

HEALTH IMPACT ASSESSMENTS

STUDY BRIEFING

October 4, 2013

Study Committee

Kara Blankner, Manager, Health Impact Project, A Collaboration of the Robert Wood Johnson Foundation and The Pew Charitable Trusts

Suzanne Condon, Associate Commissioner and Director, Bureau of Environmental Health, Massachusetts Department of Public Health

Brenda P. DelGado, Executive Director, Central Area Health Education Center, Inc. (ret.)

Arthur DuBois, MD (*Academy Member*), Director Emeritus and Fellow Emeritus, John B. Pierce Laboratory, Inc.; Professor Emeritus of Epidemiology and Professor of Cellular and Molecular Physiology, Yale University School of Public Health

Gale Hoffnagle, CCM, QEP (*Academy Member*), Senior Vice President and Technical Director, TRC Environmental Corporation

Moira Lawson, PhD, MPH, Public Health Consultant; Member, Board of Directors, Connecticut Public Health Association

Bruce Liang, MD (*Academy Member*), Director, The Pat and Jim Calhoun Cardiovascular Center; Ray Neag Distinguished Professor of Cardiovascular Biology and Medicine, UConn Health Center

Tom Mahoney, MS, MPH, Director, Office of Special Clinical Services, Greenwich Department of Health

Laurie Stillman, MM, Chief Strategy Officer, Health Resources in Action

Jane Stahl, Consultant; Deputy Commissioner, Connecticut Department of Environmental Protection (ret.)



Study Research Team

➤ **Study Research Team**

- ✓ **David Pines, (Study Manager)**, Associate Professor
Civil, Environmental, and Biomedical Engineering,
University of Hartford
- ✓ **Colleen Ann O'Connor, MPH (Associate Study Manager)**
Special Assistant to the Health Director
New Haven Health Department

➤ **CASE Staff**

- ✓ **Richard Strauss**, Executive Director
- ✓ **Terri Clark**, Associate Director
- ✓ **Ann Bertini**, Assistant Director for Programs

Academy Member Reviewers

- **Sten Caspersson**, Consultant, Nuclear Power
- **Paul Skolnik**, Professor and Chairman of Medicine, UCONN Health Center

Study Background

This study was conducted on behalf of the General Assembly at the request of the Public Health Committee (PHC), with other committees of cognizance including:

- ✓ **Environment**
- ✓ **Human Services**
- ✓ **Planning and Development**
- ✓ **Transportation**

Study Background *(continued)*

Study Purpose

Provide the General Assembly, state agencies, local health departments, regional health districts, and interested parties with information about Health Impact Assessments (HIA) for the purpose of assessing their value for use in Connecticut

Study Approach

- **Literature review**
- **Interviews with national experts in the field, state leaders, and others**
- **Statewide survey and focus group session**
- **Guest speaker and forum presentations to the CASE Study Committee**
- **State agencies informed included: CT Agricultural Experiment Station, CSDE, DEEP, DPH, DPW, and DSS, and ConnDOT**

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SAMPLE GUEST SPEAKER PRESENTATIONS

- **Health Impact Assessments: The Massachusetts Experience**
Suzanne K. Condon, *Study Committee Member*, Associate Commissioner; Director, Bureau of Environmental Health, Massachusetts Department of Public Health
- **Health Impact Assessment - A Survey of the Diverse Applications of the Tool**
Kara Blanker, *Study Committee Member*, Project Manager, Health Impact Project, The Pew Charitable Trusts
- **National Association for State Community Services Weatherization Plus Health HIA**

Brief Statement of Primary Conclusion

- **Health considerations are often unintentionally overlooked in the development and implementation of policies 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. Additionally, HIAs provide the basis for making changes to ensure health is appropriately considered during the development of policies, programs, projects, and plans, when applicable**

Brief Statement of Primary Conclusion *(continued)*

- **DPH should lead this effort by**
 - **Raising awareness of HIAs**
 - **Creating demand for the appropriate use of HIAs**
 - **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

- **US is one of the wealthiest countries in the world YET**
 - Ranks 32nd in life expectancy
 - About half of adults live with chronic illness
 - Two-thirds of adults are overweight or obese
- **Connecticut is the wealthiest state in the US**
 - 4th highest per capita healthcare spending rate
 - Estimated that chronic conditions account for 75% of the healthcare costs

Background (*continued*)

