



Health Impact Assessment as a tool to promote urban health: The experience in Australia

Osasunaren galneko inpaktua ebaluatzea hiriko osasuna sustatzeko tresna gisa: Australiako esperientzia

Evaluacion de Impacto en Salud como herramienta para promover la salud urbana: la experiencia de Australia

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Cities Creating Healthy Spaces Udalerria osasun sortzaile DALERRIA
OSASUN SORTZAILE

EL MUNICIPIO GENERADOR COMO ESPACIO DE SALUD

Bilbao, Basque Country 4 April 2019 Apirilaren 4a 2019 4 de abril
2019

Sections

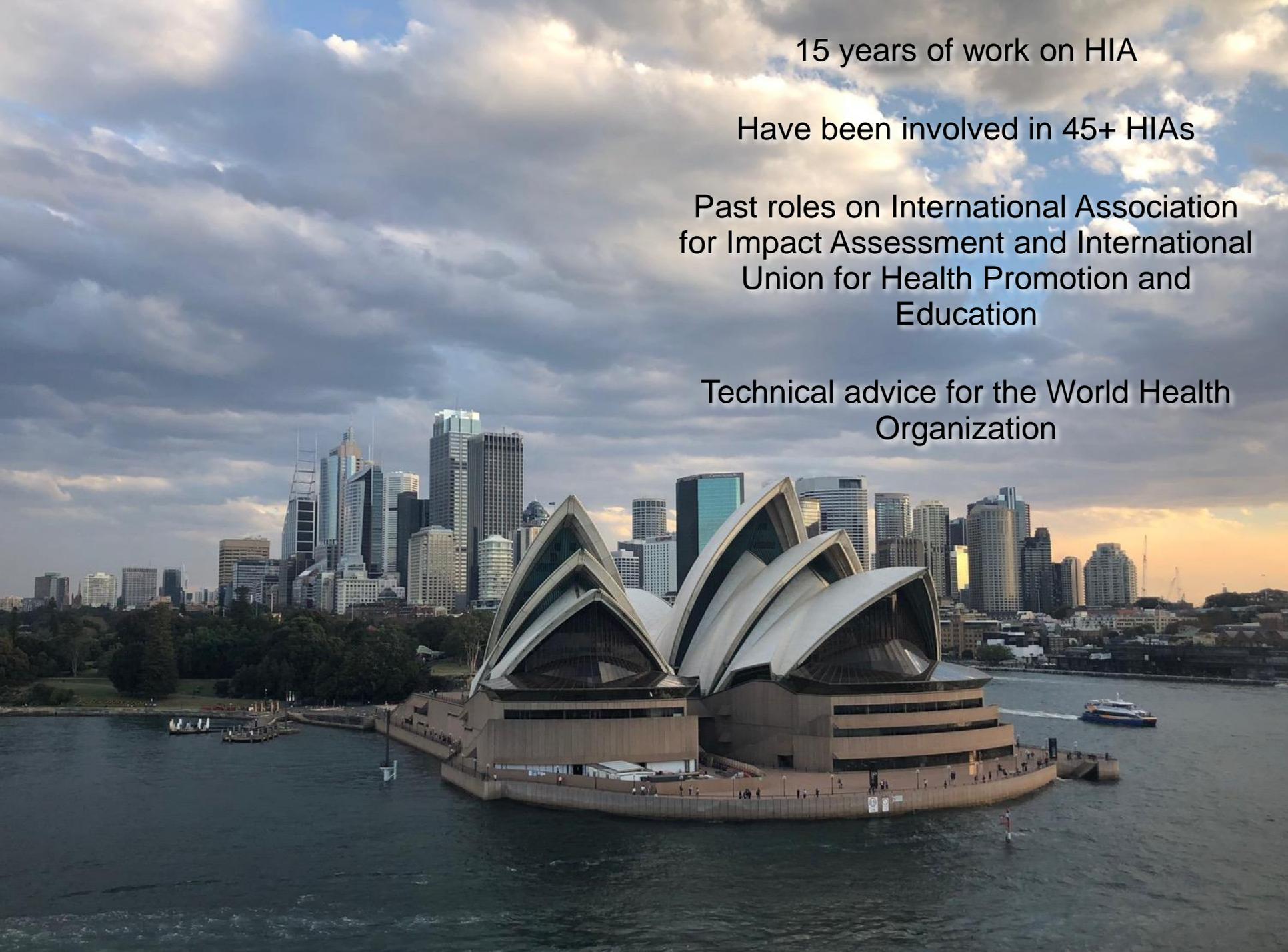
1. The development of HIA at the municipal level in Australia
2. A detailed case study: Green Square, Sydney
3. Lessons and reflections from 15 years of HIAs

15 years of work on HIA

Have been involved in 45+ HIAs

Past roles on International Association
for Impact Assessment and International
Union for Health Promotion and
Education

