

Towards the definition of HIA in Italy

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Introduction

- In EIAs/SEAs processes the consideration of health issues is already recommended in the general consideration of the environment, however <u>methodologies are not clearly articulated</u>
- The lack of best practice methodologies often results in assessments limited in scope, confined to gross and direct physical impacts

Spickett et al. Health Impact Assessment: Improving Its Effectiveness in the Enhancement of Health and Well-Being Int. J. Environ. Res. Public Health 2015. Editorial



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Article

Health Impact Assessment Practice and Potential for Integration within Environmental Impact and Strategic Environmental Assessments in Italy

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IAIA 2015 Florence 20-23 April 2015

this looks like the Italian story!

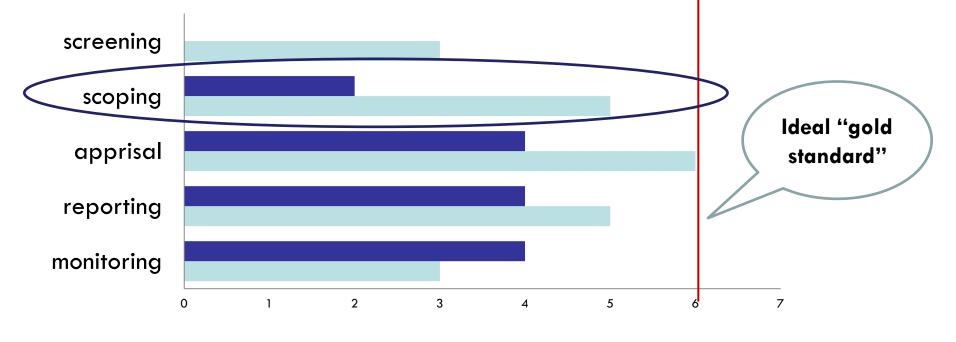


Review of relevant italian cases

- 3 cases of "formal" HIA as independent procedure (project for an incinerator plant siting, local plan with prevision of incinerator capacity doubling; regional policy effects on downstream risks from ionizing radiations in medical exams)
- 2 cases of health assessment "integrated" in EIA projects of strategic national relevance (new high-speed railway Turin-Lyon; risks from ILVA steelwork plant)
- "health chapter" within the EIA italian database (started in 1989)
- "health chapter" within the SEA italian database (started in 2008)
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Qualitative comparison of findings



EIA chp HIA

✓ Completeness of data
✓ specificity of methods
✓ phases compliance

FOCUS THE GAP!



Tools4HIA project

- The project CCM 2013 (funding from Ministry of Health) "Impact Assessment on Health (VIS): Guidelines and tools for evaluators and proposers", T4HIA began formally on March 24, 2014.
- The objects within the projects are all those plans and projects that require EIA/SEA for approval (screening is not discussed)



Literature review. Approaches and tools around the world

- 1. Commonwelth of Australia (2001) Health Impact Assessment Guidelines. <u>http://www.health.gov.au/internet/main/publishing.nsf/Content/9BA012184863E206CA257BF0001C1B0E/\$File/en</u> <u>v impact.pdf</u>
- 2. State of Alaska Department of Health and Social Services (2011) Technical Guidance for Health Impact Assessment (HIA) in Alaska. <u>http://www.epi.alaska.gov/hia/AlaskaHIAToolkit.pdf</u>
- 3. Health Impact Assessment Legislative and Administrative Frameworks. Australia (2005) http://www.health.vic.gov.au/archive/archive2014/nphp/workprog/lrn/legtools/hia_legframe.pdf
- 4. Health in Impact Assessments Opportunities not to be missed (2014) <u>http://www.euro.who.int/en/health-topics/environment-and-health/health-impact-assessment/publications/2014/health-in-impact-assessments-opportunities-not-to-be-missed</u>
- 5. Health Effects Assessment Tool (HEAT): An Innovative Guide for HIA in Resource Development Projects (2010) http://www.apho.org.uk/resource/item.aspx?RID=83805
- 6. Government of western Australia Department of Health (2010) Health Risk Assessment (Scoping) Guidelines http://www.public.health.wa.gov.au/cproot/3087/2/hra_scoping.pdf
- 7. WHO (2000) Evaluation and use of epidemiological evidence for environmental health risk assessment. http://www.euro.who.int/ data/assets/pdf file/0006/74733/E68940.pdf
- 8. Environmental health risk assessment. Guidelines for assessing human health risks from environmental hazard <u>http://www.health.gov.au/internet/main/publishing.nsf/Content/A12B57E41EC9F326CA257BF0001F9E7D/\$File/Do</u> <u>HA-EHRA-120910.pdf</u>



