The Purpose of this Document

Public health is the key to all human activities. The Department of Health (DOH) and many other public and private groups are committed to the protection and promotion of the public health of communities in Western Australia.

DOH believes that the health of a community should be considered in the development of policies and other developmental activities as part of decision-making processes. New proposals provide opportunities to enhance the health of communities as well as ensuring that public health risks are minimised. Over the past few years many proposals have been identified that have not adequately considered key health issues.

Consideration of health issues can be made using established mechanisms which demonstrate health components during the various stages of proposal development. One mechanism is to consider potential health issues during the planning stages of proposals using a formal process. This process is Health Impact Assessment (HIA).

This Discussion Paper has been developed to provide an overview of Health Impact Assessment and the means by which HIA can be integrated into current State and Local Government decision-making processes. The type of health issues to be considered and the depth of assessments should be decided by the people that the proposals are most likely to affect: the community.

Therefore this paper requests your feedback on what you consider to be the important and essential issues to be dealt with during assessments of proposals and the means by which this can occur. Questions have been posed at key sections throughout the paper.

Feedback from this discussion procedure will form the basis of recommendations to Government on the most appropriate means of delivering better consideration of health issues in new developments in Western Australia.

DOH will develop procedures by which both the positive and negative health impacts of Western Australian activities can be identified and examined during their planning stages to assist decision makers. There is potential for proposals to be improved if HIA outcomes can be included in decision making processes.

Consultation to date

DOH has undertaken extensive consultation with representatives of government, the private sector and tertiary education including coordination of facilitated workshops, to assist in the planning for implementation of the “HIA in WA” Project. The consultation was to determine how HIA could be integrated into existing approvals systems and to investigate potential roles for the Department.

Acknowledgements

Significant input to the development of this project has been given by government, industry and private tertiary education sector representatives. Their clarification of issues external to the activities of the Department of Health and discussion of the implications of the introduction of Health Impact Assessment in Western Australia is greatly appreciated.
Table of contents

The Purpose of this Document 1

Executive Summary 4

1. Introduction 5
   1.1 What is Health? 5
   1.2 Health and our physical environment 7
   1.3 Health and our social environment 7
   1.4 Health and Sustainable Development 8

2. What is Health Impact Assessment? 9
   2.1 Why Undertake Health Impact Assessment? 9
   2.2 The Values Underpinning Health Impact Assessment 9
   2.3 Health Impact Assessment Internationally 10
   2.4 Health Impact Assessment in Australia 11

3. Why have Health Impact Assessment in Western Australia? 12
   3.1 Linkages with Health Impact Assessment 12

4. Health Impact Assessment Implementation 15
   4.1 Stage: 1 Screening 15
   4.2 Stage: 2 Scoping 16
   4.3 Stage: 3 Profiling 16
   4.4 Stage: 4 Risk Assessment 17
   4.5 Stage: 5 Risk Management 17
   4.6 Stage: 6 Implementation and Decision Making 18
   4.7 Stage: 7 Evaluation 18

5. Community Engagement 19
   5.1 Community desire to be involved in planning 19
   5.2 Community concern about the health impacts of development 19
   5.3 Community engagement central to democracy 19
   5.4 Community participation in Health Impact Assessment 20
   5.5 Communities supportive of positive proposals 20

6. When is an HIA required? 21

7. The Health Impact Assessment strategies for Western Australia 22
   7.1 The key perspectives of Health Impact Assessment for Western Australia 22
8. Strategies for Health Impact Assessment Integration in Western Australia
   8.1 Environmental Impact Assessment and Health Impact Assessment
   8.2 State and Regional Land Use Planning and Development and Health Impact Assessment
   8.3 Local Government Land Use Planning and Development Processes and Health Impact Assessment
   8.4 Sustainability and Health Impact Assessment

9. Other Issues Relating to the Implementation of Health Impact Assessment
   9.1 Authority to require Health Impact Assessments
   9.2 Links with other agencies/decision makers
   9.3 Other sector links
   9.4 The Health Impact Assessment framework and supporting documentation
   9.5 Monitoring and auditing
   9.6 Liability
   9.7 Building capacity for Health Impact Assessment

10. Where To From Here?
11. References

Table of contents — figures
Figure 1.1 Factors that influence health
Figure 4.1 The Health Impact Assessment Framework
Figure 5.3.1 Community Engagement Continuum
Figure 8.1 State Planning Framework
Figure 8.2 General Outline of Statutory & Strategic Planning Progression - Local Government Setting
Figure 8.3 Sustainability Assessment Process - strategic decision model

Table of contents — tables
Table 8.1 SWOT Analysis of Health Impact Assessment and Environmental Impact Assessment integration
Table 8.2 SWOT Analysis of Health Impact Assessment and State Planning Framework integration
Table 8.3 SWOT Analysis of Health Impact Assessment and Local Government Planning integration
Table 8.4 SWOT Analysis of Health Impact Assessment and Sustainability Assessment integration
Executive Summary

Health provides us with the capacity to do what we want with our lives. It is determined by combinations of biological, behavioural, social, economic and environmental factors. Technological, industrial, economic and social development may bring hazards into our environment with the potential to harm community health or the environment.

Health Impact Assessment (HIA) is a systematic process which aims to identify and examine both the positive and negative health impacts of an activity during its planning stages and provide decision makers with information about how the activity may affect the health of people. HIA provides the opportunity for stakeholders through community engagement processes to act proactively to share possible community benefits as well as minimise potential future problems.

HIA has the values of sustainable development, promotion of health, democracy, equity and ethical use of evidence. Many of the health and wellbeing issues that are currently dealt with inadequately or inappropriately in development within WA can be addressed through HIA.

The HIA framework follows the format of:

- Screening
- Scoping
- Profiling
- Risk assessment
- Risk management
- Decision making
- Evaluation.

The protection and enhancement of the health and wellbeing of the population should be seen as the responsibility of all and processes to meet these objectives should be addressed by government as a whole. The best approach is to integrate HIA into current approvals procedures and not as a stand alone process implemented outside the approvals process.

There are four key strategies for HIA inclusion:

- within Environmental Impact Assessment and Strategic Assessments
- within State and Regional land use planning and development processes
- within Local Government land use planning and development processes
- within Sustainability considerations and Sustainability Assessments.

This Discussion Paper has been developed to provide an overview of Health Impact Assessment and the means by which HIA can be integrated into current State and Local Government decision-making processes. This paper requests your feedback on what you consider to be the important and essential issues to be dealt with during assessments of proposals and the means by which this can occur. Questions have been posed at key sections throughout the paper.
1. Introduction

1.1 What is Health?

Health provides us with the capacity to do what we want with our lives. Not only our activities and genetics contribute to our health: it is also determined by combinations of biological, behavioural, social, economic and environmental factors. The World Health Organisation (WHO) Constitution defines health as:

“...a (dynamic) state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity”.

Today we are living in a period of technological, industrial, economic and social change. These changes can bring many benefits, but they may also bring hazards that have the potential to harm the health of our community or the environment. Recent global studies coordinated by WHO into the environmental burden of disease indicate that: “globally nearly one quarter of all deaths and of the total disease burden can be attributed to the environment”.

We know that the better off live years longer and have fewer illnesses than poorer people. Our living and working conditions can have both positive and negative impacts upon our health; affecting us as individuals and as whole communities. Issues such as education levels, employment, nutritional status, physical activity or proximity to environmental hazards, demonstrate that the most disadvantaged groups have the poorest health and the highest exposure to health-damaging risk factors. Differences in political, social, economic and environmental conditions within populations mean that some groups in society may not achieve their full health potential.

The figure overleaf (Figure1.1) provides an overview of some of the factors that may give rise to positive and negative health outcomes.
Protection and enhancement of human health are priorities in Australia. The basic entitlements and responsibilities required to maintain and improve the quality of health for all Australians have been highlighted in the National Environmental Health Strategy\(^1\). These responsibilities and entitlements operate at the individual, community, business, industry and government level.

The factors and conditions that influence health outcomes are referred to as the determinants of health\(^2\) and the determinants of health that may be most influenced through HIA include those linked to:

- the physical environment
- the social environment
- sustainable development.
1.2 Health and our physical environment

Environmental health considers those aspects of human health that are determined by the environment. It includes both direct effects on people of environmental factors, such as physical, chemical and biological agents, and the indirect effects on health and wellbeing of broad psychosocial factors, including housing. The World Health Organisation has defined environmental health7 as comprising:

“...those aspects of human health, including quality of life, that are determined by physical, chemical, biological, social, and psychological factors in the environment. It also refers to the theory and practice of assessing, correcting, controlling, and preventing those factors in the environment that can potentially affect adversely the health of present and future generations”.

We often take for granted services such as the provision of high quality drinking water and sanitation, nutritious and safe food, disease control systems and housing conditions. Improvements in these over past decades through the oversight of Health and Environment sectors have been central to the significant improvements in quality of life and longevity we enjoy.

More could be done to protect public health or improve the environments of certain sectors within the community8. Degradation and increased environmental stress may lead to new hazards and disease9 and the design of living environments can lead to significant health outcomes. Pressures on the environment are creating new environmental health hazards and may lead to the re-emergence of old ones. There is growing acceptance that consideration of the links between health and the environment is essential in decisions made about the way our society and its environment develop.

The most significant environmental determinant of health is the built environment. The origins of land use planning and zoning were the desire to ensure that society’s industrial and commercial activities do not result in adverse public health outcomes10. Most land use activities in WA contribute to positive health outcomes yet evidence suggests that better alliances with the health sector could reduce the burdens produced by co-location of inappropriate activities.

Aspects of the built environment that have the potential to affect health include:

- Provision and location of services
- Building design: homes, schools, workplaces, public and other buildings
- Urban planning: location of residential, commercial and industrial areas, access to public transport, recreational facilities etc.
- Air pollution: both external and indoor
- Noise pollution
- Waste: the products we use and the wastes they generate
- Use of chemicals: environmental use, storage and disposal11.

1.3 Health and our social environment

Genetics and traditional risk factors such as physical activity, diet and tobacco use are not necessarily the best predictors of whether we stay healthy or become ill. The socio-economic status of individuals, communities and whole populations can determine whether a person has the physical, social and personal resources to identify and achieve personal aspirations, satisfy needs and cope with the environment.
Inequalities in social and economic status have been shown to be sound indicators of health status and influence the lifestyle choices of people\textsuperscript{12}. The important socio-economic determinants of health include:
- income inequality
- social inclusion and exclusion
- employment and job security
- working conditions
- contribution of the social economy
- early childhood care
- education
- food security
- housing.

1.4 Health and Sustainable Development

In Western Australia, an increased emphasis on sustainability has seen more proposals being assessed through an integrated consideration of potential environmental, economic and social impacts to meet the needs of both current and future generations. The elements which determine health can be found in all three dimensions of sustainability.
2. What is Health Impact Assessment?

Health Impact Assessment (HIA) is a systematic process which aims to identify and examine both the positive and negative health impacts of an activity during its planning stages and provide decision makers with information about how the activity may affect the health of people. There is potential for the proposal to be improved if decision makers can be influenced through HIA outcomes.

