South Wales HIA Publications

Journal Articles

Harris PJ, Harris E, Thompson S, Harris-Roxas B, Kemp L. *Human health and wellbeing in environmental impact assessment in New South Wales, Australia: Auditing health impacts within environmental assessments of major projects*. Environmental Impact Assessment Review, 29(5):310-318, 2009. <http://dx.doi.org/10.1016/j.eiar.2009.02.002>

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<http://www.biomedcentral.com/1471-2458/9/97> (with Christchurch DHB)

Evidence Summaries

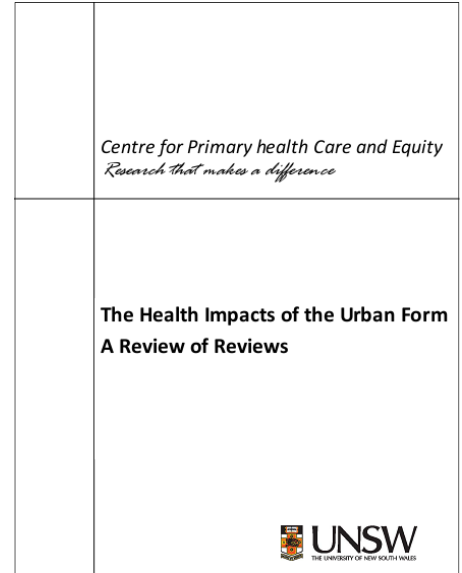
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Learning by Doing HIA Training Packages

3 Day HIA Training

CHETRE offers tailored training and support packages to organisations in Australia and overseas. Our experience has shown that the most effective way to build capacity to under HIAs is not to simply train people but to support them to conduct HIAs as well.

Learning by doing support includes training, helpdesk support by email and telephone for practical and technical advice, site visits and identifying avenues for dissemination.

To find out more please contact b.harris-roxas@unsw.edu.au

3 Day HIA Training

Week of 15-19 February 2010 (TBA), Sydney

CHETRE will also hold a three day HIA training workshop in Sydney in February 2010, bringing together HIA practitioners and Master of Public Health students.

Information about the course and instructions on how to register will be circulated closer to the date.



Learning by Doing Training

What's New? Publications and Events

Journal Articles

Brønnum-Hansen H. *Quantitative health impact assessment modelling*, Scandinavian Journal of Public Health, 37(5): 447-449, 2009. <http://dx.doi.org/10.1177/1403494809340387>

Collins J, Koplan J. *Health impact assessment: A step toward health in all policies*, JAMA - Journal of the American Medical Association, 302(3): 315-317, 2009. <http://jama.ama-assn.org/cgi/content/full/302/3/315>

Geurs KT, Boon W, Van Wee B. *Social Impacts of Transport: Literature Review and the State of the Practice of Transport Appraisal in the Netherlands and the United Kingdom*, Transport Reviews, 29(1): 69-90, 2009. <http://dx.doi.org/10.1080/01441640802130490>

Metcalfe O, Higgins C. *Healthy Public Policy: Is health impact assessment the cornerstone?*, Public Health, 123(4): 296-301, 2009. <http://dx.doi.org/10.1016/j.puhe.2009.03.009>

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Smolders R, Schramm K, Stenius U, et al. *A review on the practical application of human biomonitoring in integrated environmental health impact assessment*, Journal of Toxicology and Environmental Health - Part B: Critical Reviews, 12(2): 107-123. <http://dx.doi.org/10.1080/15287390802706397>

Upcoming Conferences

IAIA Ireland & UK Branch Conference on Climate Change Adaptation Strategies and their integration into Impact Assessments
8 October 2009, Exeter, UK
<http://bit.ly/31aZzC>

HIA'09 *On the Move* 10th International HIA Conference
14-16 October 2009, Rotterdam, The Netherlands
<http://www.hia09.nl>

IAIA10 *Transitioning to the Green Economy* 30th Annual Meeting of the International Association for Impact Assessment
6-11 April 2010, Geneva, Switzerland
<http://www.iaia.org/iaia10>

20th International Union for Health Promotion and Education Conference
11-15 July 2010, Geneva, Switzerland
<http://www.iuhpeconference.net>



Clickable links!

UNSW HIA eNews

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