# HEALTH IMPACT ASSESSMENT A CONSOLIDATED WORKSHOP REPORT Executive Summary

By

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For

Federal, Provincial, Territorial Committee on Environmental and Occupational Health

# **EXECUTIVE SUMMARY**

This report provides a short overview of comments made by participants at five regional multistakeholder workshops held between April and June, 2000 regarding the Federal, Provincial Territorial Committee's *Canadian Handbook on Health Impact Assessment*. Full details of each workshop, as well as a detailed consolidated workshop report are available as PDF files at <a href="http://www.hc-sc.gc.ca/oeha">http://www.hc-sc.gc.ca/oeha</a> (for english) and <a href="http://www.hc-sc.gc.ca/behm">http://www.hc-sc.gc.ca/behm</a> (for french). Recognizing that this report might be of interest to stakeholders who did not participate in the workshops, a brief contextual background is provided.

#### BACKGROUND

In 1992, the Federal, Provincial, Territorial Committee on Environmental and Occupational Health established a Task Force on Health Impact Assessment. The mandate of the Task Force was:

- S to provide advice, share information and foster communication among federal, provincial and territorial agencies, industry, universities and consultants on Health Impact Assessment (HIA);
- **S** to improve awareness of the linkages among environmental, socio-economic, cultural and human health effects;
- **S** to encourage coordination and harmonization of approaches to HIA; and,
- **\$** to carry-out workshops to address specific information exchange needs on HIA.

The Task Force started its work by preparing a discussion paper entitled: *The National Health Guide for Environmental Assessment: A Discussion Paper*. The two main objectives of the discussion paper were: to encourage and provide advice on the incorporation of health in environmental assessment; and, to promote national consistency in how health is included in environmental assessment, while recognizing the diversity of Canadian environmental assessment legislation and regional differences.

After the preparation of the discussion paper the Task Force on HIA organized a series of six multi-sectoral regional workshops between the fall of 1995 and the spring of 1996. Copies of the Task Force's discussion paper were distributed to all participants in advance, together with a pre-workshop background paper and a questionnaire.

The objectives of workshops were:

**S** to consider the approaches, procedures and methods used to incorporate health into

Environmental Impact Assessment (EIA);

- S to examine the factors that facilitate the integration of health into EIA; and,
- **S** to identify current priorities and emerging needs to further clarify the role of health professionals in EIA.

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Following all six workshops in June 1996, a draft guide entitled: A Canadian Health Impact Assessment Guide Volume 1: The Beginner's Guide was prepared, as well as The Role of Health Professionals in Environmental Assessment - Consolidated Workshop Proceedings.

There was a consensus at all of the workshops during 1995 and 1996, that guidance material on Health Impact Assessment (HIA) within Environmental Impact Assessment (EIA) was needed in Canada and that it should include advice on assessing effects on socio-cultural health, occupational health and physical health.

It was decided that a Handbook would meet these requirements and hence a Canadian Handbook on Health Impact Assessment was prepared in 3 volumes. Volume 1 subtitled: The Basics, provides a review of existing practice in HIA/EIA and proposes a common vision based on health determinants including its psycho-social aspects. Volume 1, is a rewrite of A Canadian Health Impact Assessment Guide Volume 1: The Beginner's Guide which underwent extensive multistakeholder consultation. Volume 2, entitled: Decision Making in Environmental Health Impact Assessment uses the framework of sustainable development for the integration of public health into environmental assessment. The framework encourages public health authorities to provide their views on: the likelihood that contaminants or hazards may have an impact on health and quality of life; the foreseeable equity in the distribution of risks, disadvantages and benefits; and the impact on the preservation of life-sustaining ecosystems and the services these ecosystems provide. Volume 2 also provides a review of frequent problems, cases and situations in HIA practice; and commonly-used criteria and risk levels to guide the practitioners in determining the social acceptability of any intervention/mitigation proposed. Volume 3 of the Handbook, entitled: Roles for the Health Practitioner provides a systematic review of the major disciplines or tools frequently involved and useful in HIA, such as epidemiology, toxicology, social impact assessment, health economics and risk assessment.

All 3 volumes of the *Canadian Handbook on Health Impact Assessment* are available at the Office of Environmental Health Assessment, Health Canada website: <a href="http://www.hc-sc.gc.ca/oeha/">http://www.hc-sc.gc.ca/oeha/</a> (English), <a href="http://www.hc-sc.gc.ca/oeha/">http://www.hc-sc.gc.ca/oeha/</a> (French).