Technical advice for the World Health
Organization



A note on language

Evaluation vs assessment

Policy vs politics

Health vs health services

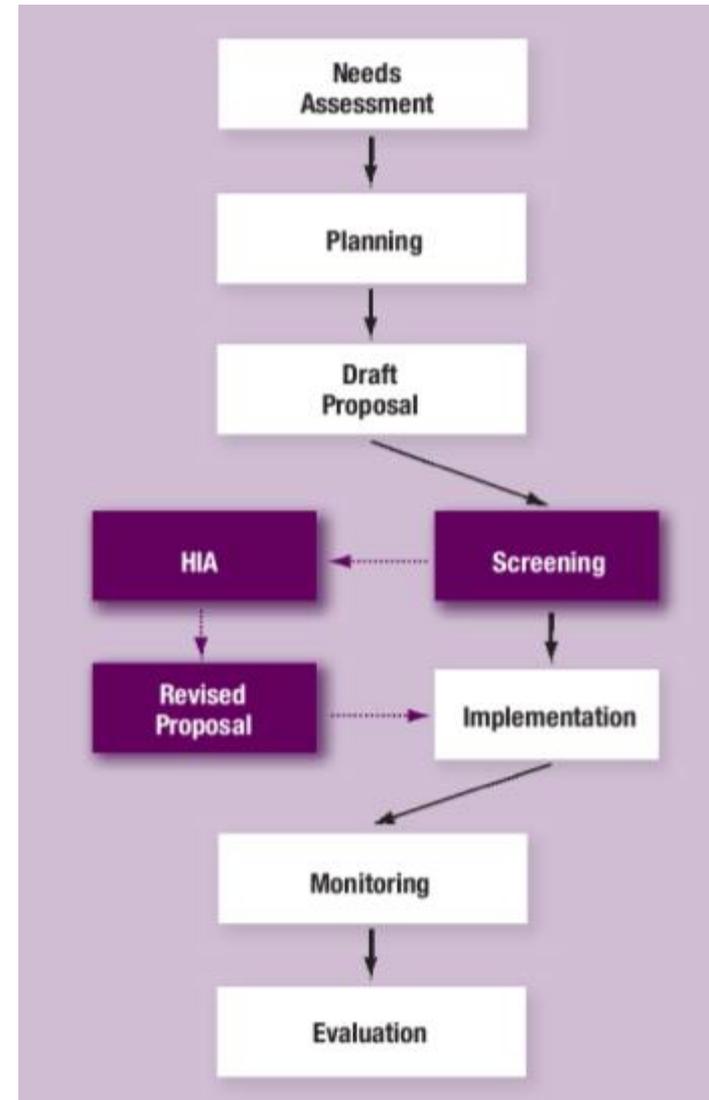
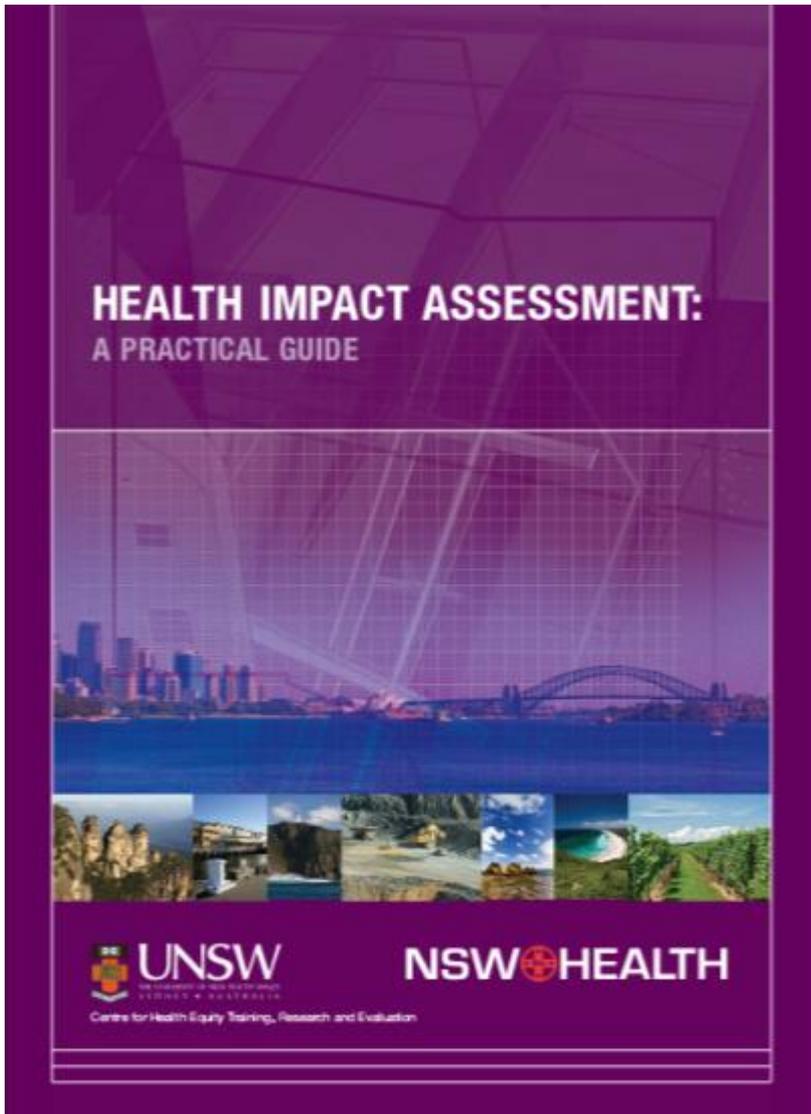
Section 1

The development of HIA at the municipal level in Australia

A combination of procedures, methods and tools by which a policy, program or project may be assessed for its potential and often unanticipated effects on the health of the population and the distribution of these impacts within the population.