The World Health Organisation’s (WHO) definition of HIA\textsuperscript{13} is:

“...a combination of procedures, methods and tools by which a policy, programme or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population”.

Recently, this has included trying to consider where possible the unanticipated effects of actions on the health of defined populations\textsuperscript{14}. For example, the design of combined walk/cycle paths may stimulate increased mobility by the more physically able within communities but the presence of bicyclists may impede use by groups for whom increased activity would be valuable such as the aged or overweight.

The HIA process provides for a holistic assessment of the wider determinants of health such as lifestyle, amenity or public policy as well as the perceived risks associated with industrial development. HIA is used during the planning stages of any new development to consider the implications of possible activities in relation to their impact on individual and collective health and well-being. HIA provides decision makers with information about how any policy, programme or project may affect the health of people and thus tries to influence decision makers to improve the proposal.

2.1 Why Undertake Health Impact Assessment?

HIA provides a tool for assessing health issues identified during proposal development. This formalised process provides opportunities for proponents and other stakeholders to act proactively to share possible community benefits as well as minimise potential future problems.

The key reasons to do HIA are\textsuperscript{15}:

- To assist proponents to consider all dimensions of sustainability
- To assist proponents incorporate evidence into proposals
- To promote cross-sectoral activities with other sectors
- To promote a participatory and consultative approach to proposal development
- To improve health and reduce health inequalities.

2.2 The Values Underpinning Health Impact Assessment

The following values are particularly important for HIA. These values provide a platform from which the benefits of HIA can be derived, and link it to the policy environment in which the assessment is being undertaken\textsuperscript{16,17}. 
Sustainable Development
Sustainable Development (SD) is about meeting the needs of current and future generations through integration of environmental protection, social advancement, and economic prosperity. These elements are critical to ensuring healthy individuals and healthy communities. To achieve the goals of SD, it is essential to provide consultation mechanisms that identify factors that contribute to or detract from a healthy population. In addition, processes to protect public health and provide for economic development, social cohesion and management of the environment must be integrated.

Promotion of Health
Consultation should not only identify risks to the health of individual and communities, it should also contribute to attaining health gains through the proposal.

Democracy
Strong, democratic societies can be achieved through active public participation in transparent decision making processes. It is important that people have opportunities to participate in the consultation for proposals that may impact on their lives, and reach agreement with proponents about possible outcomes.

Equity
Individual physiological variation or behaviour can account for some health differences - but for many the opportunity for a healthy life is linked to social disadvantage. Consultation should examine how the proposal will affect the health of vulnerable people in terms of age, gender, ethnic background, socio-economic status or other positions of susceptibility. These vulnerable groups, where there is the potential for them to be affected, should be encouraged to participate in consultative processes.

Ethical use of evidence
The best available quantitative and qualitative evidence must be identified and incorporated into the consultation.

2.3 Health Impact Assessment Internationally
Recognition of the links between the environments we live in and human health has been highlighted internationally in agreements such as Rio Agenda 21, the Ottawa Charter, the World Health Organisation’s (WHO) Healthy Cities Programme and the Brundtland Commission. The Gothenburg Consensus Paper in 1999 outlined the main concepts and approaches for HIA.

Interrelationships between the private and public sectors have demonstrated the need to develop legal and administrative rules and procedures to assess the impacts of policies or programmes on specific factors or groups. Consideration of the links between health and development has been emphasised in Europe, Canada, New Zealand and other developed nations and by international organisations such as WHO and the World Bank. The following provide examples of the various types of international approaches to HIA:
Article 152 of the Amsterdam Treaty to establish the European Union states that “A high level of human health protection shall be ensured in the definition and implementation of all Community policies and activities”. In 2002, the publication of European Policy Health Impact Assessment established procedures to monitor the impact of European Community policies and activities on public health.

In Canada, Health Impact Assessment has strong links to the Environmental Assessment process and the focus is predominantly on the health impacts from projects. Some jurisdictional differences exist across the states including provisions within legislation, application to the proposal types and mechanisms for implementation.

Until recently, the focus for New Zealand has emphasised environmental health impacts associated with projects assessed under the environmental legislation: the Resource Management Act 1991 (NZ). Since 2004, with the publication by the Public Health Advisory Committee of guidance for policy makers on the application of HIA to policy development, HIA is being applied to public policy across sectors outside health.

The World Health Organisation has been a strong advocate of HIA since 1982 with the passing of Resolution WHA 35 -17 by the World Health Assembly, which encouraged member states to develop mechanisms to prevent adverse health outcomes from environmental hazards associated with development. Subsequent activities have resulted in WHO becoming one of the world’s leading establishments in all aspects of HIA for all proposal types.

Operational Policy 4.01: Environmental Assessment, 1999 of the World Bank requires environmental assessment of projects proposed for Bank financing to help ensure that they are environmentally sound and sustainable, and thus to improve decision making.

The Environmental Assessment must include an integrated consideration of the natural and social aspects of the project and encompasses the natural environment, human health and safety, social aspects and cross boundary and global environmental impacts.

2.4 Health Impact Assessment in Australia

In Australia, the use of HIA to improve policy/program development is a comparatively new phenomenon. In 1999, the National Environmental Health Strategy (NEHS) recognised that the creation and maintenance of environments that provide for good public health are closely linked to effective planning and management of these environments. The NEHS endorsed the inclusion of HIA in environmental impact assessment processes. All States and Territories in Australia have agreed that Health Impact Assessments will improve the consideration of health issues during the planning stages of development proposals.

Australia has become an international leader in the development of HIA as part of environmental health frameworks and many environmental health hazards are being considered as part of Environmental Impact Assessment (EIA). Each jurisdiction is taking a different approach to HIA and jurisdictional policies have resulted in a range of activities at both State and national levels.
3. Why have Health Impact Assessment in Western Australia?

Through “Better Planning, Better Services”\(^1\), the Government of WA undertook to improve the quality of life of all Western Australians. The vision statement aims to provide the best opportunities for people to lead better, longer and healthier lives.

This document also specifically states that to achieve the vision of an ecologically sustainable future, government agencies will need to operate collaboratively and cohesively; to work towards whole of government approaches to strategic planning, decision-making and resource allocation.

The release of the State Sustainability Strategy\(^2\) in 2003 ushered in a commitment by Government to a more holistic approach to consideration of issues associated with development. Around the same time, the inquiry into the Bellevue Fire confirmed growing community concern about developmental impacts on health and wellbeing in this state. DOH committed to developing and implementing Health Impact Assessments as part of the environmental and sustainability assessment processes\(^3\).

3.1 Linkages with Health Impact Assessment

3.1.1 Legislation

The existing public health legislation in Western Australia, the *Health Act 1911*, does not provide adequate responses to new and emerging environmental health problems or to threats from public health emergencies, possible epidemics or bioterrorism. It lacks the opportunities for shared goals and agreed outcomes that are common to newer legislation models. A reduced ability to provide for appropriate leadership in health protection and prevention of adverse health outcomes from activities beyond the scope of the *Health Act 1911* has frustrated government activities in this important area.

In 2005, DOH released a discussion paper; a *New Public Health Act for Western Australia*\(^4\), which discussed the issues and possibilities needed to take public health beyond its traditional and limited context. An important element was how a new Health Act might support the Government’s sustainability strategy on the basis that future questions of sustainability impact greatly on the public’s health and that good public health policy should make sustainability a key objective.

Similarly, the discussion paper also supported ongoing work in the area of HIA and argued that statutory provisions for the control of land use and the impacts that developments and ongoing activities on land have on their surrounding communities should include public health legislation. The paper argued that a new Health Act ought to support public health assessments.

3.1.2 Interagency activities

Decision makers within government are recognised through the *Environmental Protection Act 1986* and other legislation as public authorities empowered by law or state agreement to make decisions for proposals and include the Minister responsible for the legislation or agreement. Usually this means that until specific activities have been undertaken by proponents and agreed to by the various decision making authorities, a proposal may not proceed.
DOH has decision making authority with respect to specific activities defined under current health legislation. However, it has not been formally recognised as a decision making authority but provides health information and advice on request to other departments or authorities such as the Environmental Protection Authority (EPA), the Department of Environment and Conservation (DEC), the Western Australian Planning Commission (WAPC) or Local Governments (LG), about potential health concerns associated with certain activities.

The introduction of the Integrated Project Approvals System (IPAS) for the whole of Government assessment of complex and major projects (see EIA in Chapter 9) recognised the role of health in these proposals and DOH was invited to participate in the development and implementation of this process. Through IPAS proponents consider environmental and other resource development related health considerations during the planning stages of these projects.

However, although other current procedures have and continue to function adequately, decisions about what may require Department of Health advice is at the discretion of decision-making authorities. Currently, no mechanism exists for review of health potential in developmental activities, other than IPAS projects, without prior request from these authorities. The opportunity to screen proposals for possible health impacts and to influence decisions using health evidence to produce better community outcomes is thus diminished.

### 3.1.3 Health Risk Assessment

Much public concern about developments focuses on specific major industrial projects and the potential risks these may bring to communities. Communities surrounding potential projects raise issues such as possible air emissions, water contamination, wastes to be generated, use of chemicals and the hazards associated with their use and so on. Often the EPA advises proponents that the levels of concern from government or the community with respect to public health is such that a Health Risk Assessment must be undertaken.

Health Risk Assessment (HRA) provides a systematic process for characterising the nature and magnitude of the risks associated with environmental health hazards. The aim of health risk assessment is to present relevant and reliable information about the risks so that informed decisions can be made. DOH has produced a position paper *Health Risk Assessment in Western Australia*, which discusses in detail why HRA should be undertaken and justification for its various components.

The information determined through the assessment process also forms the basis for risk management processes, a key component of HIA. Currently management of the environment with respect to health risks from projects is carried by the Department of Environment and Conservation through registration, licensing and other procedures. The current role of DOH in the risk management process for these projects is restricted to providing advice on whether the public is protected from environmental hazards. Other formal mechanisms for management of health impacts are not available.

### 3.1.4 Community awareness

With increased knowledge and willingness to get involved in activities associated with developmental projects, members of the public are more ready to express concern about the health risks associated with new and existing proposals. Public consultation is regarded as an important component of all assessment procedures and a number of documents have been
produced in WA to assist proponents and others to ensure public input to proposals. However, as indicated previously, the most disadvantaged groups within communities are often those at the greatest risk and currently no mechanisms exist to ensure their needs are met. HIA requires equitable outcomes for all potentially affected community members and will support activities that acknowledge the health and wellbeing needs of vulnerable groups.

DOH has produced a document *Public Health Consultation: A Guide for developers* that extends the current government-endorsed consultation frameworks to include the consideration of health impacts of proposals during the community consultation process. This framework recognises that all parties have responsibilities towards one another and that transparency and accountability by all concerned are important. This document is available for public review and your comments on its content would also be valued.

