D3 Addressing health in SEA – current situation & trends	
Session Leader(s)	Alan Bond <u>alan.bond@uea.ac.uk</u>
	Suphakij Nuntavorakarn suphakijn@yahoo.com
	Ben Cave <u>ben.cave@caveconsult.co.uk</u>
	Marco Martuzzi mam@ecr.euro.who.int
Focus and approach	The following papers were presented:
	Addressing health in SEA: position paper, Alan Bond, Ben Cave, Suphakij Nuntavorakarn
	Health Impact Assessment as part of SEA, Marco Martuzzi
	Addressing Health in SEA for Healthy Public Policy, Suphakij Nuntavorakarn
	Health in Strategic Environmental Assessment case studies, Ben Cave
	Rationale: to attempt to reach consensus on ways forward to address consideration of health at strategic levels.
	main form(s) of interaction: presentations and facilitated open discussion
Main trends and issues	Itemize the main trends, issues and developments discussed at the session:
	It was considered that momentum had developed for addressing health at the strategic level
	 There was evidence of practice of the consideration of health at the strategic level in some countries, although it was clear that the consideration of health at strategic levels is not yet widespread
	 Experience to-date indicates that Health Impact Assessment (HIA) may be carried out as a statutory requirement or on a voluntary basis, also, it may be carried out as part of EIA/SEA or as a self-standing assessment in its own right. There is no common model.
	 Sustainability and health are inextricably linked – so health needs a strong interface with other sectors
	Indicate aspects that are of particular importance or present pressing challenges for SEA (eg for legislation, practice, linkages, cross-cutting issues or improving standards and building capacity):
	■ There may be a window of opportunity for institutionalization of HIA – whether as a self-standing assessment process or integrated into SEA. This opportunity exists both because SEA is currently being insitutionalised and because assessment of health and well-being is seen as being important in its own right.

- It was found that the health sector often fails to engage with SEA and, where it does, often has an inadequate view of the scope of "health" such that the engagement is directed at improving health infrastructure rather than helping to design sustainable developments/communities.
- There is a concern that health is, and will be, inadequately addressed by SEA mainly because of the limited engagement with health professionals. It is acknowledged that this is not a problem unique to health and well-being, and that there are equivalent issues with, for example, cultural heritage impacts. Thus SEA has an overall challenge to properly address all impacts.
- Health Impact Assessment (HIA) has been driven by the need for healthy public policy ever since the 1970s as a parallel, rather than integrated, requirement.

Profile of the status, quality and effectiveness of SEA Rate the current status of the aspect, area or component of SEA being addressed (e.g. relatively well developed, some deficiencies, numerous limitations, etc):

■ There is limited evidence of health being adequately/comprehensively addressed within SEA. No particular blame is apportioned for this failure, but it is clear that health and well-being are critical elements of sustainability and so engagement between health professionals and environmental professionals is paramount.

Identify the main strengths and weaknesses of SEA process and practice as applied to health, and, where possible, note contributory factors (e.g. specific arrangements, procedures and methods that work well or poorly):

Strength:

■ SEA acts as a vehicle for dialogue between key actors — it can provide the forum in which the necessary engagement takes place and this is an opportunity we should not miss.

Weaknesses:

■ There is no definition of *human health* within SEA legislation nor consensus on definition between key stakeholders (including health professionals). Therefore there are too many excuses for not covering health & wellbeing.

Estimate the general quality of information and products delivered through or from SEA with regard to your topic area, and, if possible, their relationship to elements of process or approach:

• At present there is limited experience and it is too early to judge the quality.

Indicate the outcomes and benefits that are derived from SEA application for the aspect, area or component discussed (e.g. for policy or plan-making and implementation, safeguarding environmental quality, building institutional capacity, etc.):

 Greater understanding and awareness of health and social issues amongst stakeholders, especially non-health professionals.
 Reciprocal learning amongst health professionals about the role of a policy/plan.

Key findings and lessons

Specify the main conclusions from your session and their implications for SEA development in general or for the particular aspect, area or component discussed.

If possible, develop these as principles, performance criteria or lessons of good practice for SEA development in general or for the particular aspect, area or component discussed:

 There was universal consensus on the need to integrate health into SEA amongst 22 participants in the discussion forum

There is a need for capacity building in four aspects Of the community in terms of land use/sectoral issues, environmental issues and health issues so that members of the public can better engage in the SEA process o In terms of the methods/knowledge used in the consideration of health and well-being within SEA o In terms of structural incompatibilities, i.e. the institutions of state may deliver heath protection and not promotion Build capacity in all sectors to consider health, including within university curricula to be developed further Indicate key research and development needs to improve SEA quality Future directions and effectiveness for aspect, area or component discussed. Identify any priorities for future development of SEA for the aspect, area or component discussed or in general (moving the field ahead and beyond its current scope of application): • The discussion indicated that the consideration of the need to integrate health and well-being into SEA can lead to more significant issues being identified which need addressing by national governments. In particular, if health infrastructure is primarily aimed at health protection, it may be time to reconsider, strategically, the institutions which exist and their remits. The health profession needs to have the right organizations to engage in SEA, ones that can help in terms of health promotion. • In the short-term, the health section will work to improve the consideration of health in the REC guidance for implementing SEA Protocol, where it is needed. • In the medium-term, the health section needs to continue to gather and disseminate case study and capacity building experience. In the medium to longer-term, the health section needs to help in the development of understanding amongst all stakeholders of the

critical linkages between health and other aspects of sustainability