Addressing Health in Environmental Impact Assessment: A Draft Consultation

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Addressing Human Health in Environmental Impact Assessment

- Working groups of IAIA & EUPHA
- Support and input from WHO Regional Office for Europe
  - Workshop in Bonn, March 2019
- Discussed at EUPHA conference – November 2019, Marseilles
- Consultation draft – Comments until 6th January 2020
  - [www.surveymonkey.com/r/HealthInEIA](http://www.surveymonkey.com/r/HealthInEIA)
- Launch at IAIA conference – May 2020, Seville

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Aims of the paper

• To provide principles and good practice for appropriately addressing health in EIA for the health sector and all sectors and actors involved in the EIA process.
• To contribute towards consistent coverage of health within EIA. This is of interest to practitioners conducting EIA, Developers and authorities requested to express their opinion on the information supplied in an EIA report.
• To complement guidance and build on previous joint action between IAIA, EUPHA, and the WHO Regional Office for Europe. See report ‘Health in Impact Assessments’.
• To contribute to strategies to combat environment related disease and to WHO actions. For example see ‘Healthy environments for healthier populations’.
“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (WHO, 1946)

Source: Nowacki J, 20018
In 2012, 12.6 million deaths globally were attributable to the environment – nearly 1 in 4 of total global deaths.

When accounting for both death and disability, the fraction of the global burden of disease due to the environment is 22%.

In children under five years, up to 26% of all deaths could be prevented if environmental risks were removed.

Environmental risk factors which affect human health

- Air pollution
- Inadequate water, sanitation, and hygiene
- Chemicals and biological agents
- Radiation
- Community noise
- Occupational risks
- Built environments
- Agricultural practices
- Climate change
What is Health Impact Assessment?

... is a combination of procedures, methods and tools.

... systematically judges the potential, and sometimes unintended, effects of a policy, plan, programme or project.

... on both the health of a population and the distribution of those effects within the population.

... identifies appropriate actions to manage those effects.

International Association for Impact Assessment, 2006
What is EIA?

- Environmental Impact Assessment (EIA) is the form of impact assessment that is applied at project level.
- It applies to a wide range of public and private projects. EIA is conducted on projects that are likely to have a significant effect on the environment.
- The types of project that may require EIA include infrastructure projects, such as airports, motorways and power stations; the extractive industry; and urban development.
- EIA is conducted by the Developer as part of the process of seeking consent to proceed with the project.
Odile Mekel
NRW Centre for Health (LZG.NRW)
• Under scope of covered environmental factors (Article 3), it replaces “human being” by “population and human health”.
• In line with other topics, the Directive does not provide definitions for population and human health, nor does it specify methods for assessing the likely significant effects on human health.
EIA Directive

(1) Directive 2011/92/EU of the European Parliament and of the Council (1) has harmonised the principles for the environmental impact assessment of projects by introducing minimum requirements, with regard to the type of projects subject to assessment, the main obligations of developers, the content of the assessment and the participation of the competent authorities and the public, and it contributes to a high level of protection of the environment and human health. Member States are free to lay down more stringent protective measures in accordance with the Treaty on the Functioning of the European Union (TFEU).

Article 3

1. The environmental impact assessment shall identify, describe and assess in an appropriate manner, in the light of each individual case, the direct and indirect significant effects of a project on the following factors:

(a) population and human health;

(b) biodiversity, with particular attention to species and habitats protected under Directive 92/43/EEC and Directive 2009/147/EC;

(c) land, soil, water, air and climate;

(d) material assets, cultural heritage and the landscape;

(e) the interaction between the factors referred to in points (a) to (d).

2. The effects referred to in paragraph 1 on the factors set out therein shall include the expected effects deriving from the vulnerability of the project to risks of major accidents and/or disasters that are relevant to the project concerned.
EIA and human health

In summary …

• EIA is a legal requirement for certain types of public and private projects that follow a structured process.

• EIA informs and supports an application for consent to proceed with a project.

• EIA is required to identify, describe and assess in an appropriate manner the ‘likely significant effects’ of a project on human health and the environment.

• Health in EIA requires cross-sectoral working by both the Developer and by the Competent Authority to ensure that the health sector is involved.
What factors does EIA cover?

Article 3 1. (a): Population and human health

- **Human health**
  
  “Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (WHO, 1946)

  It spans environmental, social and economic aspects.

- **Population**
  
  Typically covered in EIA through the consideration of socioeconomic and/or social effects.

