Integrating health inequalities into environmental impact assessment

Ben Cave
Salim Vohra
Leigh Rampton
Stephanie McGibbon *and colleagues*

bca

ARUP

E ben.cave@totalise.co.uk

M 07786 930 391

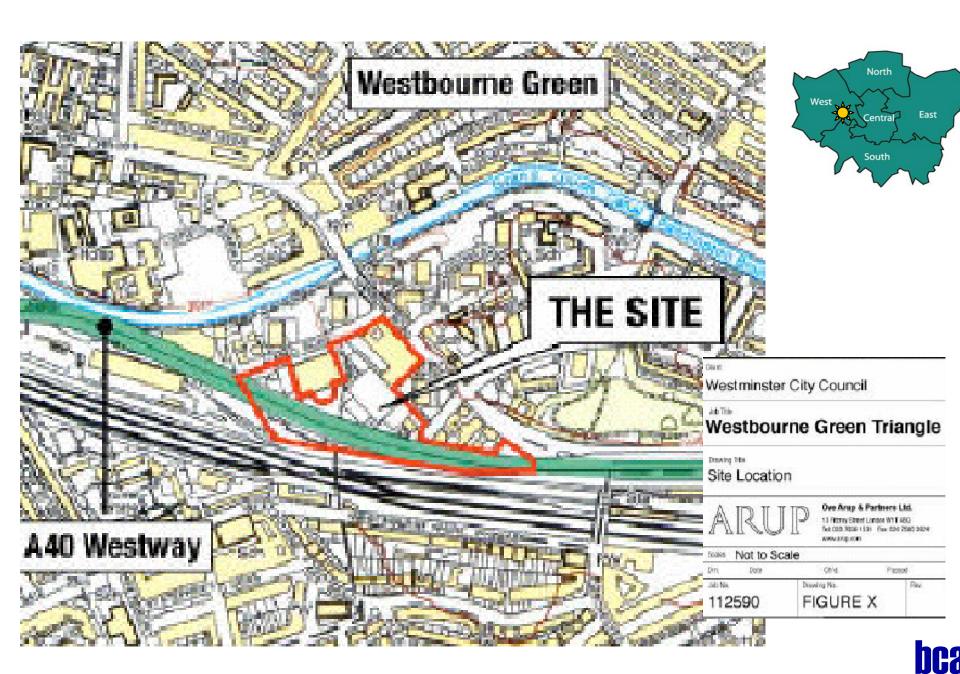
introduction ...

- Residents can feel short changed by statutory appraisal processes.
- The perspectives and priorities of external 'expertprofessionals' are very often different from those of the local residents.
- How can health inequalities be addressed in environmental impact assessment?









development options ...

- do-nothing ...
- construct a purpose built 9 storey building in the north corner of the site
- new secondary school would be constructed on the main site







context

- densely populated urban environment.
- site is bordered by a dense network of transport infrastructure, high rise housing blocks as well as public and private services and amenities.
- the development site had an extensive area of leisure space with all weather play courts as well as some local authority offices.
- population has high levels of need with newly moved refugees and asylum seekers living alongside a core of longterm residents with strong ties to the area.
- people feel that they and the area had been neglected and abandoned for many years.







a definition of HIA ...

- ... a systematic approach to identifying the health effects, and their distribution, of proposed policies, programmes, projects and services
- ... within a democratic, equitable, sustainable and ethical framework,
- ... so that actions are identified to reduce negative health effects and increase opportunities for health improvement (within a given population)







integrating EIA and HIA

- Westminster City Council Best Value Review recommended developing HIA within EIA
- Westminster City Council appointed Arup and BCA to carry out a preliminary independent assessment of proposed designs.
- Regular meetings of the impact assessment team to ensure that EIA and HIA findings informed each other







methodology ... HIA team

- structured observation
 'walkabout' survey of the area
- extensive stakeholder involvement including visiting and talking to residents in their own homes
- analysis of existing reports and evidence on health needs and service provision
- development of an appraisal matrix comparing each option

Incorporating residents
'voices' and 'stories' as
evidence and NOT as
'perceptions'





power, values and identity

Many residents expressed a sense of powerless and dismay in the face of the development process

Previous development in the area had not been sympathetic to residents

People said that the local authority did not have their best interests at heart







some outcomes ...

- Potential for short-term negative health effects on local community also potential for long-term positive health benefits for the local and the wider community.
- Residents disagreed with the conclusions but felt that the EIA-HIA process and resulting report were fair and transparent.

- The consultation picked up on issues and concerns which fell outside the remit of the EIA but were central to the HIA.
- Residents felt empowered by IA process.
- Listening to, valuing and drawing on residents experiential knowledge was central to the appraisal and the recommendations.



(participatory) HIAs tackle health inequalities ...

directly...

 identifying solutions to potential adverse and beneficial health effects of initiatives



indirectly...

 making power inequalities explicit and contributing to democratic governance