**Stakeholder Questions**

1. Do you think Western Australia needs a process such as Health Impact Assessment?
2. Do you think implementing Health Impact Assessment will make any difference to the protection of public health?
4. Health Impact Assessment Implementation

HIA is a step-by-step process. At each step a series of questions must be answered before progressing to the next step. The following diagram (Figure 4.1) and text summarise the National Environmental Health Council (enHealth Council) HIA Guidelines and provide a clear outline of the HIA investigation process.

Figure 4.1 The Health Impact Assessment Framework

4.1 Stage 1: Screening

Not every proposal will require HIA. Screening provides a mechanism to consider the potential changes to health that may arise if the proposal is to be implemented and their significance. The evaluating authority normally carries out screening.

Screening will normally consider:

- The parameters of the proposal
- The potential impacts
- The level of assessment required
- The capacity of the proponent to conduct the HIA.

It is important to distinguish those proposals where further information is required before decisions on implementation can be made. For proposals where the potential health impacts are well understood, and appropriate control measures are normally applied or where there are negligible health impacts, reports to decision makers should demonstrate that consultation on health issues has been undertaken and considered and the reasons for no further health investigations.
4.2 Stage 2: Scoping

Should an HIA be required, scoping identifies the aims of the HIA, how the objectives are to be achieved and limits to the HIA. However, should a full HIA be required, new issues may arise through stakeholder consultation, especially the provision of local knowledge possibly not realised beforehand. It is important that agreements are reached amongst the proponents, decision makers, evaluating authority and stakeholders on how emerging issues are to be dealt with.

The form and extent of an HIA will depend on the location and the type of proposal. A number of different approaches provide for the complexity of the proposal and consideration of associated health issues in a manner appropriate to the proposal. A précis of these approaches appears below.

4.2.1 Rapid health impact assessments

Rapid health impact assessments are usually “desk top” exercises that assess potential health impacts in the light of information and evidence already available in published literature. This method provides a minimum quantification of potential health impacts and is often used as a means of screening and prioritising. Stakeholder consultation is usually limited to a single meeting with stakeholders.

4.2.2 Intermediate health impact assessments

Occasionally proposals may not require a comprehensive analysis of health impacts but there is justification for assessment beyond a basic literature review. It may be appropriate to establish procedures and assessments that will confirm potential health outcomes with appropriate management outcomes in consultation with stakeholders. These may apply where potential health impacts may not be significant but where little data is available or where communities or government have expressed concern.

4.2.3 Comprehensive health impact assessments

Once potential health impacts have been recognised and the need for a comprehensive assessment of the effects of the impacts has been identified, it is important that appropriate methodologies are defined. A comprehensive HIA will require extensive literature searches, analysis of existing data as well as collection and quantification of new data and sensitivity analysis specific to the proposal. Stakeholder participation is often extensive and appropriate evaluation mechanisms of both the process and the outcomes are established and implemented.

4.3 Stage 3: Profiling

As in other forms of impact assessment, it is important to have a good understanding of the environment in which the proposal is to be established. HIAs require clarification of the biophysical environment and the people within. Profiling includes assessment of the demographic details of the potentially affected community to identify characteristics that play an important role in determining health status as well as identify vulnerable groups. Data about the community that should be considered include its size, density, physical distribution, age and sex distribution, birth rate, ethnicity, socio-economic status and identification of at-risk groups.
The health status of the population is also established to provide baseline data against which any actions implemented can be assessed. Specific attention should be given to health parameters such as levels of employment, indicators of lifestyle behaviours affecting health and the distribution of vulnerable groups.

It is known that undertaking broad analysis of the health status of specific communities may be seen as an expensive and time consuming burden for some proposals. It is not envisaged that proponents would be required to collect health status information on every resident within potentially affected communities. However community demographic and health data are readily available through many sources including data collected by the Australian Bureau of Statistics, the Australian Institute of Health and Welfare and the Department of Health in WA. The extent of information required will be determined by the type of proposal.

It is envisaged that the breadth of local environmental and health data linked to development will grow once HIA is established.

A comprehensive guide to profiling can be found on the Department of Local Government and Regional Development’s website.

4.4 Stage 4: Risk Assessment

The risk assessment process determines the risks and benefits to the health and wellbeing of the community that may arise from the proposal. Hazards are further identified and predictions are made on the extent of the impacts based on available evidence. Predictions of impact can be based on evidence available through peer reviewed literature, established standards, expert opinion and may include stakeholder input.

Many documents are available which provide guidance on how to conduct health risk assessments. Stakeholders are referred specifically to the DOH’s Health Risk Assessment in Western Australia (2006) and the Environmental health risk assessment: guidelines for assessing human health risks from environmental hazards (2003) published by enHealth Council. You are also referred to Australian Standards\(^41\) AS 4360 and AS 4804 for details on risk management and occupational health and safety standard requirements.

4.5 Stage 5: Risk Management

Identified risks need to be prevented or reduced so that harm to the community is minimised or negated. Risk communication with stakeholders is an integral component of the risk management process and stakeholders should be informed and given opportunities for input during the process. Ongoing consultation throughout the process is carried out so that key issues raised through scoping are appropriately addressed and agreement reached with stakeholders on the means by which these can occur. Mechanisms to enhance positive health outcomes should also be addressed in this manner. Any limitations associated with risk management processes should be identified and explained.

Stakeholders are referred to the Guides to community consultation from the Department of Premier and Cabinet (DPC)\(^42\), the EPA/DEC\(^43\) and DOH\(^44\).
4.6 Stage 6: Implementation and Decision Making

The decisions on whether a state-based proposal is to go ahead are usually made by a Minister of Government after consultation with other Ministers. Recommendations and advice from any prior assessments are provided by the relevant agencies or specific bodies established for that purpose such as the Environmental Protection Authority or the Western Australian Planning Commission. Local Government Councils make decisions for their localities based on information provided by Council officers using internal protocols. A range of issues such as government or council policy, financial benefits or costs, employment opportunities as well as environmental impacts are included in the deliberations.

Decisions will often include conditions that must be met by the proponent and will address issues raised during the consultation and assessment phases. Proponents will be required to demonstrate how they intend complying with these conditions and to provide the decision maker with details on ongoing monitoring and reporting programmes if required.

4.7 Stage 7: Evaluation

For any programme to be able to demonstrate success it is important that appropriate evaluation is carried out. Evaluation of HIAs will require assessment of the process used to undertake the HIA, including the community engagement processes as well as consideration of the health outcomes and how well the process has achieved the aims of protecting public health. Mechanisms need to be developed to demonstrate the outcomes of assessments to government and the community.

**Stakeholder Questions**

3. Do we need different levels of assessments for different types of proposals or should a generic process be used which requires consideration of health during planning stages?

4. If different levels are considered important, what should be the basis for distinguishing between these levels?

5. Which sectors within communities should be given higher priority than others and under what circumstances to ensure equity for all?

6. Should a list of risk criteria, including both positive and negative risks be prescribed for each proposal type?
5. Community Engagement

Democracy is a key value of HIA. Strong, democratic societies can be achieved through active public participation in transparent decision making processes. It is important that people have opportunities to participate in the development and implementation of policies, programmes or projects that may impact on their lives.

5.1 Community desire to be involved in planning

Over the past few years, individuals and communities in Western Australia have been increasingly interested in proposals that may have the potential to influence their lives. Some have been concerned that proposals may have adverse effects on themselves or their families. Others have wanted greater opportunity to be involved in the decision-making processes: to have input into the developmental stages of proposals. Many State and Local Government activities have moved towards increased consultation with key individuals and groups within communities and recognition of community issues.

5.2 Community concern about the health impacts of development

Consultation frequently raises issues related to health and wellbeing. People want to be assured that development will not cause illness. The activities of some industries, such as those associated with asbestos, have been directly linked to disease among workers and their families and awareness of specific risks associated with the industry has increased. Other activities where direct links to ill health are not as obvious such as ongoing noise or odour generation have resulted in much unrest among residents and frustration by proprietors. Addressing potential adverse effects, including the perception of potential concern, during consultation should provide greater community assurance.

5.3 Community engagement central to democracy

Community engagement and participation are central to the Western Australian system of representative democracy and are very important components of the HIA process. Community engagement can be viewed as a set of methods and techniques that lie on a continuum, with increasing levels of engagement and influence (Figure 5.3.1).

Figure 5.3.1 Community Engagement Continuum

![Community Engagement Continuum]

When developing a HIA community engagement process, it is important to choose the level and method of engagement that suits the objectives of the project, programme or policy being considered. Each level embodies legitimate methods for community engagement - but the method chosen must match the desired outputs.
5.4 Community participation in Health Impact Assessment

Key community issues that have the potential to impact on health will add depth to the health and wellbeing scope of a development proposal. This does not mean that all the issues generated through participative processes will be included in the proposal however, those regarded by the community as having significant potential impact on the health and wellbeing of the community should definitely be included.

It is important that community engagement is initiated as early as possible in the HIA process and that it continues as consultation and/or active participation throughout the developmental stages rather than at discrete and disconnected times within the assessment framework.

As well as being a means to provide transparency to the HIA process, community engagement methodology needs to demonstrate balance, rigour and reliability. There must be some means of being able to determine the level of community concern about issues and the degree to which these issues will impact on health. The community engagement methods chosen should ensure disadvantaged and other key stakeholder individuals and groups have access to adequate and appropriate information as well as having opportunities to provide information about issues specific to their needs and participate in decision-making processes where appropriate. Methods should be developed to address potential conflicts so that a level of understanding and agreement within the community can be reached and there should be appropriate means to communicate the outcomes of the HIA to the community.

5.5 Communities supportive of positive proposals

Communities are also known to be supportive of activities where it can be shown that they will benefit from the implementation of proposals. Activities that have the potential to provide positive outcomes through consideration of the social determinants of health may contribute to reductions in social inequity and increase social wellbeing. There is also potential for proponents to benefit from improved community interaction and recognition of their role as good corporate citizens.

Stakeholder Question

7. Do you think there should be specific times and processes determined for community consultation in HIAs?
6. When is an Health Impact Assessment required?

It has been openly stated that Health Impact Assessments could be undertaken for almost anything and it could be argued that health and wellbeing considerations should be very high on decision making agendas. However HIA is a formalised process that requires time, resources and expertise. The benefits and restrictions of this process for a wide range of activities should be discussed. This Paper provides a range of strategies for the consideration of health and wellbeing in developments and asks you as a member of the Western Australian community to consider how best to provide for the health impacts that arise from development now and into the future.

DOH has agreed that HIAs in Western Australia should be integrated with existing decision-making processes. Should further processes develop in the future, DOH will work collaboratively with other stakeholders to progress these together.

Some of these strategies may require other decision makers to make changes to their procedures and activities. Resistance to change from accepted and traditional activities may arise. However, DOH has indicated that its strategies should not create major imposts for and restrictions to development and that the objectives of HIA are not to make development activities more difficult. Rather they are to try to ensure the best possible outcomes for the community by highlighting the benefits of the health findings that emerge from the HIA process.

It will not be feasible or practicable to carry out HIAs on every proposal. Screening is a systematic method to determine if an HIA should be undertaken on a proposal; to determine if health and equity issues can be effectively addressed.