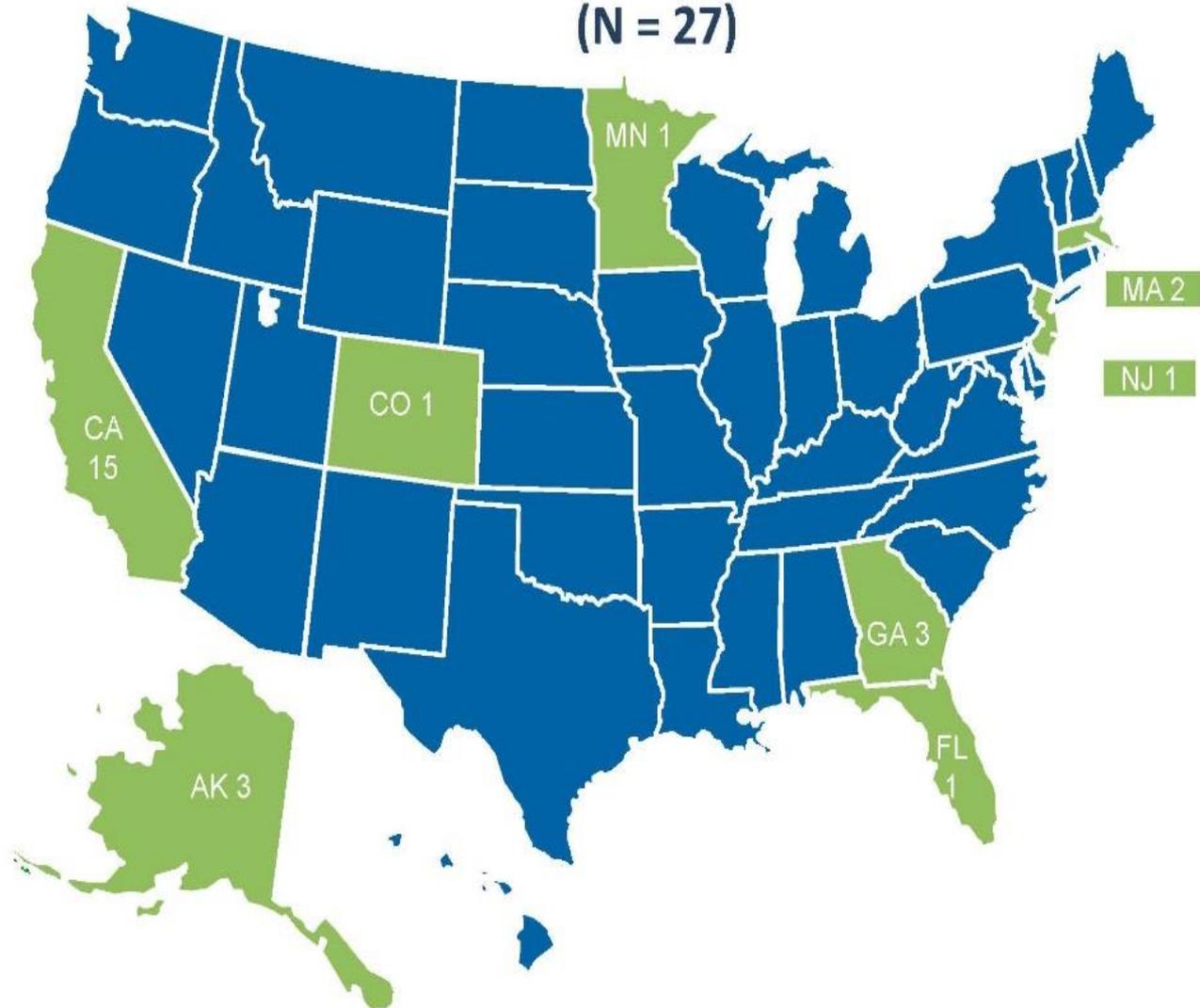
- **Solutions to Connecticut's health challenges involve more than simply improving the healthcare system**
- **Researchers have established that other factors such as social conditions and environment are responsible for a much greater proportion of poor health outcomes than previously realized**
- **Proactive approach to healthcare based on a broader vision of health that includes these factors could result in significant reductions in the need for particular kinds of healthcare**

Health in All Policies

- **“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 such as transportation, energy, housing and labor**
 - Full spectrum of health considerations are often unintentionally overlooked
 - Omission can lead to policies that are unnecessarily harmful to people, and costly to society
- **HIAs have emerged as a “critical tool” to assist decision-makers, particularly those in non-health sectors**

Completed HIAs 2007

(N = 27)

