

# CONNECTICUT ACADEMY OF SCIENCE AND ENGINEERING

## Health Impact Assessments Study: KEY POINTS

### WHAT IS AN HIA?

Health Impact Assessments (HIAs) is a relatively new process in the US that is designed to ensure that often overlooked or unanticipated health impacts are considered in proposed policies, programs, projects or plans. **An HIA includes the following essential elements:**

- Informs decision making on a specific proposed action
- Should be conducted prospectively, i.e. in advance of a policy decision
- Engages stakeholders in the process
- Utilizes a systematic analytic process for assessment of potential health impacts
- Ensures that health disparities are considered in decision-making
- Emphasizes inter-agency collaboration
- Considers a broad view of health including the social determinants
- Offers strategies to mitigate negative health effects and maximize positive health effects
- Uses best available scientific evidence to inform the process
- Establishes baseline conditions for health, describing health outcomes, health determinants, affected populations, and vulnerable sub-populations

### STUDY PURPOSE

The purpose of this study is to provide the Connecticut General Assembly, state agencies, local health departments, regional health districts, and interested parties with information about HIAs for the purpose of assessing their value for use in Connecticut.

### METHODOLOGY

- Literature review
- Interviews with national experts, state leaders, and others
- Input from Connecticut Regional Planning Agencies (RPAs), Local Health Districts and Departments (LHDDs), and academia through a focus group session and survey
- Guest speaker and forum presentations to the CASE Study Committee

### BRIEF STATEMENT OF PRIMARY CONCLUSION

- Health considerations are often unintentionally overlooked in policy development and implementation in non-health sectors such as transportation, education, energy, housing, and labor.
- Taking health into consideration in the decision making process for policies, programs, projects and plans will make Connecticut a healthier place to live, promote a healthy workforce for its businesses, and potentially avert unnecessary health care costs in the future and contribute to disease prevention.
- HIAs use a flexible, yet systematic, analytical process to achieve these goals.
- HIAs provide the basis for making changes to ensure health is appropriately considered during the development of policies, program, projects, and plans, when applicable.
- The Connecticut Department of Public Health (DPH) should lead this effort by raising awareness of HIAs, creating demand for the appropriate use of HIAs, and promoting the need for capacity development within the state to effectively conduct and participate in HIAs.
- The end goal is not just to conduct HIAs, but to use HIAs as a catalyst for integrating public health into the decision making process throughout all sectors and levels of government.

### BACKGROUND

While one of the wealthiest countries in the world, the US ranks 32<sup>nd</sup> in life expectancy. The wealthiest state, Connecticut, has the fourth highest per capita healthcare spending rate in the country. Researchers have established that other factors, such as social conditions and environment, are responsible for a much greater proportion of poor health outcomes than previously realized.

# CONNECTICUT ACADEMY OF SCIENCE AND ENGINEERING

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- “Health in All Policies” refers to the practice of integrating the public’s health, well-being, and equity considerations into the development and implementation of policies in non-health sectors.
- The use of HIAs has emerged as a “critical tool” to assist decision-makers, particularly those in non-health sectors, with implementing a “Health in All Policies” approach and for the purpose of specifically providing guidance for evaluating the health impacts of proposed decisions.
- An HIA can be scaled to fit the available time and resources of a decision-making process.
- HIAs are a “pragmatic decision-support tool” that can be used in the real-world policy-making setting, providing timely information without delaying important decisions.

### **FINDINGS**

Presently the state’s approach is designed to react after decisions have been made rather than to proactively seek strategies to maximize health benefits and mitigate negative health effects.

In Connecticut, there is support for adding a broad health perspective into the decision making process for policies, programs, projects and plans in a broad array of non-health sectors.

**A successful HIA program needs the following elements to support the integration of public health into the decision making process:**

- An agency or agencies that would provide leadership and support for the use of HIAs.
- HIA programs for training, technical assistance, and mentoring for those that are interested in conducting HIAs.
- Creation of demand for HIAs by raising awareness and educating stakeholders and policymakers
- Integration of considering of health impacts into the culture of organizations and agencies that normally do not consider how their policies, programs, projects, and plans affect health.

The following resources in the areas of **capacity; funding; staff,** and **data** are needed to effectively conduct HIAs.

**Capacity**— Expertise to conduct HIAs, knowledge to manage and/or participate in the HIA process, ability to screen proposed decisions as to the appropriateness/need for conducting an HIA, and ability to conduct HIA training and to develop a network of mentors and technical advisors.