Recommendations. Minimum elements for a best practice

- 1. HIA is conducted as a component of EIA, with an explicit requirement that this occur;
- 2. Clear connecting mechanisms between: who gives data (health agencies and development), who provide the authorization (environment and planning authorities), who proposes the development;
- 3. A legislative requirement for HIA;
- 4. Clear guidelines for implementation and procedures, including referral mechanisms and working relationships between agencies regulating EIA and health agencies providing the audit;
- 5. Early health agency involvement in HIA processes, to ensure health impacts are identified early (scoping phase), facilitating thorough assessment;
- 6. EIA screening criteria should explicitly refer to human health;
- 7. Health experts should be involved in identifying and assessing health impacts;
- 8. Clear, mandatory and legally enforceable assessment requirements;
- 9. Consistent application of HIA requirements to all development decision-making, which involves significant health impacts (this links with the screening issue).

Ref. Health Impact Assessment Legislative and Administrative Frameworks. Australia 2005



T4HIA general objectives

1. Provide those involved in impact assessment across all levels of government and developers, along with their advisors, with an introduction to HIA and general guidance on the key steps involved.

YES, WE ARE WORKING ON IT

2. Develop <u>best practice methodologies for inspectors and</u> proposers

HERE HARD WORK IS EXPECTED!!!



General guidance. Terms of reference

Conditions for HIA?

- Existence of a policy, project, programme or plan, which is assessed and a decision on it is expected to be taken (application is for EIA/SEA)
- Distribution of effects across population is described (define what population, what data)
- Dialogue between relevant stakeholders is established (challenging within EIA)

Gulis and Paget. What is and what is not Health Impact AssessmentEuropean .Journal of Public Health, Vol. 24, No. 6, 874



General objectives

3. Training for operators of health departments and environmental agencies

TIMELINE FOR COURSES IS FIXED

4. Case studies selected based on criteria of complexity and geographical location

A RECOGNITION IS IN COURSE



Operational guide

All projects entering the EIA/SEA process

- A scoping tool has to be adapted for: identify health det. crossing with the impacted environmental elements by a matrix (use a wider list of determinants at start)
- For each health outcome provide the list of information that health assessment can eventually add (see WHO reference list, eventually expand it)
- Add a list of open data repository by kind of health data needed (if not provided define agreement with authorities)



Health influence (often part of EIS)	Information added by HIA
Air – criteria pollutants	 Baseline prevalence of relevant diseases, Local concerns Impact pathways, susceptibility analysis, cumulative factors
Water – metals, organics, and microbial pollution	 Baseline prevalence of relevant diseases Local concerns/ traditional environmental knowledge Often discussion of potential impacts: what discharges are expected, what health effects do they cause, what are the pathways through which they might contact people? Impact pathways, diet/subsistence practices, cumulative factors. Sometimes: incorporating health risk assessment (HRA) approach



Health influence (often part of EIS) (continued)	Information added by HIA (continued)
Noise	 Baseline prevalence of relevant diseases Local concerns/traditional environmental knowledge Identify vulnerable populations (e. g. schools), locations relevant to sources (truck traffic, operations equipment) Mitigations: sound walls and housing modifications, truck routes, hours of operation.
Demographic change – for example, influx of non-resident workers	 Potential impact pathways: Strain on services Social change: violence, crime Infectious disease
Economy – revenues	 Service needs – education, water/sanitation, public safety, clinics/ hospitals, emergency medical services
Economy – costs	 Change in demands/length of hospital stays hospitals, emergency services, police, fire



Output

- Supporting tool identifing tasks for the scoping phase
- Collect missing information on health and use the environmental context data
- Introduce early the health consideration within the project definition
- Network creation of relevant stakeholders for consultation



Limitations

- A long process to define a national HIA guideline (but we have already started!)
- Screening of proposals is out of the project objectives
- health knowledge is not supported by Env. sector and training of participants should be extended
- and other more..(please, suggest!!)