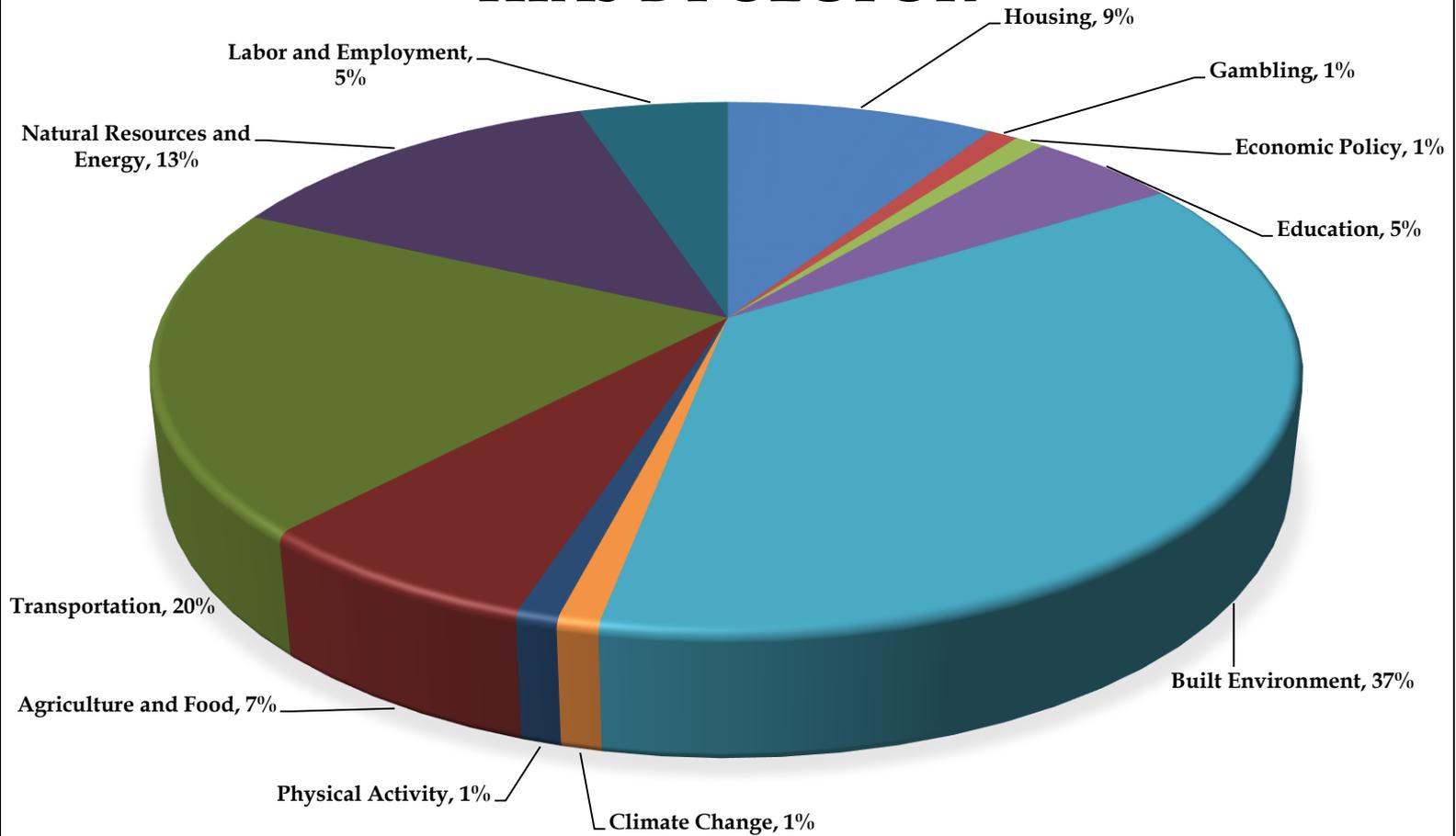


(Source: Aaron Wernham, MD, MS, Director, The Health Impact Project, The Pew Charitable Trusts; Presentation to CASE Study Committee, 11/15/12)

Health Impact Assessments (HIAs)