## PRESENT STATUS

The objective of the *Canadian Handbook on Health Impact Assessment* is to assist health professionals, with little or no knowledge in environmental assessment in providing health advice within

the EIA process. It is also a useful tool to environmental assessment practitioners and project proponents, who are not experts in health in understanding the role health professionals could play in an EIA process. The goal behind the whole process is to bring the health sector as a full participant to the EIA process, as is already the case in some provinces like Quebec and British Columbia.

The preparation of the Handbook was completed in December 1999 and posted on the Office of Environmental Health Assessment Website to facilitate stakeholder review.

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A workshop for federal departments was held in Ottawa (April 11) and five multistakeholder workshops were held in Vancouver (May 10), Regina (May 30), Québec City (June 5), Halifax (June8) and Toronto (June 13).

## Workshop Objectives:

- **S** to gather information on the users' likes, dislikes and desires for further improvement of the Handbook:
- S to gather constructive comments on how to make the Handbook a better resource in supporting the integration of Health Impact Assessment (HIA) into Environmental Impact Assessment (EIA); and,
- **S** to inform participants of the status of the initiative to produce a Canadian Handbook on health impact assessment and next steps to be taken to finalize the Handbook.

An additional objective for the workship in Ottawa was:

S to find out whether or not the Handbook assists federal departments in their application of Canadian Environmental Assessment Act (CEAA), since the workshop in Ottawa was restricted to federal departments.

#### Workshop Agenda

The day-long workshops followed a basic format. Modifications were made as needed to suit the group size and representation. Main items of the agenda for each workshop were:

- **S** Welcome and Introductions
- **S** Workshop Objectives and Participants Expectations
- Setting the Scene: background information, outlining the determinants of health, overview of volumes 1, 2 and 3 and points of clarification as required by participants
- Morning Working Session: gathering comments on the effectiveness of the Handbook (focusing on volumes 2 and 3) in general by means of the following questions:
  - **S** What do you like about the Handbook and why?
  - **S** What do you dislike about Handbook and why?

- **S** How would you improve the Handbook
- **S** Reports Back in Plenary
- Afternoon Work Session: analysis of sectors available in the Volume-2, Appendix-1 (eg. Agriculture, Forestry, Mining, Energy, Transportation, Communication, Waste Management, Waste Disposal, Sewage, Sludge Management and Manufacturing). For each sector, the analysis was to answer the question: Does the information provided facilitate the integration of health considerations into the environmental assessment of a development proposal?
- **S** Reports Back in Plenary
- S Next Steps and Workshop Evaluation

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## PARTICIPANTS' COMMENTS - EXPECTATIONS, LIKES, DISLIKES

# Participants Expectations:

The most common expectation was: to understand HIA and how to do HIA; how to integrate HIA within EIA, and how to integrate sectoral issues into HIA. Other less common expectations included expectations such as: how to implement an HIA process within the EIA process; to find out more on HIA activities internationally; or to learn First Nations role in HIA/EIA process.

# Aspects of the Handbook Liked by Workshop Participants:

Specific comments included: provides concise and well thought out direction and guidance to help those who have to work in this arena to do their jobs; subject matters are clearly communicated; comprehensive; charts and tables integrate the information well; sectoral approach and case studies are very useful; good reference sources provided; and, easy to read - content is concise and jargon free.

#### Aspects of the Handbook Not Liked by Workshop Participants:

The most common stated dislikes of handbook were: inadequate information on target audience; no clear process for doing HIA presented in the Handbook; and, inadequate information in the handbook on sectors and examples. Other aspects of handbook disliked by participants include: lack of information on establishing the need for health impact assessment; lack of mitigation information; lack of information on cost estimates and human resource needs to do HIA; lack of information on linkages of HIA with legislation and regulations; inadequate information in the handbook on data sources and data needs; and, lack of information on community involvement / public involvement.

#### SUGGESTIONS MADE BY PARTICIPANTS FOR THE IMPROVEMENT OF HANDBOOK

## 1) Target Audience:

Need to expand the target audience to include EIA practitioners. Provide a definition for the Target Audience in the handbook and provide information to identify the clientele targeted by the handbook; perhaps identify target audience at the beginning of each volume.

#### 2) Handbook Format:

As there is a need for different volumes for the Handbook, reorganizing the volumes based on identified target audiences. Provide definitions of different terms used in the Handbook and provide a more detailed Table of Contents. Improve the presentation of tables, figures and charts. There is a need for a summary guide (A Quick Reference Guide), matching titles and contents in the different chapters/volumes of the Handbook. Facilitate the downloading of the

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Handbook by placing the individual chapters on the website (as PDF files) as well as each volume.