Gothenburg Consensus Paper

- Done before (ex ante assessment)
- Combination of methods
- Looks at intended and unintended impacts
- Distribution of impacts
- Evidence-informed recommendations



Distribution of Impacts

Age

Location

Socioeconomic status

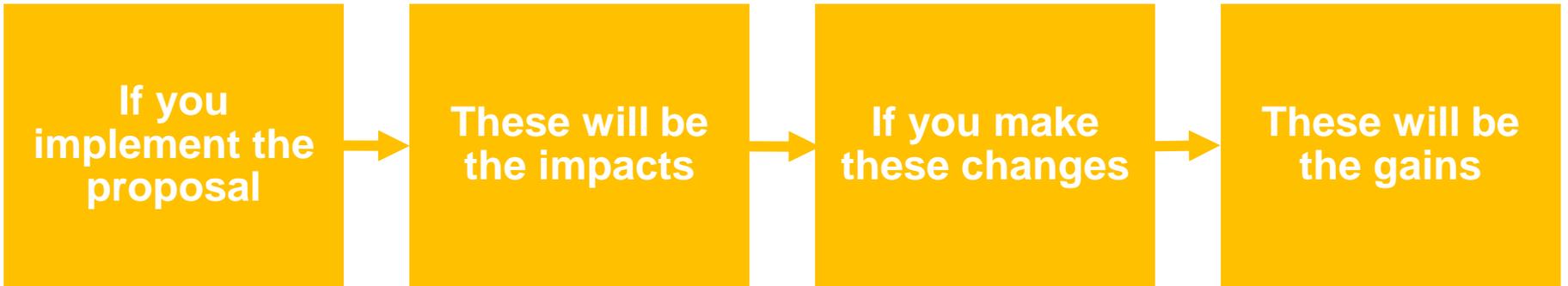
Gender and sexual identity

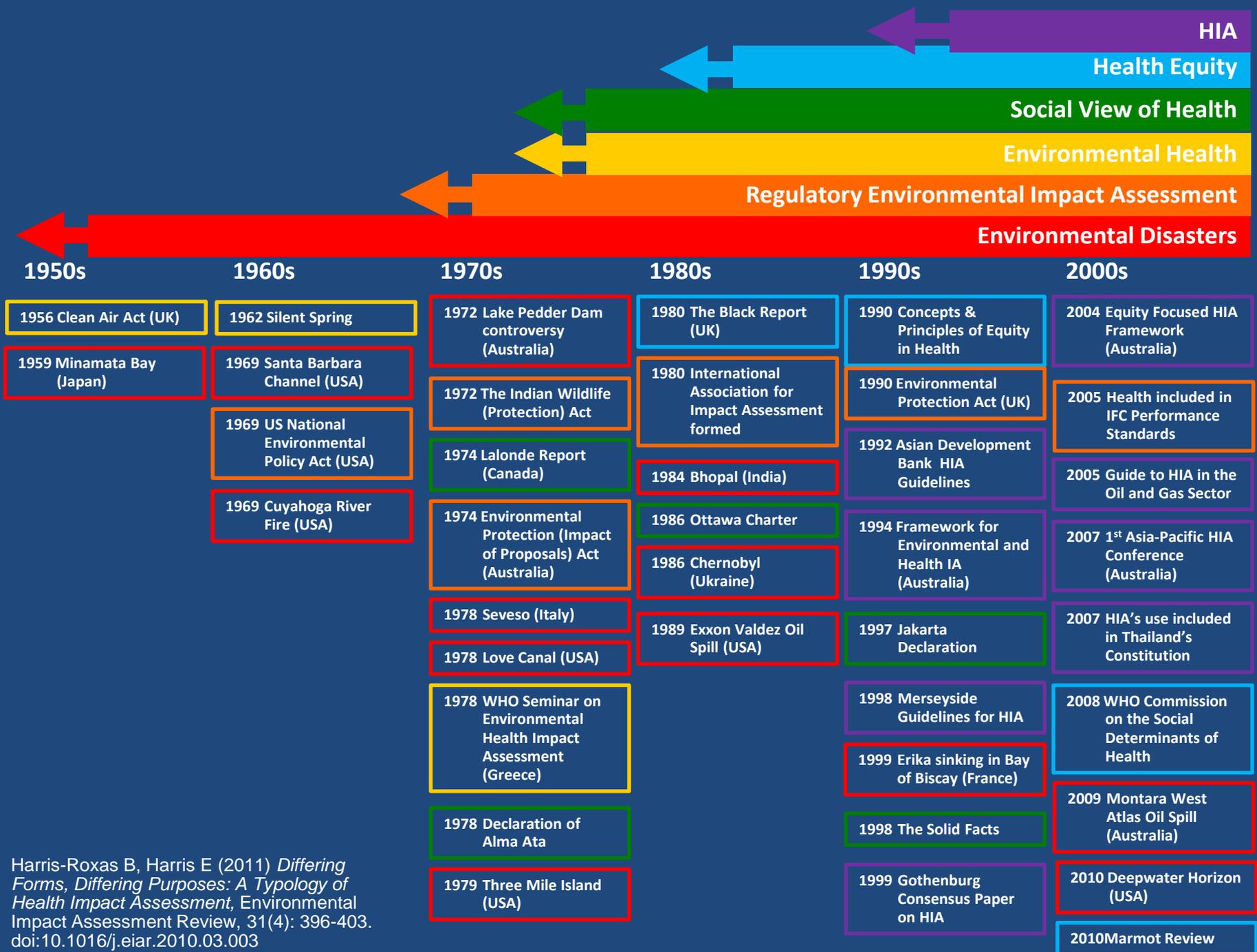
Ethnicity and culture

Existing levels of health and disability

Assessment

Recommendations





Harris-Roxas B, Harris E (2011) *Differing Forms, Differing Purposes: A Typology of Health Impact Assessment*, Environmental Impact Assessment Review, 31(4): 396-403. doi:10.1016/j.eiar.2010.03.003