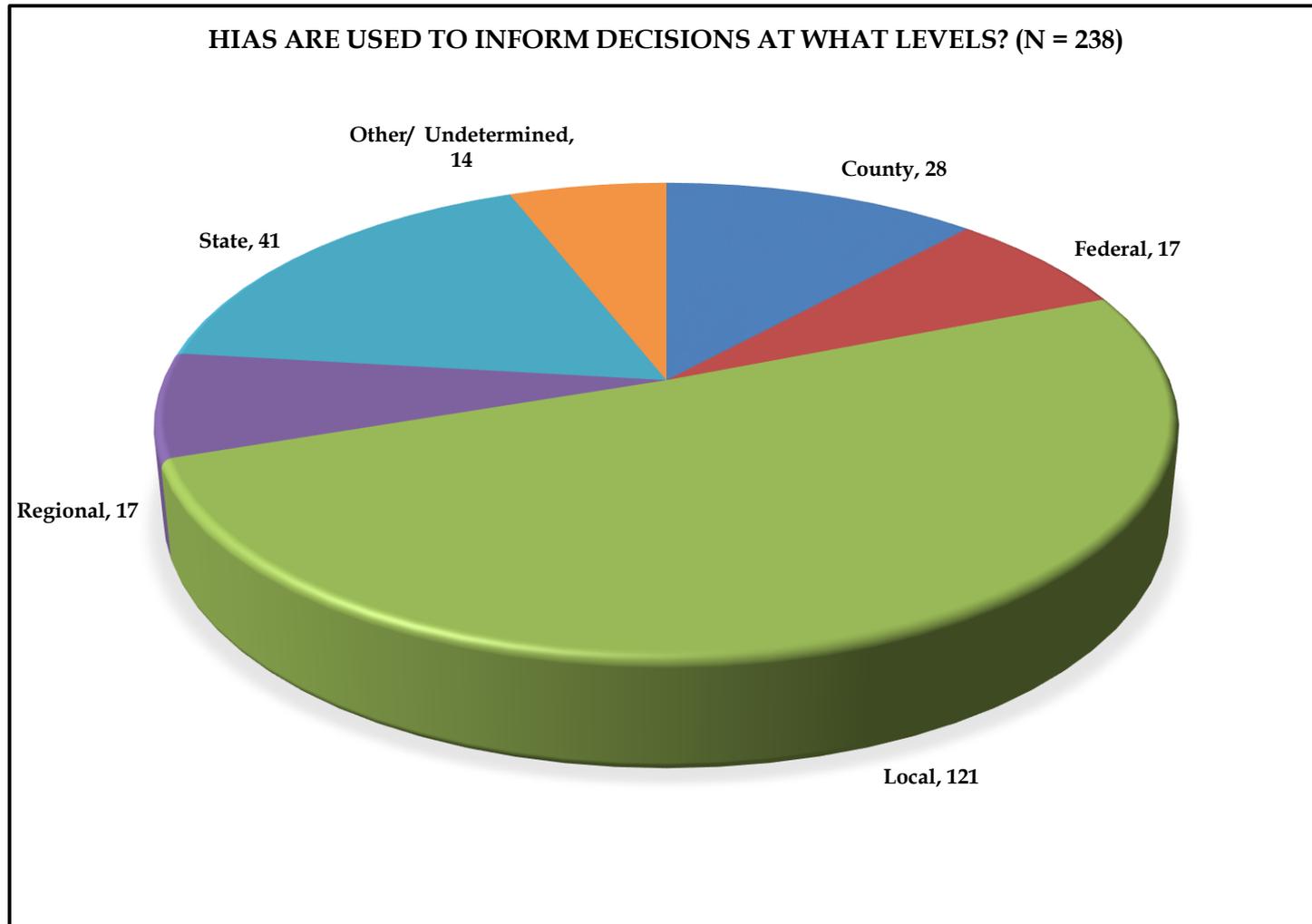
- **HIAs can be used to support a variety of decisions**
 - **Policy Decisions: proposed bills, local school boards**
 - **Policy Implementation**
 - **Project Specific: siting, design, construction**
 - **Comprehensive Plans: regional plans, master planning documents**

HIA_s BY SECTOR



(Source: Aaron Wernham, MD, MS, Director, The Health Impact Project, The Pew Charitable Trusts; Presentation to CASE Study Committee, 11/15/12)

HIA Decision Levels in the United States



(Source: Kara Blanker, MPH, Project Manager, The Health Impact Project, The Pew Charitable Trusts; Presentation to CASE Study Committee, 1/25/13 [updated 4/22/13], "Health Impact Assessment --A survey of the diverse applications of the tool")

Elements of an HIA

- **Informs decision making on a specific proposed action**
- **Engages stakeholders**
- **Utilizes systematic analytical process for assessment of potential health impacts**
- **Ensures that health disparities are considered**
- **Emphasizes inter-agency collaboration**
- **Considers broad view of health including social determinants**
- **Offers strategies to mitigate negative health effects and maximize positive health effects**
- **Uses best available scientific evidence**
- **Establishes baseline conditions for health**

