

**PRELIMINARY STATEMENT REGARDING THE IMPLEMENTATION OF HEALTH IMPACT ASSESSMENT
AT THE FEDERAL LEVEL**

Context

Hosted by the Institut national de santé publique du Québec, the National Collaborating Centre for Healthy Public Policy (NCCHPP) was created under the National Collaborating Centres Program, which is funded by the Public Health Agency of Canada.

The NCCHPP's mandate is to support the Canadian public health community's efforts to promote healthy public policy, by facilitating knowledge synthesis and translation and providing information about optimal strategies. This is the context of the NCCHPP's interest in Health Impact Assessment (HIA). In addition to being a strategy whose effectiveness has been demonstrated, HIA responds to the needs expressed by public health actors throughout Canada during consultations held by the Centre, given that this approach offers a practical and concrete means of action applicable to population health.

This statement to the Senate Subcommittee on Population Health is based on our expertise and on the following sources of information:

- A review of the national and international literature on HIA;
- The results of the mission carried out in 2007 in England, Wales and Switzerland, as well as other international exchanges;
- Observation of the Quebec experience;
- Exchanges during the Canadian Roundtable on this subject, held in February 2008.



Population health and HIA

It was with great interest that the NCCHPP read the reports produced by the Senate Subcommittee on Population Health. We noted the importance the subcommittee assigned to the social determinants of health and to the need for responsibility for health to be shared by all sectors of society. It has, in fact, long been recognized that health gains in developed countries such as Canada are necessarily predicated on a reduction in social health inequalities and better interaction between the various levels and sectors of decision making. The subcommittee proposed HIA as a potential strategy for promoting the convergence among the government's various missions that is required for the benefit of population health. We believe this reflects the concerns of the Canadian public health community as expressed during our user consultation meetings and more recently, during a national roundtable on the relevance of this approach.

Questions of the subcommittee

We understand that the subcommittee is interested in learning the points of view of various experts regarding two broad questions:

- Is it necessary and realistic to implement a health impact assessment mechanism at the federal level?
- And, if so, what roles would be played by the various supporting authorities and agencies?

In response, we would like to point to the fact that the governmental HIA movement, which we have seen develop over the last decade in Europe, in Oceania and, more recently, in Asia, draws support from the success obtained in the area of environmental impact assessment, as applied to large development projects. The United States were the first, in 1969, to introduce an obligation in this area. Today, this obligation exists in all industrialized countries and concern for the environment has become a common, shared value. Many authors believe that the time has come for the same phenomenon to occur in the area of population health.

As underlined in the subcommittee's report, Canada is a rich country that benefits from many advantages and resources, which can be mobilized in support of the real improvement of its population's health.

The conditions and challenges surrounding the establishment of HIA

National and international experiences have provided us with information about the conditions that favour the establishment and implementation of mechanisms such as HIA within governments, as well as the challenges this presents. These conditions and challenges can be divided into the following three broad subject areas:

1-Leadership and strong political support

2-Institutional arrangements

3-Support for knowledge development

1. Strong leadership and political support

The practice of HIA at every level of government requires a significant effort on the part of all the actors involved. Those in the health sector must provide their support and expertise, while those working in other sectors must add a new dimension to the factors to be considered during policy analysis. The practice of HIA at the governmental level involves a change in organizational culture and the development of new abilities and new ways of doing things. A university study group, the Groupe d'étude sur les politiques publiques et la santé (GÉPPS), has been examining the implementation of HIA in Quebec. The focus of this group is public policy and health. Some of the difficulties they have seen arise within the Quebec public service

involve the delicate relationship between the administrative and the political and the fact that this approach impinges on the sovereignty of other departments. The various measures that seem useful in dealing with such difficulties are:

- Institutionalization of the practice (for e.g., regulations making HIA mandatory), which ensures continuity beyond the involvement of the initial promoters;
- The existence of an authority responsible for accountability or for monitoring the establishment and implementation of the measure;
- A clear position taken at the highest level of authority in the form of a public statement to provide solid grounding for the legitimization of the efforts of those who must stake out new territory. Examples of such official statements are on record in the United Kingdom and with the European Commission;
- The establishment of population health objectives based on a long-term vision.

2. Institutional arrangements

We have observed that the establishment of the practice of HIA requires departmental adjustments, both in terms of interdepartmental relationships and of the relationship between departments and legislative authorities. The three main conditions whose necessity appears to emerge from documented experiences are:

- The establishment of interdepartmental mechanisms or the integration of this responsibility into existing mechanisms. This factor seems to be absolutely necessary to the promotion of knowledge exchange, which ensures better understanding of health determinants, on the one hand, and of administrative and political realities, on the other hand;
- Concern for the burden imposed on various departments by the multiplication of impact assessment clauses. With respect to this, the advantages and disadvantages of integrating HIA into other forms of impact assessment remain a matter of debate.
- A clear mechanism between the executive and the legislative.

3. Support for the development of knowledge and abilities

Among the difficulties discussed in the literature on the practice of HIA is that relating to the prospective assessment of a policy's effects. Attempting to predict with precision the effects of a complex intervention such as a policy, particularly at the federal level, represents a significant methodological challenge. Expectations regarding this process must be adjusted. HIA carried out in support of the decision-making process must also ensure a balance between the rigorousness of the health information produced and the usefulness of this information for decision making. An important study carried out recently by the WHO's European Observatory on Health Systems and Policies demonstrated that one of HIA's greatest uses lies in its ability to raise decision makers' awareness of the potential impacts of their decisions on health determinants. The proposed conditions for supporting this practice include:

- Contributions by external knowledge development organizations to analysis methods, to the politico-administrative process and to public health data;
- The ability to train and support the skills development of those carrying out HIA;
- Increased financial resources.

For example, the Quebec model included such measures as the creation of two full-time positions within the department of health and social services, a service agreement with the Institut national de santé publique du Québec and the funding of targeted research projects in collaboration with two funding agencies.

In conclusion

What we have learned from national and international experiences is that the establishment of HIA within governments creates a powerful lever for promoting the changes to culture, values and practices necessary to allow the sharing of responsibility for population health. However,

HIA is not sufficient in itself. It must be accompanied by strengthening measures related to follow-up, assessment and various forms of support. Experience has also shown that institutionalization creates the conditions necessary for the development of HIA and its integration into politico-administrative structures.

The NCCHPP has been in a position to observe the interest in this practice that exists across Canada as well as the presence of many resources capable of supporting this course of action. Moreover, the lessons drawn from the rich field of experience in environmental impact assessment and from provincial and international initiatives can definitely be built upon.

We hope that these few points of reference can shed light on the committee's work and we invite your researchers to bring forward any questions you may have, now or in the future.

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