Mandated



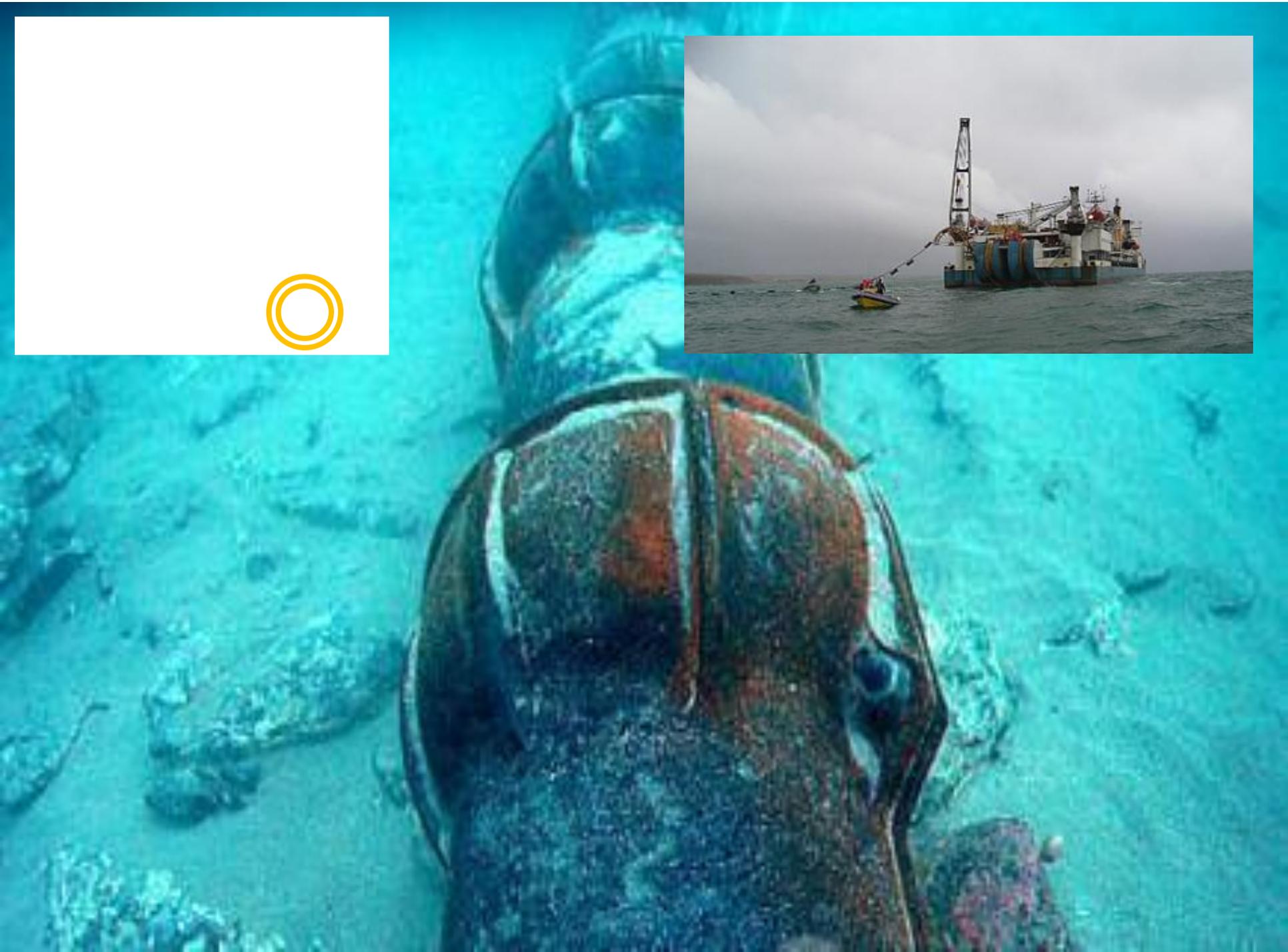
Decision Support

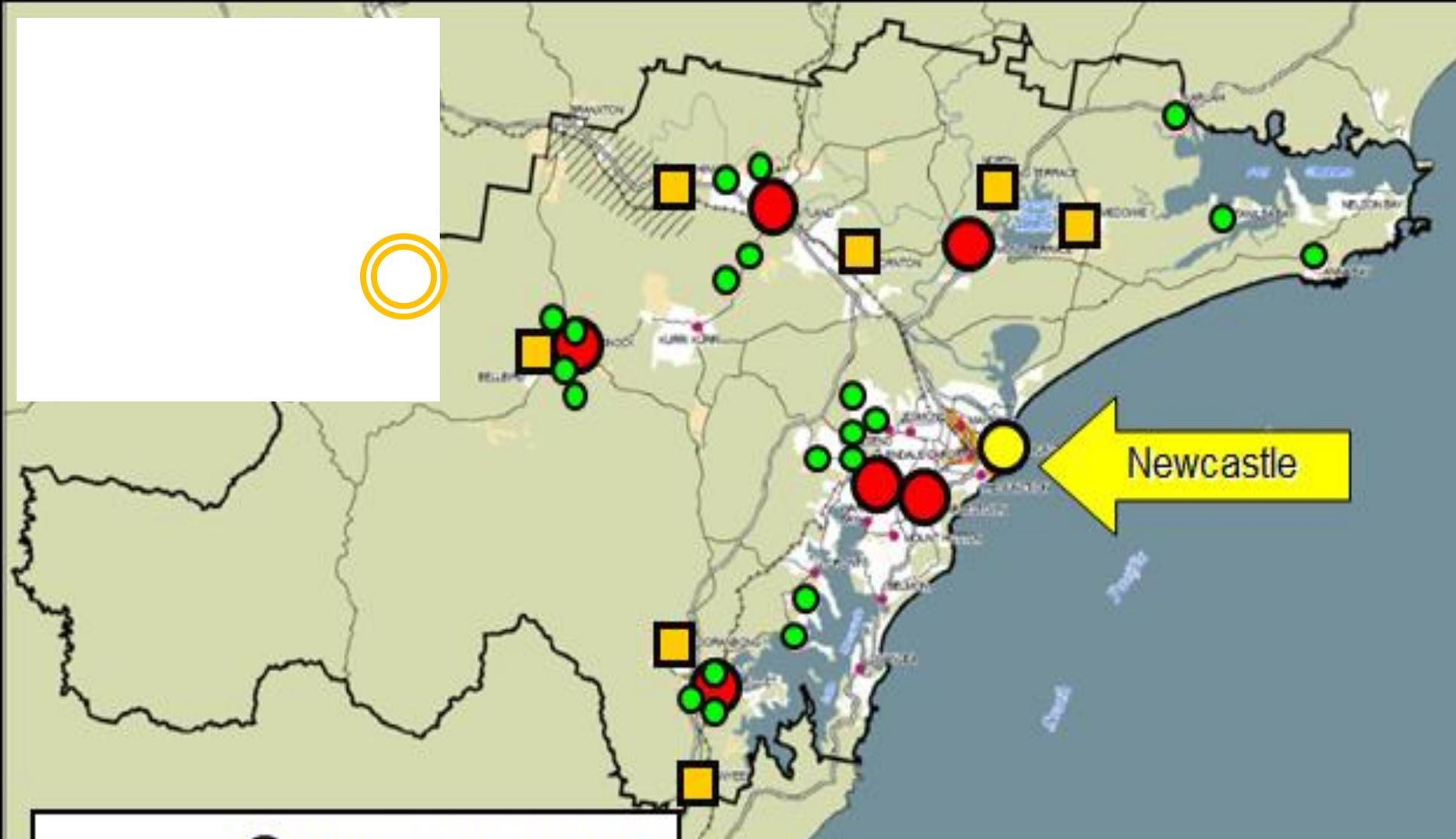


Advocacy



Community led





-  Major Regional City
-  Emerging Major Centre
-  New Release (>2000 Dwellings)
-  New Release (<2000 Dwellings)

-  Existing Urban Footprint
-  Lakes and Rivers
-  Future Investigation Area
-  Existing and Proposed Rural Residential
-  Rural (including National Parks and State Forests)