Health Impact Assessment Process

➤ Screening

- Presents preliminary opinion on importance of proposal for health and the opportunities for an HIA to inform the decision
- Outlines expected resource requirements to conduct an HIA
- Provides recommendation on whether an HIA is warranted

➤ Scoping

- Summarizes pathways and health effects to be addressed
- Identifies affected populations and vulnerable groups
- Describes research questions, data sources, analytical plan, and how data gaps will be addressed
- Summarizes stakeholder engagement

Health Impact Assessment Process (*continued*)

➤ Assessment

- Describes baseline health status of affected populations
- Analyzes and characterizes beneficial and adverse health effects of the proposal and each alternative
- Describes data sources and analytical methods used
- Documents stakeholder engagement and integrates input into analyses
- Identifies clearly limitations and uncertainties of the analyses

➤ Recommendations

- Identifies alternatives to proposal or action that could be taken to avoid, minimize, or mitigate adverse effects and to optimize beneficial ones
- Proposes a health-management plan to identify stakeholders who could implement recommendations

Health Impact Assessment Process (*continued*)

➤ Reporting

- Provides clear documentation of the proposal analyzed, population affected, stakeholder engagement, data sources & analytical methods used, findings & recommendations
- Communicates findings and recommendations to decision-makers, the public, and other stakeholders in a form that can be integrated with other decision-making factors

➤ Monitoring and Evaluation

- Tracks changes in health indicators or implementation of HIA recommendations
- Evaluates whether the HIA was conducted according to its plan, whether the HIA influenced the decision-making process, and whether implementation of the proposal changed health indicators (*when practical*)

HIA Implementation Strategies

- **Required by Legislation:** Massachusetts: Transportation Reform Legislation, 2009
- **Best Practices — but not Required by State Law:** Incorporating HIA into NEPA Environmental Impact Assessment Process – Alaska’s Health Impact Assessment Program
- **Grassroots Efforts:** Oregon HIA Network – Statewide Collaborative Effort

Examples of HIAs Conducted in the US

- **Jack London Senior Housing, Oakland, CA**
- **School Education Integration, St. Paul, MN**
- **Advanced Metering Infrastructure, Chicago, IL**

Connecticut Health Impact Assessments

- **A Rapid Health Impact Assessment of the New Britain-Hartford Busway Project**
- **Route 34 East-Downtown Crossing, New Haven**
- **Rapid Health Impact Assessment:
Weatherization Plus Health in Connecticut**

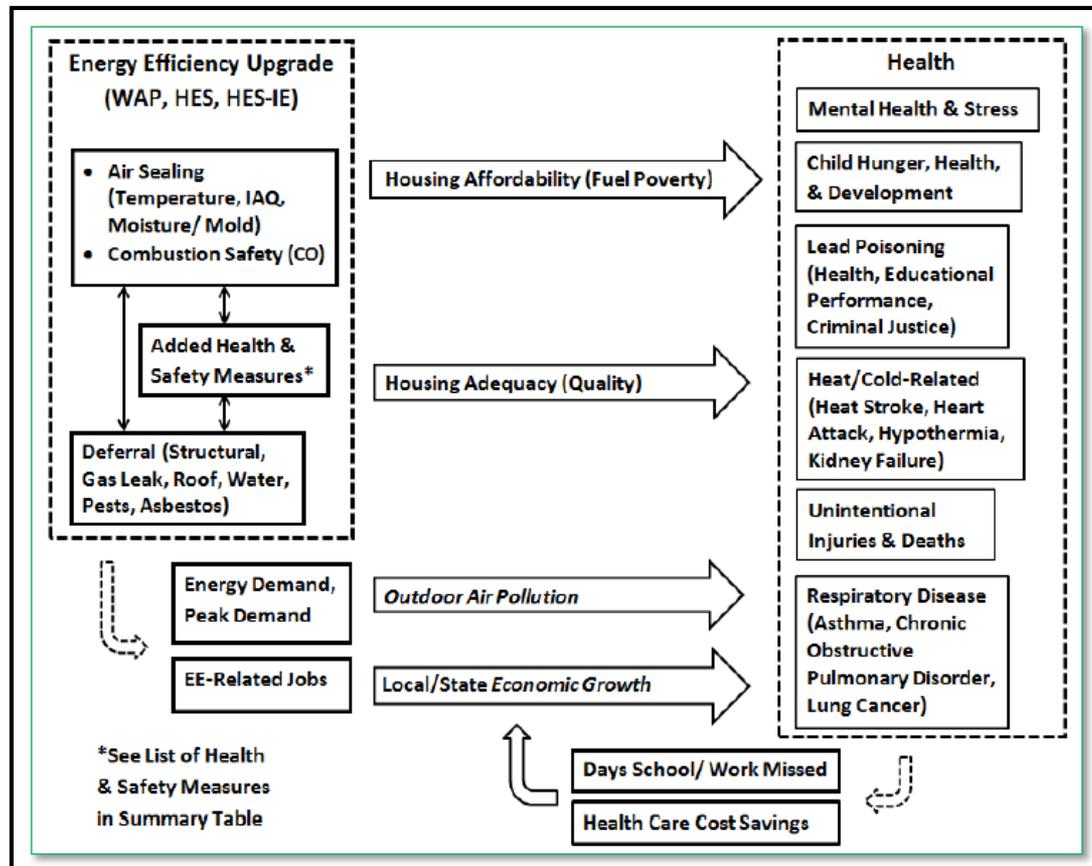
Rapid Health Impact Assessment: Weatherization Plus Health (WPH) in Connecticut