Other well established HIA processes have identified key issues which should be considered when deciding whether or not to undertake an HIA and the level of concern that may be associated with these issues. Questions that should be asked about the relevance of undertaking an HIA include:

- Are the key elements of a particular proposal (or activity) well understood?
- Can the potential for impact on the wider determinants of health and equity on the population be determined?
- Is there the potential for impact on differing population groups, particularly the extent to which any disadvantaged, vulnerable or marginalised groups might be affected?
- What existing evidence and data sources are available?
- Have similar types of HIA been undertaken that might inform or negate the need for a dedicated HIA in this case?
- Do other alternatives to undertaking an HIA exist which would ensure health and equity issues are effectively considered by decision makers?
- What capacity and resources are needed and exist?

Similarly, it is important to filter out proposals that are unlikely to benefit from HIA. The following are examples of situations where an HIA may not be appropriate:

- The proposal may be seen by health and other experts as having little potential impact on health and equity issues;
- Impacts may be likely but the evidence is already well documented and it may be possible to develop evidence-based recommendations without the need for a fuller HIA;
- Under certain circumstances, decision makers may not be receptive to considering any evidence-based recommendations.
7. The Health Impact Assessment strategies for Western Australia

In Western Australia, proponents are required to address issues as determined by the approving agency or body under various legislative provisions. The consideration of health and wellbeing in development proposals would be greatly improved by the use of a formal process based on the HIA framework outlined in this paper. The size, complexity and importance of the proposal should determine the depth and breadth of the HIA. It is envisaged that the application of extended comprehensive HIAs will be infrequent.

However, public health should not be exclusively administered through only one government agency. Indeed, as already discussed, the key determinants of health lie outside the traditional ‘jurisdiction’ of DOH. The protection and enhancement of the health and wellbeing of the population should be seen as the responsibility of all and processes to meet these objectives should be addressed by government as a whole.

The best approach is to integrate HIA into current approvals procedures so that it is not regarded as a stand alone process implemented outside the approvals process.

It is proposed, however, that the DOH becomes the lead agency responsible for ensuring that health and wellbeing considerations are incorporated into the assessment of new proposals. As such, the DOH should coordinate the development of the HIA framework and the associated guidelines for proponents and assessment of proposals.

There are four key strategies for HIA inclusion:

- within Environmental Impact Assessment and Strategic Assessments
- within State and Regional land use planning and development processes
- within Local Government land use planning and development processes
- within Sustainability considerations and Sustainability Assessments.

These strategies and the outcomes of consultation are discussed in detail in the following pages including the advantages and disadvantages of each proposed pathway. The consultation provided an insight into some of the issues that will influence the acceptance of HIA into these approvals processes. Of significance are the strengths and weaknesses associated with integration of HIA into each approval process type and the mechanisms that could be used to overcome any difficulties.

7.1 The key perspectives of Health Impact Assessment for Western Australia

Whatever HIA framework is decided, the following eight principles must underpin any approach adopted within Western Australia.

1. Health and wellbeing are key components of sustainability principles.
2. Health equity and social justice are requirements for current and future generations.
3. The health and wellbeing of communities is connected to the quality of the environments in which these communities are found.
4. HIA takes a multidisciplinary, participatory approach and addressing health and wellbeing concerns should be undertaken through partnerships between stakeholders.
5. Government should facilitate the means by which stakeholders can address health and wellbeing concerns as well as ensure that HIA principles and values are adhered to.

6. New proposals in Western Australia should aim to control environmental health risks and prevent future problems.

7. Appropriate scientific rigour should be applied to gathering, interpretation and use of qualitative and quantitative evidence.

8. The Precautionary Principle:

The Wingspread Conference of 1998: *Implementing the Precautionary Principle*, designed a strategy to implement the Precautionary Principle in public health and environmental regulation. A consensus statement was developed:

“When an activity raises threats of harm to human health or the environment, precautionary measures should be taken even if some cause and effect relationships are not fully established scientifically. In this context the proponent of an activity, rather than the public, should bear the burden of proof. The process of applying the precautionary principle must be open, informed and democratic and must include potentially affected parties. It must also involve an examination of the full range of alternatives, including no action”.

**Stakeholder Question**

8. Is the Wingspread Statement appropriate for use as the basis for Principle Number 8 with respect to protection of public health?

Source: SEHN 2006"
8. Strategies for Health Impact Assessment Integration in Western Australia

The following section outlines the four strategies for integrating HIA into existing processes and discusses the strengths, weaknesses, opportunities, threats associated with each as well as mechanisms for resolution as highlighted during consultation. The four strategies are not presented in any particular order.

8.1 Environmental Impact Assessment and Health Impact Assessment

The Environmental Impact Assessment (EIA) process was established to protect the environment from developmental activities and had the protection of public health as one of its original aims. Health impacts of some proposal types addressed in EIA are limited to those associated with environmental impacts. There are other issues that could be included and community concern that focuses on the possible health effects from projects could be enhanced.

EIA is undertaken during the planning stages of proposed developments to determine potential environmental effects. EIA does not determine whether a development application will obtain approval, but it does improve the quantity and quality of information available to all parties involved in a specific development decision.

8.1.1 The Objectives of Environmental Impact Assessment in Western Australia

In Western Australia, the Environmental Protection Act 1986 (the EP Act) provides that the Environmental Protection Authority (EPA) may require development proposals to undergo environmental impact assessment under the Act before they can be implemented. One of the primary functions of the EPA is to conduct EIA.

The key objectives of the EPA in regard to EIA are:

- to ensure that proponents take primary responsibility for protection of the environment influenced by their proposals
- to ensure that best practicable measures are taken to minimise adverse impacts on the environment, and that proposals meet relevant environmental objectives and standards to protect the environment, and implement the principles of sustainability
- to provide opportunities for local community and public participation, as appropriate, during the assessment of proposals
- to encourage proponents to implement continuous improvement in environmental performance and the application of best practice environmental management in implementing their proposal and
- to ensure that independent, reliable advice is provided to the Government before decisions are made”.

8.1.2 What sorts of development proposals are subject to Environmental Impact Assessment?

Development proposals referred to the EPA are those that may have the potential to significantly impact the environment or where there may be public concern about the likely effects on the environment and health of communities (as defined under the EPAct). The EPA determines whether the proposal should be assessed for environmental impact and the level of assessment that should be undertaken. These proposals include a range of project types as well as new Town Planning Schemes or scheme amendments.
The EPA normally adopts one of five levels for assessing proposals and this sets the general form, content, timing and procedures of the assessment. The five levels of assessment are:

<table>
<thead>
<tr>
<th>A) Assessment on Referral Information</th>
<th>B) Proposal Unlikely to be Environmentally Acceptable</th>
<th>C) Environmental Protection Statement</th>
<th>D) Public Environmental Review</th>
<th>E) Environmental Review &amp; Management Programme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proposals raise one/small number of readily manageable, significant environmental factors, but it is considered that environmental conditions (Part IV Act) are required to ensure the proposal is implemented &amp; managed in an environmentally acceptable manner, and this cannot be appropriately achieved through conditions set by Decision Making Authorities (DMAs).</td>
<td>Proposal cannot meet the EPA’s environmental objectives - is clearly in contravention of established or applicable environmental policy, standards or procedures, could not be reasonably modified to meet the EPA’s environmental objectives, or are proposed in a special environmental area.</td>
<td>Proposals of local interest that raise a number of readily manageable significant environmental factors, where it is considered that environmental conditions (Part IV Act) are required to ensure proposal implemented &amp; managed in an environmentally acceptable manner, and where Authority judges that a formal public review period is unnecessary because the proponent has adequately consulted with stakeholders.</td>
<td>Proposals of local or regional significance that raise a number of significant environmental factors, some of which are considered complex and require detailed assessment to determine whether, and if so how, they can be managed. Proposals subject to a formal public review period, and the setting of environmental conditions under Part IV of the Act to ensure they are implemented and managed in an environmentally acceptable manner.</td>
<td>Proposals of State interest that raise a number of significant environmental issues, many of which are considered to be complex or of a strategic nature, and require substantial assessment to determine whether, and if so how, they can be managed in an acceptable manner. Proposals subject to extensive public review.</td>
</tr>
</tbody>
</table>

8.1.3 Is Health currently assessed in Environmental Impact Assessment?

Consider this

Industrial activities such as the expansion of regional port facilities are essential for future development within Western Australia. Ports support local industries and, with the booming mining industry, partnerships with a range of industry players are often entered into to assist with expansion costs. These partnerships provide certainty for the industrial partners through guaranteed provision of export services through the expanded port facilities. However, the location of facilities such as these is a limiting factor and often other development may have encroached on land suited for these facilities. For example, proposed expansions may locate port facilities closer to proposed residential areas. There is the potential for significant positive and negative health impacts from such developments. Processes to provide for health input in the early developmental stages of projects are not formally available.
In 2001, the Minister for State Development commissioned a review of the project development approvals system (Keating Review)\(^4\) to assess the potential to streamline the major projects approvals process in WA. The recommendations arising from this review provide a template for the establishment of processes to deliver certainty, accountability and a timely outcome for all resources related and industrial projects within the State Development portfolio. An Integrated Project Approvals System (IPAS) has been developed which provides processes for proponents of complex proposals where multiple approvals are required including timelines and scoping.

DOH reviews proposals and provides key health related advice to relevant Government stakeholders such as the EPA and WAPC about the potential health risks to the community associated with proposed projects in WA. In recognition of the need to include health issues in the planning stages of proposals DOH was invited to join the whole of government approvals processes.

With DOH inclusion in IPAS, environmental health risks associated with major projects are being addressed in the planning stages of complex projects through identification and provision of advice to proponents in the screening and scoping stages. Proponents and others now acknowledge many community concerns early in the process.

However, the issues raised in the IPAS process do not meet all the requirements for HIA and the mechanisms for decisions based on health issues other than environmental risk have not yet been addressed.

For other projects, EIA is restricted to examining the potentially harmful effects of a development upon the immediate community and consideration of health impacts is generally confined to environmental hazards. DOH input to the EIA process is at the discretion of the EPA - usually requests to the Environmental Health Directorate (EHD). The assessment activities of EHD include issues such as safe food and drinking water, management of wastewater processes, control for mosquito and other vector borne diseases and exposure protection from emissions to the environment such as radiation and chemicals. Toxicology experts within DOH provide an assessment and advisory service for the Health Risk Assessment (HRA) process. However, no formal agreement currently exists between the EPA and the DOH. The linking of HIA with EIA may provide opportunities to formalise current procedures and ensure a holistic assessment of health and well-being as part of the proponent’s development application.

HIA attempts to expand the knowledge associated with current EIA to look at the social, economic, lifestyle and behavioural costs and benefits to the immediate community as well as the ‘downstream’ direct and indirect impacts that will occur in other communities. As HIA provides for holistic assessments, the cumulative impacts from other neighbouring facilities can also be taken into account.