LOWER HUNTER REGIONAL STRATEGY
Map 2: Housing

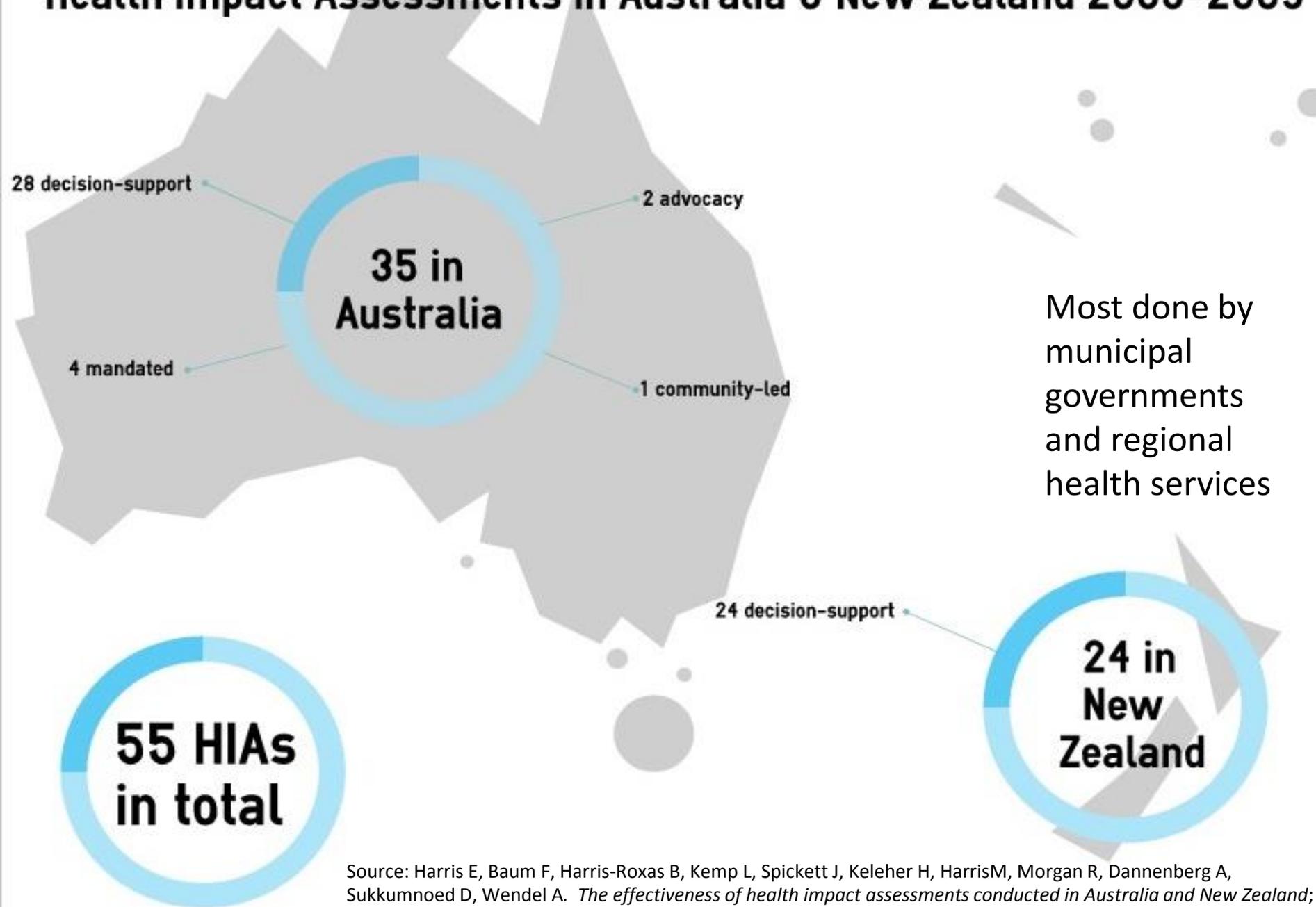






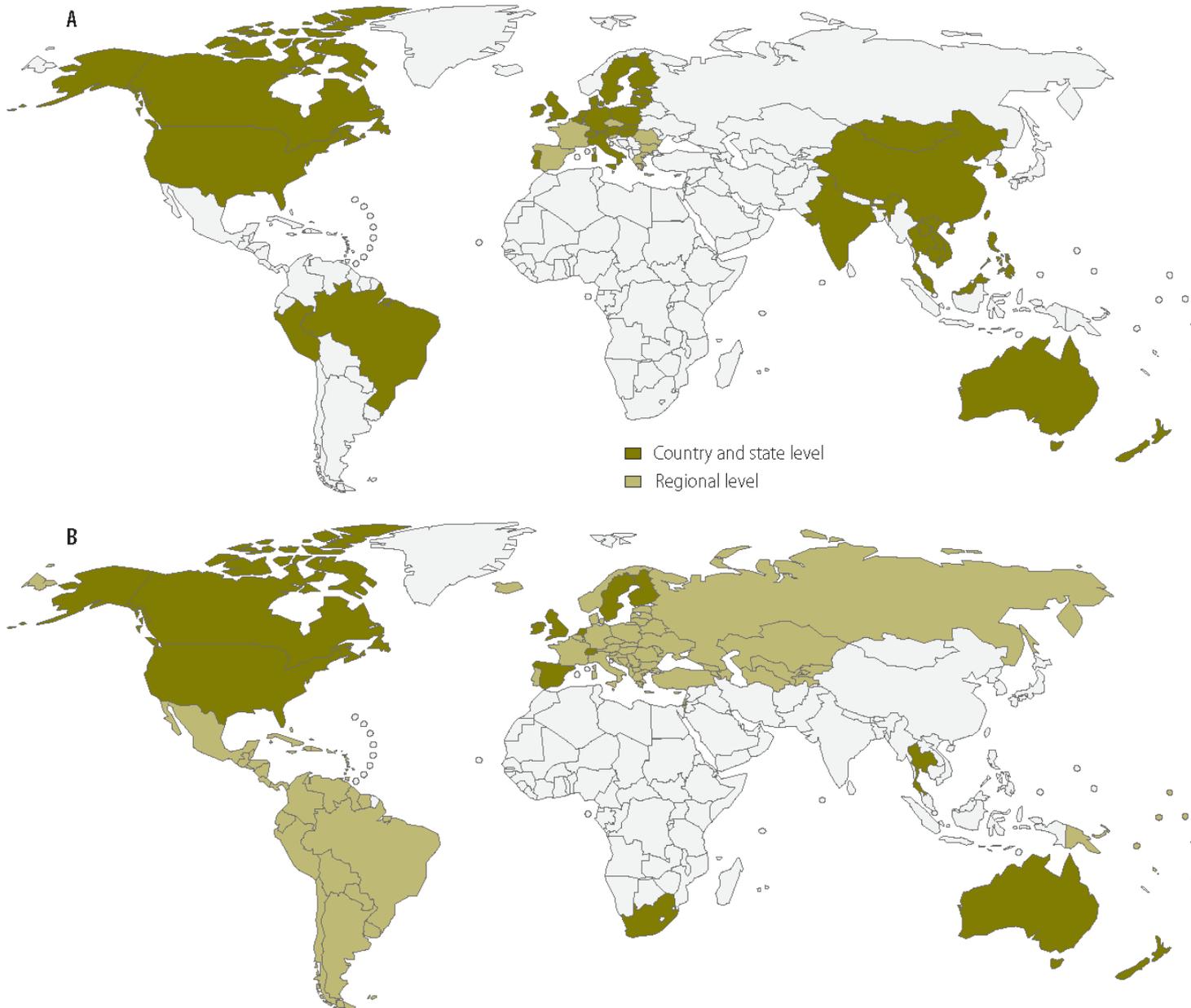
TRESPASSERS
WILL BE
PROSECUTED

Health Impact Assessments in Australia & New Zealand 2005-2009



Source: Harris E, Baum F, Harris-Roxas B, Kemp L, Spickett J, Keleher H, Harris M, Morgan R, Dannenberg A, Sukkumnoed D, Wendel A. *The effectiveness of health impact assessments conducted in Australia and New Zealand*; Australian Research Council Discovery Project Grants; 2010-2011. [DP1096211]

Fig. 1. Countries, states and regions that (A) are actively promoting health impact assessment (HIA) through a policy, regulation or other means of endorsement and (B) have produced guidelines on HIA



Source: Winkler M et al. (2013) Untapped potential of health impact assessment, Bull World Health Organ 2013;91:298–305. doi:10.2471/BLT.12.112318