- **WPH is a national initiative designed to improve energy efficiency, health, and safety of low-income homes through integrated delivery of the US DOE Weatherization Assistance Program (WAP) and healthy homes programs**
- **CT goal = weatherizing 80% of the state's housing stock by 2030**

WPH HIA Aimed to Answer Two Questions

1. What health and safety measures should be included in *state administered DOE WAP*?
2. What health and safety measures should be included in *state and utility-funded weatherization work*?

Energy Efficiency Upgrades and Potential Health Impacts



(Source: Rapid Health Impact Assessment: WPH in Connecticut; 4/9/13; Amy McLean Salls, John Wilson, Ellen Tohn, Lynne Snyder)

WPH HIA Findings

- **Five housing conditions lead to deferrals that prevent a significant number of energy upgrade improvements**
 - Asbestos on energy systems and in vermiculite insulation
 - Gas leaks (~20% of homes with gas fuel)
 - Knob and tube wiring
 - Moisture and mold
 - Lead paint

- **Deferrals challenge the state's goal of weathering 80% of homes by 2030**

Health Impacts and Savings of Energy Efficiency Repairs, Findings of the CT WPH HIA

+ Repairs will reduce health inequalities	Reduce Deferrals	Enhance Energy Savings	Significant Health Benefit	Health Benefits/Costs
Repairs Reduce Deferrals, Save Energy & Improve Health				
Minor Moisture Repairs +	✓	✓	✓	X \$1.14/1
Asbestos Abatement	✓		✓	data not available
Gas Leak Detection and Repair	✓			X likely > \$1/1
Knob & Tube Wiring Repair	✓			data not available
Air Sealing with Pest Exclusion +		✓	✓	X likely > \$1/1
Window Replacement of Leaded Single Pane +		✓	✓	X \$1.79/1 (includes energy benefits)
Repairs Create Significant Health Savings				
Injury Prevention Minor Repairs +			✓	data not available
Radon Testing +			✓	X \$51/1
Radon Mitigation (if work increases radon > EPA threshold) +			✓	X \$47/1
Remove Unvented Gas Appliances			✓	X likely > \$1/1
Smoke Alarms +			✓	X \$33/1
Smoking Education and Referral +			✓	X likely > \$1/1
Repairs Recommended by EPA Protocols				
Carbon Monoxide Detectors +				X \$1.25/1
Ventilation Upgrades				data not available

(Source: Rapid Health Impact Assessment: Weatherization Plus Health in Connecticut. Presented by NOI to the Connecticut Academy of Science and Engineering – HIA Study Committee; 4/12/13)



Reporting of WPH HIA Findings and Recommendations

- **HIA findings and recommendations were presented to the Connecticut Energy Efficiency Board (CEEB)**
- **CEEB to advise Public Utilities Regulatory Authority at DEEP on HIA's findings and recommendations**

HIA: A Pragmatic Decision-Support Tool

- **HIA must operate in the real-world policy-making setting, providing timely information without delaying important decisions and offering analysis based on best-available evidence**
- **HIA recommendations should be feasible and actionable within the legal purview and policy frameworks of other sectors**

Findings

- **HIAs are a useful emerging methodology in the US for considering health impacts on a wide range of policy decisions**
- **HIAs utilize a systematic analytical process for assessing potential health impacts**
 - **Ensures that health disparities are considered**
 - **Establishes baseline health conditions of a community**
 - **Offers strategies to mitigate negative and maximize positive health effects**

Findings (*continued*)

- **Social and environmental determinants have a strong influence on health outcomes and in order to truly impact health of the state**
- **The State currently reacts after decisions have been made rather than proactively seeking strategies to maximize health benefits and mitigate negative health effects**
- **More effort is needed to prevent disease and keep people healthy**
- **Added benefit of a proactive health approach to decision making is the potential to reduce the cost of the healthcare system over the long term**