### 8.1.4 Strategic Environmental Assessments

Amendments to the *EPAct* in 2003 provided for the assessment of strategic proposals; known as Strategic Environmental Assessment (SEA)\(^5\). The *EPAct* provides for assessment of projects, plans, programs, policies, operations, undertakings or developments or changes in land use. However, strategic proposals also include those which are relatively conceptual or which encompass a range of significant proposals to be progressed over time. Therefore a strategic proposal is more likely to be a plan, program or policy, than an operation, undertaking or development.
Under s37B (2) of the EPAct:

“A proposal is a ‘strategic proposal’ if and to the extent to which it identifies
  a) a future proposal that will be a significant proposal; or
  b) future proposals likely, if implemented in combination with each other, to have a
     significant effect on the environment.”

The assessment for proposals through SEA is still developing but it is anticipated that where a proposal raises complex issues but is well-defined and capable of implementation, the EPA expects to adopt an assessment process consistent with Environmental Review and Management Program.

8.1.5 Consultation outcomes

The key issues raised during preliminary consultation for integration of HIA with EIA are shown in Table 8.1.

Table 8.1 SWOT Analysis of Health Impact Assessment and Environmental Impact Assessment integration

<table>
<thead>
<tr>
<th>Strengths of HIA and EIA</th>
<th>Weaknesses of HIA and EIA</th>
<th>Opportunities for HIA with EIA</th>
<th>Threats from HIA with EIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>EIA is an established process with:</td>
<td>DOH is not an official decision making authority (DMA) and:</td>
<td>EIA process provides a strong basis.</td>
<td>Lack of resources, capacity and expertise.</td>
</tr>
<tr>
<td>■ existing governance mechanisms</td>
<td>■ its role is advisory only</td>
<td>Mechanisms to identify and address health based community concerns during planning stages would be beneficial.</td>
<td>Need to ensure that appropriate frameworks, policies, guidelines and regulations are available for HIA.</td>
</tr>
<tr>
<td>■ allowance for integrated approaches</td>
<td>■ no administrative arrangements exist within DOH to enable formal decision making.</td>
<td>There is the likelihood that community participation and engagement would be increased.</td>
<td>Proponents may see HIA as threat to development that may incur significant costs.</td>
</tr>
<tr>
<td>■ transparent community input.</td>
<td>EIA’s focus is narrow and:</td>
<td>Stakeholders would find this more acceptable than a stand alone health assessment process.</td>
<td>Lack of transparency for decision-making.</td>
</tr>
<tr>
<td>Its preventative approach provides for inclusion of some health issues and the potential to include positive health issues.</td>
<td>■ deals only with large projects and addresses issues specific to each project</td>
<td>Better information sharing amongst agencies.</td>
<td></td>
</tr>
<tr>
<td>It provides great acceptance at all levels through:</td>
<td>■ the scope for links with other activities in near proximity or implications for populations elsewhere is limited.</td>
<td>Greater emphasis on sustainability.</td>
<td></td>
</tr>
<tr>
<td>■ commitment to EIA</td>
<td>Equity and accountability may be constrained due to:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>■ well-established education capacity.</td>
<td>■ decision-making being subject to political constraints that are not necessarily transparent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Its processes:</td>
<td>■ lack of community awareness of and engagement with EIA processes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>■ increase the likelihood of community engagement</td>
<td>Resourcing limitations exist throughout the EIA process.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>■ provide opportunities to build on existing professional capacities and processes.</td>
<td>EIA does not have the capacity to consider retrospective developments.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The mechanisms for resolution identified included:

- Appropriate legislative change to recognise DOH as a Decision Making Authority
- Appropriate Memoranda of Understanding between EPA and DOH
- Requirements for transparency in decision making at all levels of government
- Promotion of the sustainability advantages of HIA in EIA
- Agreements with the tertiary sector for HIA training
- Lead role of Centres such as the World Health Organization Collaborating Centre on Environmental Health Impact Assessment at Curtin University for independent endorsement and support
- DOH to provide relevant information, data and support and mechanisms to ensure certainty and consistency.

Stakeholder Questions

9. Which mechanisms would be most appropriate for implementation of HIA in Environmental Impact Assessment?
10. How should these mechanisms be implemented?
11. Are there any health criteria that should or should not be included in the Environment Impact Assessment of projects?

8.2 State and Regional Land Use Planning and Development and Health Impact Assessment

The Western Australian State Planning Framework (SPF) unites existing State and regional land use and development policies, strategies and guidelines within a central framework. The SPF provides the context for decision-making on land use and development in Western Australia. It is expressed through the “Statement of Planning Policy No. 1 State Planning Framework”, which expands upon the key principles of the State Planning Strategy in planning for sustainable land use and development. Figure 8.1 overleaf presents a diagrammatic representation of the SPF.

The State Planning Strategy (SPS) outlines a vision for the future of Western Australia and assists government in long-term land use planning. It provides a means of helping State and local governments and private industry to achieve a coordinated and integrated response to the challenges that the future growth and development of Western Australia will bring. It sets out the key principles relating to environment, community, economy, infrastructure and regional development that should guide the way in which future planning decisions are made.
The State Planning Framework is the overarching Statement of Planning Policy and is, therefore, numbered SPP1. Statements of Planning Policy dealing with key sectors of the framework (environment and natural resources, urban growth and settlement, the economy and employment, transport and infrastructure, and regional development) follow and are numbered SPP2-SPP6 (WAPC, 2005, page 1). Supplementary policies are many and varied and are subsets of the sector policy (see Statement of Planning Policy No. 1 State Planning Framework Variation 2 for full details).

* Statements of Planning Policy currently under preparation/ review
** Proposed Statements of Planning Policy
8.2.1 General principles for land use planning and development in Western Australia

The primary aim of planning is to ensure the fair, systematic, economic and sustainable use and development of land. The five key principles of planning expressed in the SPS present the concepts that underpin and influence good integrated decision-making in land use planning and development. These principles are described below.

8.2.2 Potential link to Health Impact Assessment

The detailed description of the Community principle of the SPS states that planning must anticipate and respond to the needs of existing and future communities through the provision of zoned and serviced land for housing, employment, recreation and open space, commercial and community facilities.

The SPS goes further to detail some key social determinants of health in relation to the contribution of planning to more sustainable communities. The Policy states:

“Planning should recognise the need for and, as far as practicable, contribute towards more sustainable communities by:

i. accommodating future population growth and providing housing choice and diversity to suit the needs of different households, including specialist housing needs, and the services they require;

ii. providing land for a range of accessible community resources, including affordable housing, places of employment, open space, education, health, cultural and community services;

iii. integrating land use and transport planning and promoting patterns of land use which reduce the need for transport, promote the use of public transport and reduce the dependence on private cars;

iv. encouraging high standards of urban design and a sense of neighbourhood and community identity;

v. promoting commercial areas as the focus for shopping, employment and community activities at the local, district and regional levels; and

vi. providing effective systems of community consultation at appropriate stages in the planning and development process.”
The issues of employment, transport, social support and social exclusion are key social determinants of health and can be investigated at local and regional levels through HIA processes. In effect, the SPS provides a mandate for promoting the use of HIA in the assessment of development proposals.

8.2.3 What does land use planning have to do with health and the health sector?

Consider this

A strategy of the San Francisco Department of Public Health to generate public awareness and action on the relationships between the built environment and human health resulted in the initiation of the Eastern Neighbourhoods Community Health Impact Assessment (ENCHIA). This project is a deliberative, multi-stakeholder and consensus-based approach to analysing how zoning plans for three San Francisco neighbourhoods affect those attributes of social and physical environments most important to health. These attributes include: social and economic diversity; adequate, affordable housing; convenient access to public transit; accessible parks and public spaces; infrastructure for pedestrians and bicyclists; neighbourhood public schools; security; businesses providing living-wage jobs and serving local needs; unpolluted air, soil, and water; cooperation, trust, and civic participation. (Source: San Francisco Department of Public Health http://www.sfdph.org/phes/ENCHIA.htm)

8.2.4 Planning decisions impact upon health: a physical activity example

Planning decisions determine the physical and social characteristics of neighbourhoods, such as walkability, access to public transport, access to recreational facilities and ease of social contact. These physical and social characteristics can reinforce unhealthy lifestyle habits and behaviours that lead to chronic disease, such as inadequate levels of physical activity. They can also contribute to and amplify the effects of social isolation and exclusion.

The creation of vibrant, pedestrian friendly urban spaces is now acknowledged as an essential element in the development of sustainable communities and local economies. The town planning profession is now actively encouraging the creation of opportunities for people to walk within their urban environments.

Studies have found that people are more likely to engage in the required amount of physical activity if they can incorporate it into their daily routine. As a result, public health professionals are emphasising the need to build communities that encourage people to walk and ride a bicycle as part of their normal everyday lifestyle. Reliance on physical activity as an alternative to car use is less likely to occur in many cites and towns unless they are designed or retrofitted to permit walking or bicycling.

Recent research shows the built environment not only shapes physical activity as it relates to walking for transportation; but is systematically related with body mass index and the likelihood of obesity.
8.2.5 Urban developments can result in social ‘clean-up costs’ that are not borne by the planning sector

Urban development is an economic activity. All economic activities have external consequences, and often these consequences are not costed and internalised by the producers. External consequences occur when an economic activity affects the welfare of people not directly involved in production.

The planning sector is the producer of urban development. Urban development often has environment and social consequences that represent ‘clean-up costs’. Social clean-up costs of some urban developments that are immediately recognisable by public health practitioners are increased obesity (obesity related to urban sprawl and design - reduced opportunities for physical activity), lower levels of physical activity, increased social isolation, increased incidence of crime, and road accidents involving pedestrians. The social costs of urban development are not borne by the planning sector. They are downstream costs usually borne by the health, law enforcement, and social services sectors.

8.2.6 Urban developments and other developmental activities

Planning decisions determine the use of land within local government boundaries such as the proximity of potentially antagonistic land uses to existing land uses. A prime example includes the proximity of residential areas to industrial regions. This does not have to include heavy industry - there are many industries regarded as “light” which still have the potential to adversely affect the health of the community through the release of emissions: airborne, water borne and wastes.

The location of potentially antagonistic industries within industrial precincts has the potential to adversely affect neighbouring industries or other facilities. Linked also is the potential to consider the health implications arising from “change of use” especially where a change results in greater potential for adverse impacts on others. These issues could be resolved with zoning within zoning to ensure that certain types of activities are appropriately located.

The emissions from individual facilities may have relatively benign impacts but when combined with others may produce levels that cumulatively have greater potential to result in adverse health impacts. It is potentially appropriate to consider the impacts on the air shed or other environmental components from all facilities within a region rather than considering each facility in isolation.

Other considerations for land use planning for all types of development include noise, one of the most common complaints to local governments, the adequacy of buffers, consideration of mechanisms for waste collection, waste minimisation processes or low water use and storage of potentially recyclable materials.
8.2.7 What is the current Health role in planning?
Currently, DOH acts as an advising agency in land use planning and development processes in regard to specific issues addressed under the Health Act 1911. These issues are predominantly those related to sanitation, provision of services such as drinking water and wastewater schemes, and other aspects addressed in the Health Act. Many of these issues are addressed through Local Government approvals processes. Requests to DOH arise from WAPC deliberations whilst those from the DPI are invariably linked to public consultation strategies. No formal agreement currently exists between DOH and the planning authorities.