Section 2

A detailed case study: Green Square, Sydney

Gadigal land





聖宮

聖澤長流

財源廣進

洪恩廣被

REED

PAPER

PRODUCTS



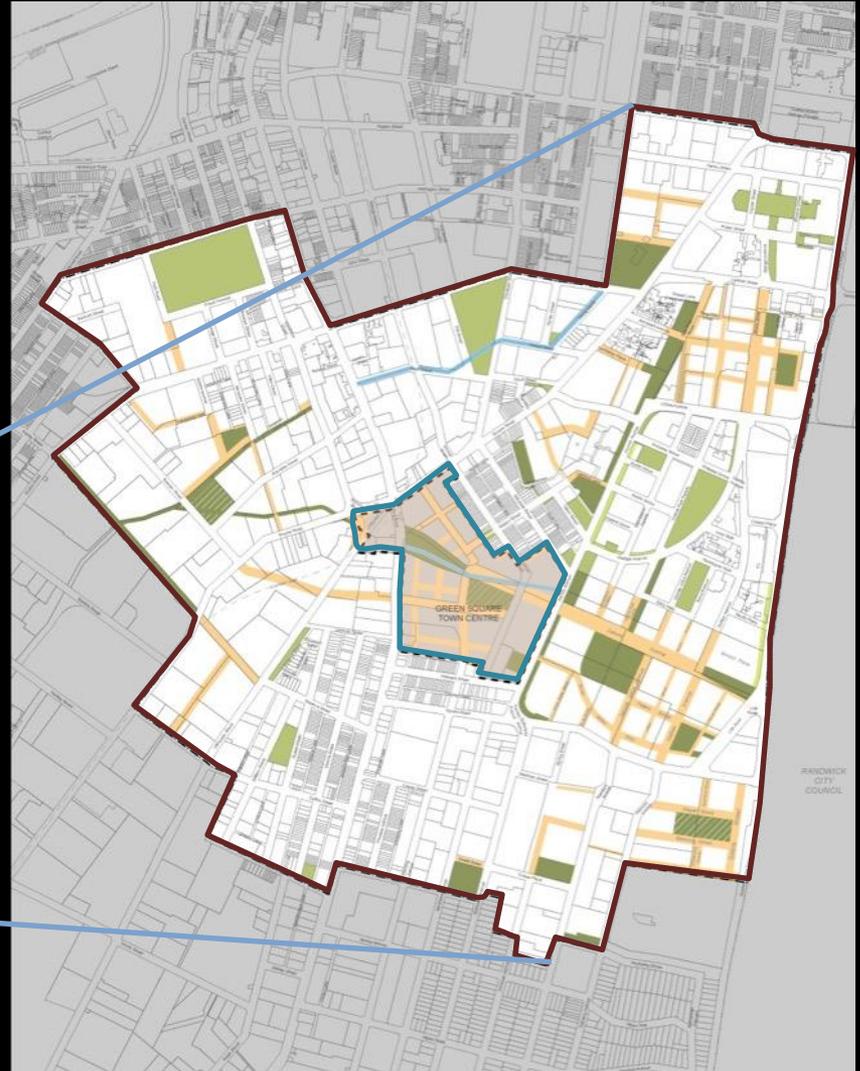


278 hectares located halfway between Sydney's CBD and airport

\$13 billion estimated total development value

61,000 residents, 21,000 jobs









1999

3,000 residents

2030

61,000 residents

An aerial rendering of a modern urban development. The scene features several high-rise apartment buildings with white facades and balconies. In the center, there is a large, vibrant green park area with many people walking and sitting. To the left of the park, there is a swimming pool with a blue surface and a surrounding deck. The area is surrounded by paved roads, sidewalks, and various trees, including palm trees and deciduous trees. The overall atmosphere is bright and sunny, suggesting a high-quality, walkable urban environment.

61,000 people in 2.78 km²

21,942 per km²

Higher density than

**Manhattan, Cairo,
Paris, or Colombo**

A focus on
children



	Proportion of households in Green Square (%)	Proportion of local growth between 2011-16 (%)	Proportion of households in rest of City of Sydney
Couples with children	13.8	42.7	10.3
Couples without children	30.1	82.5	28.2
Sole parent + other family	8.4	24.1	7.4
Group households	17.4	106.7	14.2
Lone-person households	30.3	36.3	39.9
All households	100.0	53.8	100.0