State and Local Support for HIAs

- **Support for adding a broad health perspective in the decision-making process for policies, programs, projects, and plans in a broad array of non-health sectors**
- **Interest across state agencies to incorporate health considerations into decision making in non-health sectors**

Elements of a Successful HIA Program in CT

- **Identify an agency or agencies to provide leadership and support for the use of HIAs**
- **Establish HIA programs for training, technical assistance, and mentoring for those that are interested in conducting HIAs**
- **Create demand for HIAs by raising awareness and educating stakeholders and policy makers**
- **Integrate the consideration of health impacts into the culture of organizations and agencies that normally do not consider how their policies, programs, projects, and plans affect health**

Resources Needed to Effectively Conduct HIAs

- **Resources needed include those related to capacity, funding, staff, and access to data and support for data analysis**
- **Connecticut has unique resources that provide a strong foundation — but there are also shortcomings that need to be addressed to effectively incorporate health considerations into the decision-making process on a sustained and institutional basis**

Resources Needed to Effectively Conduct HIAs (*CONT.*)

CAPACITY

- Only three HIAs have been completed in Connecticut with DPH and CADH having limited experience
- Essential needs that must be addressed for developing capacity for a sustained HIA program are:
 - Expertise to conduct HIAs
 - Knowledge to manage and/or participate in the HIA process
 - Ability to screen proposed decisions as to the appropriateness and need for conducting an HIA
 - Ability to conduct HIA training and to develop a network of mentors and technical advisors

Resources Needed to Effectively Conduct HIAs (*CONT.*)

FUNDING

- Ongoing state budget constraints provide a challenging environment for state agencies to expand services into new areas such as for funding HIA projects

STAFF

- Staff at the state, regional, and local agency levels (both health and non-health based sectors) may need a variety of skill sets and levels of effort depending on their involvement with the HIA process (conducting, screening, managing, or participating)
- Legislative: Proposed legislation is currently screened for direct health impacts by the General Assembly's Public Health Committee and DPH. Additional staff resources and training may be needed if proposed legislation typically not considered health-related is also reviewed to determine if an HIA would be beneficial

Staff (*continued*)

- **Health and Human Service Agencies:** Agency staff may be involved in screening, managing, and providing technical assistance. HIA activities align well with the skills of some of the staff, though additional staff time and HIA training would be needed
- **Regional Planning Agencies and Other Agencies:**
 - Agency staff may be managing programs, projects, or plans in which an HIA would be beneficial
 - Staff need to be aware of the value of using an HIA, trained to incorporate health impacts into the planning and design process, and provided with time to engage in the HIA process

Staff (*continued*)

- **Local Health Districts and Departments (LHDDs)**
 - **Wide range of staff resources and skills**
 - ✓ Most LHDDs are not likely to be in a position to be the lead on an HIA — while larger departments and districts may be in a better position to support HIA activities
 - ✓ Part-time local health departments may even find it challenging to participate or support an HIA
 - **Staff training would mostly involve**
 - ✓ Raising awareness
 - ✓ Knowing the health-related questions to ask
 - ✓ Helping to identify policies, programs, projects or plans that would benefit from an HIA
 - ✓ Being familiar with the technical resources in the state that are available to assist with conducting an HIA

Data

- **Examples of Data Resources**
 - DPH Environmental Public Health Tracking (EPHT) data portal
 - CADH's Health Equity Index
 - Publicly available Department of Social Services (DSS) / Medicaid Data
- **Some focus group session participants and individuals interviewed expressed concern about access to data, especially data on the census tract / block level**
- **Additional data support from state agencies may be needed**
- **Qualitative data can be used when quantitative data is not available**

“In-Place” State Level Mechanisms for Implementation of HIAs

- **Proposed legislation is currently reviewed by a variety of legislative committees, state agencies, and stakeholders for numerous reasons**
- **National Environmental Policy Act (NEPA) and Connecticut Environmental Policy Act (CEPA) regulations include protection of public health**

More Challenging to Implement HIAs at the Local Level

- **Fragmented local health infrastructure in Connecticut will make it more challenging to incorporate HIAs into the decision-making process on a sustained basis**
 - **74 LHDDs covering 169 towns**
 - **Catchment areas for regional planning agencies do not coincide with LHDD catchment areas**

