

CDPAC Position Statement

Health Impact Assessment (HIA)



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Background:

Many decisions made by government have the potential to affect the health of the population broadly or segments of the population more specifically – in some cases there are clear winners and losers.

Health Impact Assessment (HIA)^a is a process designed to inform decision-makers about the potential positive and negative health implications of a given policy, program, project or initiative. This allows decision-makers to weigh the health consequences in their deliberations and make changes that will ultimately enhance health or mitigate potentially negative health outcomes.¹ Evaluations of HIA as a tool have shown that it can be effective at providing decision-makers with a process to make more informed decisions.² As CDPAC's primary interest is in chronic disease prevention, we promote the application of HIA to assess the impact that government policies and programs have on the factors that impact the prevalence of chronic disease at both an individual and population level.

In Canada, about two thirds of total deaths are due to chronic diseases³. The onset of many chronic diseases can be delayed or prevented by addressing factors that increase one's risk. A number of these factors are common to several chronic diseases. In addition to lifestyle behaviours related to diet, physical activity, tobacco and alcohol, there is also strong evidence that social and economic conditions exert a strong influence on the prevalence of many chronic diseases.⁴ These include housing, education, employment, income, early childhood development, transportation and the built environments of communities, collectively known as the social determinants of health.⁵ Recognizing that many of the risk factors that contribute to the chronic disease burden lay outside the health sector, CDPAC is a proponent of a 'Health in all Policies' approach. HIAs are an important tool for operationalizing a Health in All Policies approach which strives "to integrate considerations of health, well-being and equity during the development, implementation and evaluation of policies and services."⁶

The HIA is a flexible tool as it is based on a set of questions. The approaches used to answer these questions can be scaled to fit the complexity of health considerations and the scope and timelines of the policy, program, project or initiative. While HIA can be iterative (e.g., the appraisal may uncover evidence that justifies adjusting the scope), the HIA process is typically divided into five distinct steps:

- 1) *Screening* is a quick set of questions that will determine whether the initiative in question requires an HIA and if so, with what scope and degree of rigour.
- 2) *Scoping* is an exercise to establish a steering committee and determine the Terms of Reference for the HIA including the budget, project management, existing sources of data, the extent of community engagement and whether external experts or additional research will be required.
- 3) *Appraisal* is the step in which all the evidence from the literature, other data sources and consultations are synthesized and assessed.
- 4) *Reporting* should include the analysis of the evidence as well as strategic and feasible recommendations for mitigating negative health impacts or improving positive health impacts as well as a summary of the process.
- 5) *Monitoring and Evaluation* are important for determining the success of the HIA as an intervention to reduce negative health impacts but also for how lessons can be applied and what further actions may need to happen as the project, policy or program evolves.

^a Some make a distinction between HIAs and Health *Equity* Impact Assessments (HEIA), also called Equity Focused Health Impact Assessment (EFHIA) or Health Impact Assessment with an Equity Focus^a. A European Union review on health inequalities and HIAs found that "good HIAs should consider equity within them... rather than being something different or separate. ... [; it is] recommended that there was no need for a new methodology, just a need to strengthen existing HIA process."^a Given the established impacts of socio-economic determinants in creating disparities in health, for the purposes of this paper we will simply use the term health impact assessment.

HIA is increasingly used as a tool for examining the potential health impacts of policies and projects in jurisdictions around the world as governments look for ways to improve population health outcomes and control healthcare costs. While the extent of HIA institutionalization varies, it can be found at the municipal, regional, state/provincial and federal levels of government in countries across Europe, such as Finland, Sweden, the Netherlands, Italy, Portugal, Latvia and the United Kingdom; in Australia and New Zealand, Thailand, Laos and the USA.

Across Canada, the use of HIAs varies among the provinces and territories. In some cases it is used as a screening tool for all public policies, in others only to assess special projects or in specific sectors, and in some cases it is not used at all. While many Canadian jurisdictions consider health impact and health equity impact in decision-making processes, Quebec is considered to be the province in which the HIA is most integrated and formalized. Overall across Canada, however, the use of HIAs remains inconsistent and tends to be voluntary.