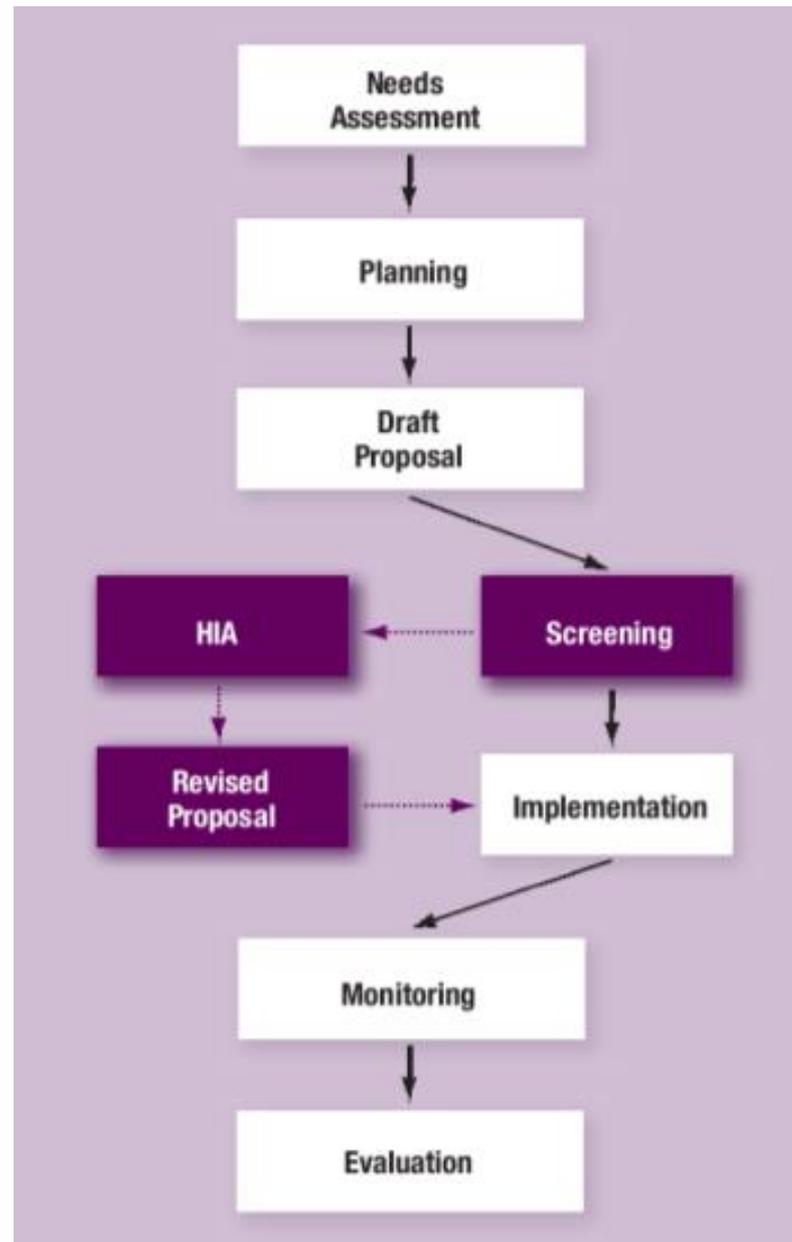
The first
1,000 days

HEALTH IMPACT ASSESSMENT: A PRACTICAL GUIDE



NSW HEALTH

Centre for Health Equity Training, Research and Evaluation



An architectural rendering of a modern residential and community building complex. The scene features a mix of architectural styles: a traditional brick building with white window shutters on the left, and a more contemporary structure with a prominent, layered, copper-colored canopy supported by thin columns in the center. In the background, a multi-story glass-fronted building is visible. The foreground is a paved walkway with a brick wall and a large, sculptural stone element. A lush green lawn with various trees and people walking and sitting adds to the vibrant, community-oriented atmosphere. The sky is blue with scattered white clouds.

Children

Transport

Affordable housing

Social and community infrastructure

Child health

Child development

Direct Impacts

- Bike and pedestrian infrastructure
- Access to parks and green space
- Exposure to traffic
- Exposure to air pollution
- Overcrowding
- Access to schools/childcare
- Poor quality housing
- Living vertically

Intermediate Impacts

- Physical activity
- Perception of safety
- Traffic accidents
- Social cohesion/networks
- Family dysfunction

Potential Health Impacts

- Overweight and obesity
- Mental and physical health
- Stigma and poor self esteem
- Sleep disturbance
- Traffic injuries
- Parental stress
- Child development
- Behavioural problems

Well being

Quality of life

Education outcomes



Potential impacts on children

Often overlooked in development

Potential impacts

Dwelling/apartment block level

- Pressure to keep quiet
- Lack of safe supervised outdoor areas
- Pressure to reduce floor space for play, storage, bikes, etc.

Child blind planning

Potential impacts

Precinct/neighbourhood level

- Quality and number of schools
- Lack large open places such as ovals and basketball courts
- Limited safe walking or riding corridors
- “Wild places” for children in natural environment
- Limited ability to supervise children playing outside



High-level recommendations

1. Urgent investment in adequate, well-appointed schools
2. Support for City of Sydney investment in recreational facilities
3. Creation of “wild places” for children and increased open space
4. Safety for walking and riding in the area
5. Processes to promote safety in development phase
6. Continued advocacy for no changes to building codes

Section 3

Lessons and reflections from 15 years of HIAs

What makes an HIA more likely to make a change

Focusing on implementation

Shared understanding – about health and the purpose of the HIA

Enabling discussion of alternatives

Involving municipal government and health agencies directly in the process

Time

The role of individuals matters

Roles

Regulator

Commissioner

Assessor

Reviewer

But sometimes these are the same people

	Mandated	Decision support	Advocacy	Community led
Regulator	Government	Government	Not usually regulated	Varies (not usually regulated)
Commissioner	Industry/ proponent	Government	Not required, done by different actors	Not required, done by community
Assessor	Consultant	Government/ stakeholder/ consultant	Different actors, usually with technical support	Community, usual with support
Reviewer	Government/ public comment	Government	Usually not reviewed/ public scrutiny	Usually not reviewed/ public scrutiny

Institutionalisation – The quest for a home for HIA

Broad approach 1: Requiring, supporting and promoting the use of HIA

1. Health as part of environmental impact assessment by law
2. Requiring separate HIAs by law
3. Giving Ministers power to require HIAs at their discretion
4. Communities have the right to request HIA by law
5. Support for HIA in regulations, but not always required

Broad approach 2: Health within government processes

1. Review of all policies to see if an HIA is required
2. Voluntary use of health lenses or statements

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Tenants' Union of NSW – Julie Foreman

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