## 3) Establish a Clear Detailed Process for Incorporation of HIA within EIA:

Clearly link HIA to EIA process and provide a tool box for health professionals and guidance on when HIA should be done and when it should not. There is a need for operational information in the handbook and for a decision tree diagram. Provide a process to use determinants of health and incorporate a clear assessment framework for HIA. Provide a checklist for do s & don't's. Incorporate a road map to identify issues / expertise and the process to link HIA with EIA. The handbook should provide information on how to monitor and evaluate HIA process.

## 4) Public Involvement/Community Involvement Guidelines:

Need information on where does community fit into the HIA process and provide pathways for communications with communities. Need for information on how governments can learn from communities (particularly Aboriginal communities); incorporate information on how to carry-out public consultation; and, provide information on how to incorporate all sectors of the public including those without a voice who fall through the cracks. Need for information on how to get cooperation from all sectors of the public agencies and governments at different levels; and, the necessity provide a general model for public participation in the handbook.

#### 5) Strategic Health Impact Assessment:

Provide a process for the integration of HIA within the development of policies and programs.

#### 6) Training:

Recognizing the need to involve a variety of health and non-health professionals in the determinants of

health model, there is a need for information on the roles and responsibilities of health professionals/health authorities. Training courses for health professionals should include information on who starts the HIA process and who is responsible for what? when? and how?

## 7) Cost Analysis Information:

Must provide information on the need for cost effectiveness. Provide information on the cost of implementation and add details in the Handbook on time and resources needed to carry-out health impact assessment along with the availability of such resources.

## 8) Mitigation Information:

Need more information on mitigation aspects and how to incorporate HIA Follow-up Procedures to minimize the negative effects of projects/programs on human health.

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## 9) Database for Health Impact Assessment:

Need to incorporate a detailed list of relevant data sources in the Handbook and make provisions to update information and references in an on-going basis (centralized database).

# 10) Sectoral presentations:

Provide more references for information on sectors and include information on collaborative works with other Departments. Add new sectors in the handbook, such as Nuclear Sector and provide more analysis of each sector by integrating Determinants of Health.

#### 11) Case Studies:

Need to provide more information for each case study within the sectoral presentations. Increase the number of case studies in all sectors (using examples from all parts of Canada). Need to adopt a consistent format for all case studies and incorporate information on follow-up monitoring and evaluation activities to improve HIA in EIA.

#### CONCLUSIONS AND NEXT STEPS

It is clear that participants liked many aspects of the Handbook and saw it as a major move forward in the development of guidance material for HIA within EIA. However, significantly more effort is needed to make the Handbook a useful tool for HIA and EIA practitioners.

Over the next six to ten months, the Office of Environmental Health Assessment will do a major rewrite of the Handbook and have it available for approval by the Federal, Provincial, Territorial Committee on Environmental and Occupational Health by the spring of 2001. Once approved for release, the Handbook will be placed on the Office web site in english at <a href="http://www.hc-sc.gc.ca/oeha/">http://www.hc-sc.gc.ca/oeha/</a> and in french at <a href="http://www.hc-sc.gc.ca/oeha/">http://www.hc-sc.gc.ca/oeha/</a> and in

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REFERENCE MATERIAL (available at <a href="http://www.hc-sc.gc.ca/oeha/">http://www.hc-sc.gc.ca/oeha/</a> - in English, and <a href="http://www.hc-sc.gc.behm/">http://www.hc-sc.gc.behm/</a> - in French)

A National Health Guide for Environmental Assessment: A Discussion Paper. June 1995

The Role of Health Professionals in Environmental Assessment Consolidated Workshop Proceedings. June 1996

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A Canadian Health Impact Assessment Guide Volume 1: The Beginner's Guide. May 1997. Environmental Assessment and Human Health: Perspectives, Approaches and Future Directions: A background report for the international study of the effectiveness of environmental assessment. May 1997.

A Canadian Handbook on Health Impact Assessment, Volume 1: The Basics. June 1999.

A Canadian Handbook on Health Impact Assessment, Volume 2: Decision Making in Environmental Impact Assessment. December, 1999.

A Canadian Handbook on Health Impact Assessment, Volume 3. Roles for the Health Practitioner. December 1999.

Health Impact Assessment: A consolidated workshop report. September 2000.