8.2.8 What are the benefits of promoting health and preventing ill-health through Health Impact Assessment in planning?
Health related community concerns arising from development planning are often those that could be relatively easily alleviated if addressed early in the developmental phases, such as within policies or strategic plans.

The use of HIA as a tool to address health impacts of state and regional town planning would support planning agendas, could further enhance sustainability principles as well as provide sound evidence to produce better health outcomes. Linking HIA with state and regional land use planning and development activities will also provide opportunities to formalise current procedures, address the current health consideration deficiencies of these proposals and ensure a holistic assessment of health and well-being.

8.2.9 Consultation outcomes
The key issues raised during preliminary consultation for integration of HIA with SPF are shown in Table 8.2.
Table 8.2 SWOT Analysis of Health Impact Assessment and SPF integration

<table>
<thead>
<tr>
<th>Strengths of HIA and SPF</th>
<th>Weaknesses of HIA and SPF</th>
<th>Opportunities for HIA with SPF</th>
<th>Threats from HIA with SPF</th>
</tr>
</thead>
</table>
| SPF has an established state-wide strategic approach with:  
  - strategic focus and orientation  
  - extensive resources and expertise  
  - range of partners and processes.  
SPF can address existing issues as well as new proposals.  
Some research data already available.  
A current knowledge base exists. | Health has no champion in this sector.  
It will be difficult to evaluate cause and effect due to:  
  - long-term nature of benefits  
  - complexities involved.  
Limitations of current planning processes include:  
  - very little holistic health assessment in long-term planning  
  - determinations based on current knowledge and is very theoretical  
  - limited responsiveness to external factors  
  - a very narrow focus on health issues  
  - fragmented and uncoordinated links to other processes.  
There is limited community involvement which is often driven by ‘squeaky wheels’.  
Lack of resources, skills and consultation mechanisms.  
HIA processes and methodology require regulation, definition and the identification of priority risks. | Many opportunities for better health outcomes.  
Strengthening of the links between local government decision-making, EIA and SEA.  
Further transparency and clarity of process.  
Improved consultation, collaboration and cooperation.  
Provision of stronger partnerships between state and local governments as well as others within the community.  
Use of existing research available in health, in particular health economics.  
Provision for improved links to external resources.  
Build upon current community concerns regarding public health issues such as obesity and physical activity. | HIA for this sector is an uncertain process.  
Health outcomes might not necessarily be delivered or would be suboptimal.  
Difficulties for translation of planning policy into practice.  
Lack of integration across commonwealth, state and local programmes and processes.  
Non-land use planning such as financial processes could be prone to political inference.  
Current roles of health sector viewed by many especially the media and within political circles, as reactive to situations rather than in implementation of strategic processes.  
Consultation for planning processes usually not accessible to sub-populations as high level language is used. |

The mechanisms for resolution identified included:

- Strategic review of state and regional planning documents to include HIA and link HIA to the State Sustainability Strategy.
- State Government to strengthen the strategic role and direction of the WAPC/DPI to undertake HIA as part of state and regional planning.
- Include DOH or other health authority in membership of WAPC.
- Periodic review of the effectiveness of ‘planning instruments’ and update to include HIA.
- Creation of a HIA advisory body to develop HIA definition and processes, to assist implementation of HIA within specified timelines and ensure the periodic review of the effectiveness of HIA in the state and regional planning process.
Introduction of innovative resourcing options such as:
- Fee for service;
- Contracting in;
- Consultancies;
- Accreditation.

Creation of procedures and documents for the application of HIA (including health standards).

Public relations, education and awareness raising of the benefits of HIA for decision-makers, community, proponents and politicians.

Broaden the definition of planning to include health and wellbeing within the general principles and define a broad range of health outcomes, including positive health outcomes.

Encourage public advocacy and partnerships (PHAA, AMA, Govt.) by quarantining a percentage of the state health budget.

Develop relevant case studies to illustrate the use of data (cost-benefit analysis) to build the evidence base and feed into planning process.

Mandate an HIA outcomes audit and review State of Environment and State of Health reporting to identify gaps in data.

Demonstrate that community input is recognised through public reporting which provides submissions and responses.

Stakeholder Questions

12. Which mechanisms would be most appropriate for implementation of HIA in State and Regional Land Use Planning and Development?

13. How should these mechanisms be implemented?

14. Are there any health criteria which should or should not be included in the assessment of State and Regional Land Use Planning and Development?

8.3 Local Government Land Use Planning and Development Processes and Health Impact Assessment

Most Local Governments (LG) recognise that development proposals can have implications on the health and wellbeing of their communities. Nearly all proposals originate in or pass through LGs during the early stages of development. Most require LG approval and those referred to the EPA or WAPC usually require some degree of LG input. LGs also develop policies and undertake strategic planning for local communities. Whilst LGs are proactive in their approach to the wellbeing of their communities through community development and environmental health services initiatives, many do not require consideration of health issues in new land use and development proposals. The involvement of health experts, the consideration of health issues in the assessment of proposals, and the application of mitigating actions are inconsistently and infrequently applied.
8.3.1 Local Government Scheme Reviews and Amendments and the development of Local Planning Strategies

The Model Scheme Text (MST) is the template on which LG schemes are based and provides for certain matters to be considered by the decision-maker in determining a decision. However, health as a specific matter and the evidence to support matters that pertain to health are not included.

The Town Planning Act requires LGs to review their Schemes every five years. This presents an opportunity for LGs, in partnership with stakeholders and communities, to take a fresh look at the issues that are regulated and have a relationship to health and wellbeing. A scheme review requires the preparation of a Local Planning Strategy (LPS) - the core of the Local Planning Policy framework.

“The LPS will enable schemes to express more clearly the strategic vision, policies and proposals of a local government. It will also provide a means to interpret State and regional policies at the local level. Schemes will shift from being purely regulatory documents to become more tools for expressing and achieving a local government’s objectives, policies and proposals.”

The LPS becomes a central feature of a local scheme, setting out the LG’s general aims and intentions for future long-term growth and change. The LPS sets the local context for matters of state and regional significance and provides a strategic framework and justification for zoning reservations and associated development controls. It also provides an opportunity for the consideration of a broader sustainable development approach, including the social dimension of sustainability and the greater involvement of the community in planning for the future. Unlike the Model Scheme Text, the process for the development of Local Planning Strategies is not prescriptive. A common format is not proposed and each LG needs to adopt an LPS which most suits its area and local issues.

The MST Guidelines recommend that an LPS should contain the following elements:

- a description of the key characteristics of the local government, its regional context and major planning issues;
- a Statement of Aims explaining the strategic land use directions which the local government is seeking to pursue (these should become the aims of the scheme);
- land use or development opportunities and constraints which provide a context for local planning decisions;
- the links between strategic planning in the local government and the State and regional planning context, including the objectives of surrounding local governments in the region;
- strategic policy statements about key issues such as housing, industry and business, open space and recreation, transport, infrastructure, environment, townsites and rural land;
- more detailed policies and proposals for particular areas or specific issues contained in the strategy;
- an outline of how the strategy will be implemented (including reference to any local planning policies and guidelines which may be required), as well as planning scheme measures and proposals of the State and local government to facilitate development, including capital works.
8.3.2 Understanding the general steps in the decision-making process for land use and development in WA

The following diagram (Figure 8.2) presents a generalised outline of the steps in the decision-making process for land use and development within the local government setting.

**Figure 8.2 General Outline of Statutory & Strategic Planning Progression - Local Government Setting**

Diagram of the decision-making process for land use and development in WA, including steps such as:
- Internal LG building proposal
- Development/subdivision proposal from outside LG
- On private (council-zoned) land
- On council reserve
- Subdivision (e.g., Brownfield = front & back of existing block, Greenfield = large lot urban fringe devt.)
- Development proposal (e.g., residential, commercial & industrial applications)
- As per private proposal
- Commonly application is treated as per proposal on zoned land but may have more detailed consultation depending upon council policy.
- DPI is approving authority
- Major devt. that requires a change of zone/scheme amendment
- Proposal borders another state agency’s reserve (e.g., Main Roads, Swan River Trust)
- Proposal assessed by LG - may/may not involve consultation with adjoining land owners
- DPI grants subdivision approval subject to conditions
- DPI coordinates referral to DoE (for assessments) and other state gov. agencies as required
- Land owner deposits subdivision plans with Dept. Land Information for creation of new titles
- WAPC approval for LG to publicly advertise proposed amendment
- Comments sent back to LG
- LG advertises, integrates submissions to council report with recommendation for adoption with or without modification
- LG forwards council resolution to DPI (WAPC) for adoption
- Submissions from advertisement (if required) considered - Council report with recommendation for approval/refusal
- LG - applicant lodges new proposal
- Planning approval granted or refused
- Planning approval granted or refused
- Any project on land situated within the boundaries of a Town Planning Scheme must be approved under the Town Planning Development Act 1928. These approvals are generally the responsibility of the LG. Any zoning or rezoning applications are initiated by the LG and are approved by the Minister for Planning and Infrastructure. The ability of LGs to regulate activities in local communities is dependent on provisions within the Local Government Act 1995 as well as activities vested in LGs from other acts. There are no specific statutory instruments for undertaking assessment of the health impacts of proposals that do not trigger assessment by State authorities. However, the relevant Acts also do not preclude such assessment. Indeed, should an innovative LG wish to employ national best practice assessment procedures as part of its normal business there is no legislative (or appeals tribunal) barrier to this level of good decision making.
8.3.3 The potential health sector role in local government strategic land use planning

Consider this
The current trend for land developers to provide attractive grassed open spaces often with water features, may not consider the long term implications of use and maintenance of these areas. Issues such as location, provision of shade, mosquito breeding sites, long term water quality, and safe play areas for any age group or access for all among others may not have been considered with respect to the health and wellbeing of the future community. Early input of health considerations could result in better long term outcomes.

Unlike the statutory responsibility of the EPA to assess the environmental impacts of schemes and amendments, the DOH is not a specifically identified referral agency for the consideration of broad health matters within urban and regional planning. However, the health sector can significantly enhance strategic land use planning within LGs and help to prevent and/or ameliorate the fundamental barriers to healthy physical and social neighbourhood development by assisting LGs to incorporate health matters into the consideration of macro land use issues such as zoning (e.g. encouragement of mixed use), transport corridors, and recreational and open space reserves. By building strong partnerships with LGs, contributing the extensive body of research and evidence on the health impacts of planning, and helping to incorporate the critical success factors for the creation, enhancement and maintenance of healthier and more equitable communities, the health sector can play a vital role in sustainable development, and ‘pave the way’ for the integration of HIA into LG planning processes.