**Funding**— Ongoing state budget constraints create challenges for state agencies seeking to expand services, such as for funding HIA projects.

**Staff**— Variety of staff skill sets and levels of effort at the state, regional, and local agency levels depending on their involvement with the HIA process, including staff from the General Assembly’s Public Health Committee (PHC) and DPH, health and human service Agencies, RPAs and other agencies, and LHDDs.

**Data**— Sources to support the systemic analytic process. Some of the available data resources include: CT Association of Directors of Health (CADH) Health Equity Index; DPH Environmental Public Health Tracking (EPHT) data portal; Department of Social Services (DSS)/Medicaid Data.

Additional data support from appropriate state agencies may be necessary. Qualitative data can be used when quantitative data is not available.

### **Existing Mechanisms in the State and Limitations**

- Proposed legislation is currently reviewed by a variety of legislative committees, state agencies, and stakeholders for numerous reasons, including PHC and DPH. PHC and DPH screen proposed legislation that has the potential for direct health impacts
  - ▶ BUT do not necessarily screen proposed legislation for its broad effect on health.
- The National Environmental Policy Act (NEPA) and Connecticut Environmental Policy Act (CEPA) include protection of public health
  - ▶ BUT the Environmental Impact Statements (EISs) and Environmental Impact Evaluations (EIEs) based on these regulations only include a narrow view of health.
- There are 74 separate LHDDs covering the 169 towns in the state.

# CONNECTICUT ACADEMY OF SCIENCE AND ENGINEERING

## Health Impact Assessments Study: KEY POINTS

- ▶ BUT catchment areas for RPAs do not coincide with LHDD catchment areas; infrastructure is fragmented

### Perceptions/Realities

- There are misconceptions that HIAs will be used to inhibit implementation of “good” projects or the HIA process will become so burdensome that overall benefits will be negated.
- However, the findings regarding HIAs when used according to practice standards do not result in delaying or stopping projects.
  - The goal of an HIA is not to determine whether a proposed project is good or bad overall, nor whether or not a project should continue.
  - The focus of an HIA is on maximizing potential health benefits and mitigating potential risks, as needed, by making appropriate changes in the design or planning of a policies, programs, projects and plans.
- An unexpected finding of this study is overall support for incorporating health into decision making by state and regional/local agency leaders beyond just using HIAs. There is interest in changing the culture of agencies through staff training and by engaging public health professionals for the development policies, programs, projects, and plans.

### RECOMMENDATIONS

The CASE Study Committee recommends that HIAs be used in Connecticut, when appropriate. Appropriate use means:

- to apply this decision-support tool only when an HIA will add new information to a deliberation
- when the connections to health are not directly obvious
- when the assessment can be completed in a timely manner so that the recommendations can be integrated into the decision making process.

### Specific Recommendations

1. PHC and DPH should assume a leadership role, with the support of the governor’s office, in having health be a consideration in the decision-making process regarding policies, programs, projects, and plans.
2. Establish a multi-agency Health Review Team to develop and oversee utilization of a pre-screening protocol that outlines the appropriate use of HIAs at all levels and for all sectors that would benefit most from the process.
3. Develop pathways for considering health impacts in policies, programs, projects, and plans. When possible, HIAs should be incorporated into existing regulations, mechanisms, and processes. For example, the public health requirement of the EIE process should be broadened to include HIAs as a best practice to meet the requirements of health analysis in NEPA and CEPA. DPH should expand its involvement in the EIE process by not only commenting on health risks from water supply and specific contaminant issues, but also including a broader view of health impacts. This review should be conducted in consultation with DPH’s Environmental Health Section.
4. Develop capacity to carry out HIAs effectively by creating an HIA Resource Center comprising organizations willing to provide support and guidance for those interested in conducting HIAs.
5. Increase state HIA capacity by raising awareness for HIAs, creating demand for the appropriate use of HIAs in decision-making processes, and developing capacity to effectively carry out HIAs. Use of consultants to conduct and lead an HIA should be considered where staff resources and capacity to conduct HIAs is limited.
6. Training is necessary at the state, regional and local levels to create awareness of the HIA process and the ways in which it adds value for decision makers.
7. Initiate a demonstration HIA program (HIA Housing Program and HIA EIE Program) to strengthen the HIA infrastructure and determine the best sustainable approach for the use of HIAs in Connecticut
8. Develop a mechanism to ensure evaluation and monitoring of HIAs completed in the state. Evaluations should provide guidance for the improvement and implementation of an HIA program in