Rationale:

CDPAC is confident that a coordinated HIA framework and process would assist governments in making decisions that promote the health and well-being of Canadians and help reduce the chronic disease burden in Canada. HIA allows for more consistent and coherent policy making processes by providing evidence-based health information and projections. Evaluations of health impact assessment as a tool have shown that they can be effective at providing decision-makers with material to make more informed decisions.⁷

CDPAC believes that:

- Health outcomes and specific chronic disease risk factors can be influenced greatly by a given policy, program, project or initiative across a variety of sectors.
- Changing the social, economic and environmental conditions that create health inequities^b requires that governments identify and address policy gaps within and outside of the health sector.
- HIA is an effective tool for providing decision-makers with information about the unintended consequences of a given policy, program, project or initiative that may negatively impact health and chronic disease.
- There is an opportunity to improve health and reduce the prevalence of chronic diseases by using HIA more often and more consistently throughout Canada.

^b The WHO defines health inequities as “systematic differences in the health status of different population groups.” Widely cited on the topic is Whitehead’s 1992 paper, *The concepts and principles of equity in health*, which defined health inequities as “differences in health that are unnecessary, avoidable, unfair and unjust.”

Recommendations:

Given the potential for Health Impact Assessment processes to both mitigate negative health effects and improve health outcomes, CDPAC supports the following:

1) That the Government of Canada develop a standard Health Impact Assessment process to be applied to all policy proposal submissions sent to Cabinet.

- The federal government has an essential role to play in shaping the health of all Canadians. Beyond Health Canada and the health-care system, the federal government has jurisdiction and influence over many of the socio-economic factors that impact health outcomes, including chronic disease.
- HIAs can enhance decision-making at the national level by determining the effect of potential policies on the health of Canadians. An HIA process can identify what actions can be taken to protect citizens from negative health effects and how potentially beneficial health outcomes could be distributed as widely and as equitably as possible.

2) That standardized criteria be developed to determine a threshold - in terms of size, scope or budget – for which federal projects, programs or initiatives would undergo an HIA screening process.

- Federal decision-makers would be well served by standardized criteria which would include assessments of the potential health impacts of projects, initiatives or programs prior to their implementation.
- Application of a consistent and clear set of criteria to trigger a full HIA across all government departments and agencies would add to the transparency and efficiency of the decision-making process.
- HIA screening should be applied to all policies, laws, public program and service delivery decisions at the federal level, including decisions to create, modify and eliminate or fund programs. The assessments should evaluate the potential impact decisions may have on the socio-economic and environmental determinants of health, as well as the impact to health directly.

3) That the Government of Canada utilize the Public Health Agency of Canada's National Collaborating Centre for Healthy Public Policy (NCCHPP) as a Health Impact Assessment Support Unit.

- Provided with adequate funding, the NCCHPP has the in-house expertise and could start to build capacity to support Federal departments and agencies conducting HIAs, if given the mandate.

4) That the Government of Canada work with Canada's Provincial and /Territorial Premiers and Ministers of Health/Health Promotion/Healthy Living to establish a standard framework for conducting Health Impact Assessments.

- There is a need for a coordinated approach across the F/P/T continuum and the Government of Canada is best suited to take a leadership role.
- A consistent approach to HIA across provinces and territories would promote greater access to health promoting factors and health protection while mitigating potentially negative health outcomes, contributing to the prevention of chronic disease.

1 WHO European Centre for Health Policy. (1999). *Health Impact Assessment: Main concepts and suggested approach. The Gothenburg Consensus*. Brussels: WHO Regional Office for Europe.

2 World Health Organization *The Effectiveness of Health Impact Assessments: The Scope and Limitations of Supporting Decision-making in Europe*. (2007)

http://www.euro.who.int/__data/assets/pdf_file/0003/98283/E90794.pdf Accessed 12-07-11

³ Public Health Agency of Canada. *Background: United Nations NCD Summit* (2011) http://www.phac-aspc.gc.ca/media/nr-rp/2011/2011_0919-bg-di-eng.php

4 Public Health Agency of Canada. *The Chief Public Health Officer's Report on the State of Public Health in Canada Addressing Health Inequalities* (2008) <http://www.phac-aspc.gc.ca/cphorsphc-respcacsp/2008/fr-rc/pdf/CPHO-Report-e.pdf>

⁵ World Health Organization. *Closing the gap in a generation: health equity through action on the social determinants of health. Final Report of the Commission on Social Determinants of Health*. Geneva, CSDH (2008).

6 *Adelaide Statement on Health in All Policies*. WHO, Government of South Australia, Adelaide 2010.

7 World Health Organization *The Effectiveness of Health Impact Assessments: The Scope and Limitations of Supporting Decision-making in Europe* (2007)

http://www.euro.who.int/__data/assets/pdf_file/0003/98283/E90794.pdf Accessed 12-07-11