8.3.4 Consultation outcomes
The key issues raised during preliminary consultation for integration of HIA with LG Planning are shown in Table 8.3.
Table 8.3 SWOT Analysis of Health Impact Assessment and LG Planning integration

<table>
<thead>
<tr>
<th>Strengths of HIA in LG Planning</th>
<th>Weaknesses of HIA in LG Planning</th>
<th>Opportunities for HIA with LG Planning</th>
<th>Threats from HIA with LG Planning</th>
</tr>
</thead>
<tbody>
<tr>
<td>LG planning has well established processes including:</td>
<td>LGs operate with limited resources and competing priorities.</td>
<td>Long-term strategic benefits such as the development of more focused and integrated outcomes.</td>
<td>Current lack of an integrated legislative framework providing common rules and processes for assessments.</td>
</tr>
<tr>
<td>■ consultation with stakeholders;</td>
<td>No prescriptive guidelines are available to prioritise and direct scarce resources to HIA processes.</td>
<td>Improved management procedures.</td>
<td>Limited knowledge, skills and understanding of HIA.</td>
</tr>
<tr>
<td>■ integrated planning across divisions.</td>
<td>No statutory authority/mandate currently for an equitable, holistic approach to HIA.</td>
<td>Potential for improved formal and effective interagency partnerships and processes.</td>
<td>Resourcing issues could result in initial LG, industry and community resistance.</td>
</tr>
<tr>
<td>As the managers of land use planning, LG have:</td>
<td>Assessment approaches across regions by smaller LGs are inconsistent.</td>
<td>More comprehensive community involvement.</td>
<td>Expectations may be raised too high for delivery of outcomes.</td>
</tr>
<tr>
<td>■ control of detailed land use planning and development assessment;</td>
<td>Resistance to change could challenge staff and Councillors.</td>
<td>Opportunity for developers to contribute to community wellbeing.</td>
<td>May be difficult to administer especially related to enforceability and accountability.</td>
</tr>
<tr>
<td>■ flexibility to implement best practice and innovative processes;</td>
<td>Competing political priorities could compete to weaken the role of HIA.</td>
<td>Opportunity for LGs to redefine their role and assume a leadership role in best practice for and education of communities with respect to the social determinants of health.</td>
<td>Systems for communication and interface with community need clarification.</td>
</tr>
<tr>
<td>■ employment and training;</td>
<td>Relationship of HIA to ‘sustainability’ and wellbeing is currently unclear.</td>
<td></td>
<td>Potential for consultation fatigue.</td>
</tr>
<tr>
<td>■ community service arms with intimate knowledge of local conditions and resident communities.</td>
<td>The quantification of assessment outcomes may be difficult.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LG based HIA will support their focus on improved community wellbeing.</td>
<td>HIA could be at risk of pigeon-holing within particular areas/departments.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The mechanisms for resolution identified included:

- Development of appropriate communication plans with the general community, business, councillors and staff to build awareness and understanding. This should also include the Western Australian Local Government Association (WALGA) and other associated state government agencies.
- Statutory amendment of legislation to enable integrated consideration of HIA in developmental approval processes and the Local Planning Policy Framework (LPPF).
- Non-statutory formalising of HIA key performance indicators into corporate strategic planning and business planning which is based on Code of Practice for the State Sustainability Strategy.
- Development of a model business case for the true cost of HIA implementation at LG level.
- Explore legislative requirement to make contribution to health benefits by developer (Local Developer Contribution Plans).
Articulating the goals and objectives for a redefined role of LGs planning and management of communities that would be included in corporate strategic planning/business planning. Proposal of new models for funding the cost shift.

- Establish an LG/State HIA Reference Group to oversee HIA.
- MOU between state and LGs on HIA implementation and inclusion of HIA into State and Local Government Sustainability Partnership.
- Undertake pilot program to demonstrate the effectiveness of HIA in LG planning and identify community needs.
- Implement reward and recognition program for positive HIA implementation which is integrated with local government pilot program.
- Develop appropriate university degree or graduate programme.
- DOH to provide centralised information and guidance.

**Stakeholder Questions:**

15. Which mechanisms would be most appropriate for implementation of HIA in Local Government Scheme Reviews and Amendments and the development of Local Planning Strategies?

16. How should these mechanisms be implemented?

17. Are there any health criteria that should or should not be included in the assessment of Local Government Scheme Reviews and Amendments and the development of Local Planning Strategies?

### 8.4 Sustainability and Health Impact Assessment

“Sustainability assessment is a policy tool that can be used to provide information on the sustainability of an existing activity or new proposal or to promote the incorporation of sustainability principles into the development of new proposals. Sustainability assessment calls for consideration of the broad implications of a proposal or action, environmentally, socially, and economically, here and now, and further a field both spatially and temporally”.

*(Sustainability Background Paper, Government of Western Australia, 2004)*

In 2003, the Gallop Government released “Hope for the future: the Western Australian state sustainability strategy” (the SSS) followed by the “Sustainability code of practice for government agencies and resource guide for implementation” in 2004. These demonstrated a commitment by Government to the sustainability assessment of complex and strategic projects as well as policies, plans programmes, projects, agreements, legislative proposals and Cabinet submissions within Government.

The purposes of the Sustainability Code of Practice are to ensure agencies understand sustainability and are aware of their obligations in relation to the code’s goals, which are:

1. Planning, reporting and decision making are conducted in accordance with sustainability principles.
2. Agency operations support sustainability.
3. Public sector employees are encouraged and empowered to support sustainability.
Government agencies are required to produce Sustainability Action Plans to meet these objectives. Included in the requirements for the planning, reporting and decision making objective, agencies are required to:

1.3 Where appropriate, utilise sustainability assessment in planning and decision making.
1.4 Where relevant, incorporate sustainability principles and practices into legislation as it is reviewed, drafted or amended.
1.5 Where appropriate, actively engage stakeholders and the public, regardless of age, gender, culture, ability and location, in transparent policy development and decision-making processes.

Sustainability Assessments (SA) provide integrated advice on proposals through a simultaneous consideration of environmental, social and economic impacts to meet the needs of both current and future generations. Health and wellbeing are associated with each of the social, environmental and economic dimensions of sustainability.

To date the inclusion of health in SA has invariably focused on the provision of health services rather than a holistic approach to improving health potential and reducing adverse health outcomes. Engagement with health experts through the development of new policy and other activities within agencies which may have the potential to impact on the health and wellbeing of communities provides potential to improve the outcome of these proposals for communities.

A draft Sustainability Assessment Framework developed in WA in 2004 presents an idealised strategic decision model for the development of proposals that are informed at every stage by the sustainability assessment process. Note the similarities between the sustainability assessment process and the HIA process in the model below.

**Figure 8.3. Sustainability Assessment Process - strategic decision model**

<table>
<thead>
<tr>
<th>Development of Strategic Proposal</th>
<th>Sustainability Assessment</th>
<th>HIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Setting the Scene&lt;br&gt;Identify issues, desired outcomes, other objectives &amp; constraints, broad alternatives</td>
<td>Screening&lt;br&gt;Do we need to do comprehensive sustainability assessment?</td>
<td>Screening&lt;br&gt;Should we include HIA?</td>
</tr>
<tr>
<td>Strategic Alternatives &amp; Options</td>
<td>Scoping&lt;br&gt;Identify relevant sustainability factors, objectives and criteria</td>
<td>Scoping &amp; Profiling</td>
</tr>
<tr>
<td>Selection &amp; Refinement&lt;br&gt;Choose preferred alternatives &amp; fine-tune</td>
<td>Impact Assessment &amp; Mitigation</td>
<td>Risk Assessment</td>
</tr>
<tr>
<td>Decision &amp; Documentation&lt;br&gt;Final decision &amp; documentation</td>
<td>Documentation &amp; Evaluation</td>
<td>Implementation &amp; Decision-Making</td>
</tr>
<tr>
<td>Implementation &amp; Evaluation</td>
<td>Sustainability &amp; Monitoring&lt;br&gt;Monitor actual sustainability impacts</td>
<td>Monitoring, Auditing &amp; Evaluation</td>
</tr>
</tbody>
</table>
Possibly the greatest obstacles to SA is not the concepts but the fine detail and the fear of what will be required of proponents to meet objectives. Responses to this paper should not be a discussion of the advantages and disadvantages of SA but whether HIA could be used as a strategic tool to assist with the assessment of long term health and wellbeing outcomes of communities associated with development. Should support for HIA under these circumstances be demonstrated, the impetus for SA may be strengthened and clarity provided for directions to be taken.

8.4.1 Consultation outcomes
The key issues raised during preliminary consultation for integration of HIA with SA are shown in Table 8.1.

Consider this
Currently in Western Australia we have planning policy that allows childcare facilities to be located on major thoroughfares in areas zoned for commercial uses. International evidence has clearly demonstrated the potential adverse health effects upon children of prolonged exposure to vehicular fumes and the risks to children’s safety and health associated with heavy commercial traffic, including exposure to constantly high noise levels. This issue has raised considerable concern within our communities. The DPI has developed new policy in the form of a Bulletin that aims to improve the safety of children in childcare facilities by improving the location and development of childcare centres. This effort by a non-health agency to protect the health of children is notable. However, no provision currently exists for the DOH, or any other agency concerned with child health, development and wellbeing to formally engage with the DPI early in the development of such policy: which clearly has health as a main agenda. A process that enables early engagement and participation by the key stakeholders would ensure the provision of sound scientific evidence to support policies such as this in the developmental stage.
Table 8.4 SWOT Analysis of Health Impact Assessment and SA integration

<table>
<thead>
<tr>
<th>Strengths of SA and HIA</th>
<th>weaknesses of SA and HIA</th>
<th>Opportunities for SA with HIA</th>
<th>Threats from SA with HIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>SA’s ecological approach provides for:</td>
<td>Issues re sustainability assessments:</td>
<td>Great potential for this process (SA) to be used strategically through:</td>
<td>Perceived potential impacts for industry.</td>
</tr>
<tr>
<td>- universal features which can include social determinants of health</td>
<td>- lack of understanding of the concept</td>
<td>- an overarching policy framework to focus on the larger picture of development rather than individual projects.</td>
<td>May increase bureaucratic requirements.</td>
</tr>
<tr>
<td>- greater recognition and acceptance of health in sustainability</td>
<td>- very broad interpretation</td>
<td>- consideration of cumulative health and wellbeing impacts.</td>
<td>An absence of any one agency having responsibility for SA resourcing and implementation.</td>
</tr>
<tr>
<td>- meeting current and future health requirements.</td>
<td>- not consistently applied across government</td>
<td>Reduction of some of the controversy associated with current development processes.</td>
<td>Potential to trade off the environmental and social components against the economic returns.</td>
</tr>
<tr>
<td>Its strategic, integrated approach enables:</td>
<td>- poorly promoted</td>
<td>Community inclusiveness and opportunities for stakeholder and community input during the early stages.</td>
<td></td>
</tr>
<tr>
<td>- interdepartmental coordination</td>
<td>- requires concerted effort to build capacity across sectors.</td>
<td>Partnerships across government and other sectors can:</td>
<td></td>
</tr>
<tr>
<td>- amalgamation of multiple policy areas</td>
<td>Perceived lack of a uniform approach.</td>
<td>- enhance outcomes</td>
<td></td>
</tr>
<tr>
<td>- integration of qualitative assessments.</td>
<td>Potential for the process to be over-governed.</td>
<td>- provide transparency in decision making</td>
<td></td>
</tr>
</tbody>
</table>

The mechanisms for resolution identified included:

- Developing appropriate legislation.
- Ensuring key industry players champion SA and enter into partnerships with government.
- Use of established frameworks of wellbeing to provide appropriate indicators for SA.
- Development of appropriate sustainability criteria for strategic plans and projects assessments.
- Development of appropriate guidance documentation for proponents.
- Development of simple integrated assessment processes.