  Population and human health closely related.
Principles for human health in EIA

- Consistency
- Proportionality
- Transparency
- Equity

COMPREHENSIVE APPROACH TO HEALTH
Expertise for conducting a health assessment within EIA

- EIA Report health content must be prepared and reviewed by ‘competent experts’.
- Competence for health in EIA has yet to be formally defined.
- Good practice is for those involved in health in EIA (on behalf of the Developer or Competent Authority) to be experienced in both public health and environmental sectors.

- Who can conduct an assessment?
- What competencies are required to conduct an assessment of human health?
Good practice actions by ...

- **Health stakeholders:** In supporting the Developer and Competent Authority in understanding health competence requirements articulate expectations about soft and hard skills required for a valid assessment of health effects.

- **Developer:** In establishing the competence of those producing the EIA Report ensure a competent health expert is included in the team of consultants, as appropriate.

- **Competent Authority:** In establishing the competence of those reviewing/examining the EIA Report, clarify requirements for experts competent on assessing ‘human health’ effects and enforce such requirements when appraising EIA reports.
The EIA process and entry points for health professionals

Screening

• Screening is not mandatory in EIA. It is the process that is used to determine whether an EIA is, or is not, required.
• The term likely significant effect is introduced at this stage.
• At the screening stage the task is to determine a simple ‘yes’ or ‘no’ answer, with brief justification to the question of whether the project is likely to significantly affect health at a population level. This means reaching a preliminary conclusion as to whether the project is consistent with providing ‘a high level of protection to human health’.
• At screening the level of detail may be low and the level of uncertainty may be high.
• Where population health outcomes are likely to be significantly affected by a project then health should be central to case-by-case screening decisions.

Step 1: When is screening required?
Step 2: Thresholds and criteria
Step 3: Case-by-case examination
Step 4: The screening decision and its justification
Good practice actions by ...

- **Developer:** Seek input from those with public health knowledge in an EIA context when determining the information to submit on the characteristics of the project and its likely significant effects (including measures to avoid or prevent significant adverse health effects).

- **Competent Authority:** Where a decision is on a case-by-case basis, seek relevant public health advice before making the screening decision (including measures to avoid or prevent significant adverse health effects).

- **Competent Authority:** Where population health outcomes are likely to be significantly affected by a project (e.g. by changes in air quality, noise, water, land quality, socio-economics, transport etc...) health should be central (not peripheral or secondary) to the screening decision justification.
Scoping

• Scoping is not mandatory in EIA.
• Scoping is good practice and most EIAs will undertake this step as it enables better planning and costing of the assessment stage and it reduces the risk of delays.
• Scoping should determine the potential for population health effects to be ‘likely’ and ‘significant’. If this is the case, then these issues should be ‘scoped-in’ for further assessment.
• Scoping health should be proportionate. Health effects that are unlikely to significantly affect population health should be ‘scoped-out’. Good practice is to consult health stakeholders.

Step 1: Initiating scoping
Step 2: Information needed to undertake scoping
Step 3: Scoping consultations
Step 4: The scoping outputs: the Scoping Opinion/Report
Good practice actions by ...

- **Developer**: In preparing an EIA Scoping Report (or equivalent) seek input from those with public health knowledge in an EIA context. This particularly applies when scoping the likely significant effects of a project. This includes advice on measures to avoid or prevent significant adverse health effects, as well as measures to realise health opportunities.

- **Competent Authority**: In preparing an EIA Scoping Opinion seek input from the national body responsible for public health and the relevant regional or local public health teams. This includes advice on measures to avoid or prevent significant adverse health effects, as well as measures to realise health opportunities.

- **Health stakeholders**: Support the Developer or Competent Authority during EIA Scoping by introducing the breadth of the wider determinants of health, and then help to focus the EIA to only the likely significant health effects of the project.

- **Health stakeholders**: In supporting the Developer or Competent Authority during EIA Scoping establish a proportionate health scope with reference to a transparent and consistent process for determining the potential likelihood and significance of health effects.

- **The Developer and the Competent Authority**: Use a ‘health chapter’ so that health stakeholders (notably national, regional or local public health teams) can clearly navigate to the relevant information and advise on all the health issues across the EIA scope.

- **Health stakeholders**: As part of consultation responses request a health chapter within the Scoping Report and EIA Report that brings together or cross-references the likely significant health effects.
An EIA Report should present the likely significant effects of the project, including for health.

Multi-criteria analysis considers how a range of factors and evidence sources may contribute to a conclusion on the significance of health effects (this includes, but is not limited to, sensitivity and magnitude).