Misconceptions About the Practice of HIAs

- Findings from focus group sessions and interviews indicated that there are concerns that HIAs will be used to inhibit implementation of “good” projects or that the HIA process will be so burdensome that overall benefits will be negated
- These “misconceptions” are unfounded when HIAs are used according to practice standards that include robust screening and scoping procedures
- 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. Focus is on maximizing health benefits and mitigating potential risks

Moving Beyond HIAs

- **Unexpected finding is the overall support for incorporating health into decision making by state and regional / local agency leaders beyond just using HIAs**
- **Interest in changing the culture of agencies through staff training and by engaging public health professionals for the development of policies, programs, projects, and plans**

Recommendations

- **CASE Study Committee recommends that HIAs be used in Connecticut based on numerous best practice case studies, when appropriate....**
- **Appropriate use means to**
 - **Apply HIA decision-support tool only when an HIA will add new information to a deliberation and when the connections to health are not directly obvious**
 - **Implement an HIA only when it can be completed in a timely manner so that recommendations can be integrated into the decision-making process**
- **Goal is not to just conduct HIAs — but to use HIAs as a catalyst for including health considerations into the decision making process**

Recommendations

- **Public Health Committee 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**
- **Establish a multi-agency Health Review Team to develop and oversee utilization of a pre-screening protocol that outlines the appropriate use of HIAs in policies, programs, projects and plans at all levels and for all sectors that would benefit most from the HIA process**

Recommendations

- **HIAs should be incorporated into existing regulations, mechanisms, and processes when possible**
 - **Public health requirement of the Environmental Impact Evaluation (EIE) process should be broadened to include HIAs as a best practice to meet the requirements of health analysis in NEPA and CEPA**
- **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**

Recommendations

- **Increase state HIA capacity by:**
 - Raising awareness for HIAs
 - Creating demand for the appropriate use of HIAs in the decision-making process
 - 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**
- **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 decisions makers**

Recommendations

- **Initiate a demonstration HIA program to strengthen the HIA infrastructure and determine the best sustainable approach for the use of HIAs in Connecticut**
 - HIA Housing Program
 - HIA EIE Program

- **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 Connecticut and an expansion of the demonstration HIA programs into other sectors

Concluding Remarks

- **Policies, programs, projects and plans that maximize positive health effects and mitigate negative health effects will make Connecticut:**
 - A healthier place to live for its residents
 - Promote a healthy workforce for its businesses
 - Potentially avert unnecessary healthcare costs in the future
 - Contribute to disease prevention
- **HIAs uses a flexible, yet systematic, process to achieve these goals and ensure health is considered during the development of policies, programs, projects, and plans**

HIA Currently In-Process in Connecticut

Northeast Neighborhood (Hartford) Sustainability Plan and Health Impact Assessment

(NNSP-HIA)

Northeast Neighborhood Sustainability Plan and Health Impact Assessment (NNSP-HIA)

- **The Northeast Neighborhood Partnership, an initiative of Community Solutions, is conducting an HIA to inform development of a Sustainability Plan for the Northeast Neighborhood of Hartford**
- **NNSP-HIA's Goals are to:**
 - **Develop and implement a neighborhood sustainability plan that includes 3 major improvements in the health and well-being of Northeast residents**
 - **Demonstrate how HIA's can identify significant opportunities for improving neighborhood well-being**
 - **Bring together and engage a diverse group of stakeholders to inform the NNSP-HIA processes, advise on potential impact and advance action on recommended investments**

NNSP-HIA - *Partners*

- **Community Solutions**: Helps communities solve complex problems (<http://cmtysolutions.org/>)
- **Michael Singer Studio**: A multifaceted art, design, and planning studio (<http://www.michaelsinger.com/#/about/>)
- **Georgia Health Policy Center**: Provides evidence-based research, program development, and policy guidance (<https://aysps.gsu.edu/ghpc>)
- **Health Impact Project**: A collaboration of the Robert Wood Johnson Foundation and The Pew Charitable Trusts (<http://www.healthimpactproject.org/>)

NNSP-HIA – *Funding and Timeline*

➤ **Funding:**

- ✓ ***Health Impact Project***, a collaboration of the Robert Wood Johnson Foundation and The Pew Charitable Trusts

➤ **Expected Timeline**

- ✓ **Start Date: 07/01/2013**
- ✓ **Projected Completion Date: 06/30/2014**

➤ **NNSP-HIA Contact**

- ✓ **Anna Creegan, Community Solutions**
acreegan@cmtysolutions.org

Thank You

**Connecticut Academy of Science and Engineering
Richard H. Strauss, Executive Director**

860-571-7135

rstrauss@ctcase.org

To access the study report online go to www.ctcase.org