Stakeholder Questions

18. Which mechanisms would be most appropriate for implementation of HIA in Sustainability Assessment?
19. How should these mechanisms be implemented?
20. What vehicle should be used to ensure inclusion of health considerations in government activities including policy and strategic planning?
21. Are there any health criteria that should or should not be included in the assessment of government and other stakeholder policies and strategic planning?
9. Other Issues Relating to the Implementation of Health Impact Assessment

The consultation processes and internal investigations have demonstrated that the consideration of health issues in new development in Western Australia should not be constrained by approvals processes that focus on one sector. The development of major policies that are potentially applied to all areas of the State should have an assessment of the health and wellbeing implications included in the decision making discussions. Similarly, localised proposals that individually may only affect a small proportion of the community but when combined with others in a region could result in significant health outcomes need mechanisms to provide for assessments of cumulative impacts.

HIA should be applied to all types of proposals; that is, policies, programmes, plans and projects, to provide the greatest benefits to the people of Western Australia. Its objectives would be severely limited if it were restricted to the activities of any one decision making process.

9.1 Authority to require Health Impact Assessment

The Discussion Paper for the new Public Health Act also discussed the links between the environment, land use planning and health and indicated that the new act could support the requirements for HIA. This could be implemented through an inquiry power that could allow all issues of public health concern to be investigated and reported on in a public and transparent way. The mechanisms for this to occur are to be developed based on the outcomes of these discussion processes.

Stakeholder Questions

22. Under what circumstances should HIA be legislatively required to ensure decision-making includes the consideration of health and wellbeing impacts?

23. What regulatory requirements should be applied to DOH for any or all types and components of HIA?

9.2 Links with other agencies/decision makers

Most decision making for new development for all proposal types currently occurs without formalised input from the health sector. Without processes that provide appropriate evidence to assess the potential health impacts from development, the consideration of health issues focuses on established requirements under current legislation and request from Decision Making Authorities for advice from specific sectors within the Environmental Health Directorate. Decisions and associated conditions are established by the Minister for the specific department.

Stakeholder Questions

24. Should current decision-making process be changed to provide for decision-making and conditions on health impacts for all proposal types?

25. How should these proceed?

26. Should the Minister for Health have a role in decision making processes?
9.3 Other sector links

Many others in allied fields could contribute to the HIA process as the protection and enhancement of health and wellbeing is of relevance to all. These include agencies which are involved in social and environmental wellbeing such as housing, education, sport and recreation, community development, the arts, disability services, conservation, agriculture and so on. Non-government organisations from the health, environment and planning sectors and others have much to offer as do the associations that support industry and other developers.

Stakeholder Questions

27. What other sectors could be involved in HIA processes?
28. How could their involvement be maximised to provide the greatest benefits?

9.4 The Health Impact Assessment framework and supporting documentation

The generic HIA framework has been presented in this paper and it is not anticipated that the WA framework would change from these general requirements. Given a legislative requirement for HIA, the development of appropriate regulations and guidance materials becomes of great importance. It has been recognised that there is limited expertise in HIA within WA but the expertise associated with particular health issues that could be assessed within HIAs is extensive. Being able to take advantage of this expertise is important for appropriate development of HIA into the future.

Stakeholder Questions

29. What mechanisms should be established to provide for expert input (both within DOH and externally) into the development of HIA regulations and other documentation?
30. How can these mechanisms be supported?

9.5 Monitoring and auditing

The EIA process establishes conditions for proponents which must be adhered to and compliance is audited through licensing systems. Proponents must establish appropriate monitoring regimes and report regularly to environmental regulators (including through licensing requirements); these reports are available to the community. The appeals system provides a mechanism whereby concerns about specific activities can be raised and investigated and, when necessary modifications to conditions applied.

Where conditions have been placed on proposals that have a health basis, such as emissions or noise levels, no mechanisms currently exist for health assessment of the outcomes of the monitoring programmes unless so requested by the environmental regulator.

Under land use planning regimes, less monitoring and auditing occurs. Developers are required to meet planning and development requirements during construction phases and on completion and where environmental assessments have been undertaken, to demonstrate compliance with conditions. LG and other authorities undertake compliance auditing during and on completion of developments. The mechanisms to assess the long-term effectiveness of social and environmental objectives are limited to consideration of individual and community satisfaction. One of the few means of determining effectiveness (or not) is complaint levels to Ministers, LG or agencies.
The effectiveness of any programme should be determined through appropriate evaluation. The general framework for HIA includes evaluation of the process to consider health impacts and the outcomes of decision-making as well as an evaluation of the effectiveness of health outcomes as a result of the HIA. It is appropriate that the health of the community is monitored through the current DOH health survey processes but these will require expansion to include issues currently not considered.

**Stakeholder Questions**

31. Should proponents be required to report on the long term health and wellbeing outcomes of their proposals? Explain.

32. Should proponents be required to address from a health perspective the issues currently reported upon such as air emissions, noise or water quality?

33. If health reporting should be required:
   a. which proposals should be monitored,
   b. what compliance reporting should be required,
   c. to whom should reporting outcomes be directed, and
   d. what role should the community take in the process?

34. Should there be penalties for non-compliance with reporting and what form should these take?

**9.6 Liability**

For all types of proposals it is important to try to ensure that adverse health impacts are mitigated before the proposal is commenced and that appropriate steps have been taken to minimise potential cumulative impacts. It is difficult to show causal links between specific activities and health outcomes as there are many other factors that must be taken into account including individual life choices and other activities in the area. However, occasionally people believe their health has been affected by others activities and wish to seek compensation.

Proposals referred to the EPA are usually managed by the proponent on construction and therefore liability for health impacts to the community, if established can be directed appropriately.

The responsibilities of town and regional developers often end with completion of developments when titles are transferred to others. Common law applies to these titles and developers are subject to normal contractual agreements after transfer. However, the establishment of and the responsibility for common facilities within developments may not be as clearly defined and the onus for resolution should health issues arise may be difficult to resolve. Responsibility is often transferred to LG.

**Stakeholder Questions**

35. Who should be responsible for health issues arising from the implementation of proposals that have been assessed through HIA, and under what circumstances?

36. What should be required for resolution?
9.7 Building capacity for Health Impact Assessment

Although expertise in HIA in WA is limited, programmes need to be established to increase awareness of and appropriate training for decision makers, government agencies, local government, consultants and the community.

9.7.1 Community training packages

DOH is working closely with the tertiary sector to assist with development of new courses that will ensure long-term capacity in HIA. A postgraduate qualification in HIA has been initiated which will combine the expertise of Curtin University’s School of Public Health and Murdoch University’s School of Environmental Science and the Science, Resources and Environment programme at Central TAFE is considering the incorporation of use of tools for HIA skills training into their Environmental Management courses. Other programmes throughout the tertiary education sector in WA provide specialist training for newcomers to areas of health which can contribute to the knowledge base.

Stakeholder Questions

37. Are other community training programmes required, and if so what programmes should be available?
38. What other roles could the tertiary education sector provide?
39. Should an accreditation process for HIA practitioners be developed?

9.7.2 Training for the approvals sector

DOH will develop an information programme for the various sectors within the approvals process including public health practitioners, proponents, consultants, approvals agencies, local government and the community. A training package for practitioners will also be developed.

Stakeholder Question

40. What specific knowledge and skills training should be included in programmes for HIA practitioners involved in the approvals process (within DOH and externally)?

9.7.3 Regulations and Guidance documentation

Regulations for HIA will arise from inclusion of HIA in the new public health legislation. Guidance documentation and specific minimum criteria for specific components of the process will be developed and published on the DOH website.

Similarly, a bank of information for use by proponents and the community could be developed to assist with the process. This could include case studies of HIAs already undertaken, appropriate databases of information for specific sectors or fields and reporting outcomes.

Stakeholder Question

41. What specific documentation should be provided by DOH and what priority for development given to each?
9.7.4 Resourcing

All activities for HIA will require resourcing both in terms of expertise and funding to carry out specific activities. This applies to other sectors as well as DOH. The ability to generate revenue for approvals processes is limited especially since proponents are required to finance the assessment components of approvals applications.

**Stakeholder Questions**

42. What role should the Department of Health take with respect to management of positive and negative impacts from activities?
43. Which sectors within the Department of Health should be involved?
44. What resources within the Department of Health are required to implement HIA?
45. What external resources are required for HIA’s implementation?
10. Where To From Here?

This Discussion Paper has provided an overview of the HIA process and an explanation of the four approvals processes currently being considered for the inclusion of health and wellbeing issues in environmental, statutory and strategic land use planning and development processes in Western Australia.

Your input to the issues and questions raised in this paper will be compiled and presented to Government for decisions on the future directions of Health Impact Assessment.
11. References


5. Ibid, 33


11. Ibid, 51


19. WHO 1986 *Ottawa Charter for Health Promotion*, International Conference on Health Promotion, Ottawa, Canada, 17-21 November


23. Ibid


34. Department of Health (2005) *New public health act for Western Australia*. Government of Western Australia

Department of Health (2006) *Health risk assessment in Western Australia.* Government of Western Australia


Environmental Protection Authority and Department of Environment and Conservation (2003) *Interim industry guide to community involvement.* Government of Western Australia


Health Development Agency (2003) *Deciding if a health impact assessment is required* (Screening for HIA). National Health Service, UK


Health Development Agency (2003) *Deciding if a health impact assessment is required* (Screening for HIA). National Health Service, UK

Environmental Protection Authority (2004) General Guide For State Government Departments And Local Authorities (As ‘Decision-Making Authorities’). Referral of Proposals to the Environmental Protection Authority under Section 38(1) of the Environmental Protection Act 1986. Version 3 December 2004


Government of Western Australia (2002) Review of the project development approvals system. Minister for State Development

Environmental Protection Authority (2005) Environmental guidance for planning and development. Draft guidance statement No. 33

Ibid, A4,6


Ibid

Ibid

Ibid


Western Australian Planning Commission (2006) Statement of Planning Policy No.1 State Planning Framework Policy (Variation 2)
70 Department of Premier and Cabinet (2004) Leading by example: The sustainability code of practice for Government Agencies and resource guide for implementation. Government of Western Australia


72 Ibid

73 Department of Premier and Cabinet (2004) Sustainability Assessment Framework(draft). Government of Western Australia

74 Department of Health (2005) New public health act for Western Australia. Government of Western Australia
Health Impact Assessment in WA
Discussion Paper