EIA takes a population health approach. Inequalities are a key feature of population health assessment, so consider differences between the general population and vulnerable groups.

- Project Description
- Health Baseline scenario
- Environmental factors
- Assessing effects on the environment including human health
- Mandatory assessment of Alternatives
- Mitigation and Compensation Measures
- Monitoring
• **Health stakeholders:** In supporting the Developer and Competent Authority in understanding the health service implications of a project, provide clear guidance from an early stage on healthcare service planning. Including the design parameters, unit costs of key services, service specifications and financial calculations as appropriate to the consenting stage of a planning application. If appropriate, set clear expectations for how the description of health services within the EIA Report would be further developed once service providers are appointed which may be after determination of the planning application.

• **Health stakeholders:** In supporting the Developer to describe a health baseline, it is necessary to provide advice on appropriate health related indicators (e.g. public health indicator sets) that the project should include to facilitate assessment and future monitoring. Where feasible also provide advice on how the area's future health baseline may evolve with and without the project (i.e. data sources identifying relevant population health trends).

• **National Policy Makers:** Consider setting an EIA policy context (at local, regional and national level) that sets specific project level expectations for the protection and improvement of population health, including being explicit about links to relevant determinants of health where appropriate. This would support reaching robust professional judgements on EIA health significance, particularly around the acceptability or desirability of particular project changes. The role of regulatory thresholds should be clear.
• **Health stakeholders:** Consider being specific in policy documents or other publications setting out local, regional or national health priorities about the role development projects (particularly EIA projects) can play in addressing these priorities, including specifying the links to relevant determinants of health where appropriate. This would support reaching robust professional judgements on EIA health significance, particularly around the importance of particular project changes. Such documents may also include appropriate summaries of the local health baseline, including vulnerable groups and of scientific literature on health effects.

• **Health stakeholders:** In supporting the Developer or Competent Authority to identify the likely significant health effects of a project, use a transparent and consistent process that encompasses a proportionate but sufficiently broad range of evidence sources to establish not only the sensitivity of the affected population and the magnitude of the project change, but also the importance, desirability or acceptability of the change in population health (pursuant to providing a high level of protection to human health, including as appropriate health prevention, treatment, care and promotion considerations).
Consultation

- Consultation is a fundamental aspect of EIA, both for the Developer in informing their scope and assessment and for the Competent Authority in reaching their planning determination.

- Health stakeholders (e.g. national, regional and local public health teams) should be consulted as a matter of good practice, ideally as a requirement of national EIA legislation.

- Scoping stage consultation with health stakeholders is the key opportunity for public health resources to be used efficiently in steering the project towards positive health outcomes.

- Consultation procedures are detailed in national legislation, and also fall under international legislation (Aarhus Convention and the Espoo Convention). European Directive 2003/4/EC sets out the need for public access to environmental information.

- EIA Directive Article 6(1) sets out requirements for consulting with relevant stakeholders on the information supplied by the Developer and on the request for development consent. Stakeholders are identified by legislation by reason of their specific environmental responsibilities or local and regional competences.

- EIA Directive Article 6(2) sets out requirements for consulting with the public, with the detailed arrangements for consultation set by each Member State. EIA Directive Article 7(5) clarifies that the consultation arrangements should enable the public to participate effectively in the decision-making procedures.
• EIA monitoring of health should be included where appropriate and in a proportionate way.

• EIA health monitoring should avoid duplicating other legally required monitoring systems.

• Establish clear governance arrangements for monitoring and follow-up action (if required).

Where monitoring is proposed, monitoring measures should be specific and detailed enough to ensure their implementation, including defining roles, responsibilities, and resources. Monitoring should not duplicate other monitoring regimes, e.g. required by law in relation to permitting or regulation.

... it can be appropriate to include wider social, economic and service-related health indicators within the agreed monitoring framework. The governance, responsibilities and triggers for not only health monitoring but also any subsequent action should be explicit within the EIA consent process and its associated legal agreements.

Wherever feasible existing routine public health indicator sets (and their associated analysts) should be used in preference to developing bespoke monitoring regimes.
Addressing Human Health in Environmental Impact Assessment

Next steps

• **Webinar:** Questions and discussion.

• **All:** Consultation draft – comment until 6th January 2020
  • [www.surveymonkey.com/r/HealthInEIA](http://www.surveymonkey.com/r/HealthInEIA)

• **Working group:** Edit the paper and prepare case studies

• **Working group:** Launch paper at IAIA conference – May 2020, Seville
Questions
References

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Thank you!

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