
Lithgow City Council Strategic Plan 2007 Health Impact Assessment Report

Summary Document



Photos courtesy of Lithgow City Council.

2008.

Acknowledgements

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CHETRE, UNSW

Abbreviations and acronyms

ABS	Australian Bureau of Statistics
CHETRE	Centre for Health Equity Training and Research evaluation
DCP	Development Control Plan
DOH	Department of Health (UK)
EIA	Environmental Impact Assessment
HIA	Health Impact Assessment
HIS	Health Impact Statement
lbw	low birth weight
LIHS	Lithgow Integrated Health Services
NHMRC	National Health and Medical Research Council
PHA	Public Health Authority
SEIFA	Socio Economic Index For Areas
ses	Socio economic status
SWAHS	Sydney West Area Health Service
WHO	World Health Organization ¹ .
WSROC	Western Sydney Regional Organization Council

Glossary of Terms – Please refer to back of this report for definitions of terms used in this report.

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Executive Summary

Introduction

This report explains the Health Impact Assessment (HIA) process and presents the findings of the HIA of the Lithgow City Council Strategic Plan, 2007. The primary output of the HIA is a set of evidence-based recommendations geared to informing the decision-making process. These recommendations aim to highlight practical ways to enhance the positive impacts or minimise any negative impacts on health, well being and health inequalities that might arise or exist in response to the Lithgow City Council Strategic Plan.

Lithgow City Council Strategic Plan is the first long-term plan to be developed by Lithgow City Council in collaboration and consultation with the community and government. It introduces a new framework of strategic planning in the Lithgow local government area, which is driven by the community's vision and issues. The Plan incorporates the visions and strategies and feeds these into Council's management and operational plans to deliver actions that ultimately achieve the vision for the community. The objective of the Strategic Plan is to provide the strategic framework for the future development of the Lithgow Local Government Area and to encourage environmental, economic and social sustainability (Lithgow City Council Strategic Plan, 2007, Page 4).

Governance of the HIA

A Steering Group consisting of the SWAHS project team, Lithgow City Council Policy and Planning Manager and key community members oversaw the HIA of the Lithgow City Council Strategic Plan. The HIA project was led by the SWAHS project team comprised of the SWAHS departments of Population Health and Strategic Direction and the Centre for Population Health. The SWAHS project team completed the tasks associated with the HIA process and developed a set of draft recommendations for review by the Steering Group and executive management.

Health Impact Assessment

HIA uses a combination of procedures, methods and tools by which a policy, program or project may be assessed and judged for its potential, and often unanticipated, effects on the health of the population and the distribution of those effects within the population (Gothenburg Consensus definition, modified by Mahoney and Morgan, 2001). The HIA of the Lithgow City Council Strategic Plan is an intermediate type HIA as it assessed more than three health impacts in depth and it was conducted over a six-month period.

Screening step in HIA

Screening is the first step in a HIA. Pre-screening meetings were held between Lithgow City Council and SWAHS where it was agreed that the Lithgow City Council Strategic Plan was to be assessed for health impacts. The SWAHS project team undertook the formal screening process using a standard screening tool. This resulted in a recommendation to proceed with the HIA based on:

- The potential of strategies in the Lithgow City Council Strategic Plan to differentially impact on the health of vulnerable groups in the community.

- The omission of special consideration for the needs of children aged 0-5 years in the Strategic Plan. This was considered a important omission given the value of the early years of life in healthy child development.
- The potential of the recommendations in the HIA report to influence the development of subsequent council plans e.g. Lithgow City Council Management Plan and to influence population health plans for SWAHS.

Scoping step in HIA

Scoping is the second step of a HIA. Members of the Steering Group approved the Scoping Plan of the HIA of the Lithgow City Council Strategic Plan. The rationale of the Scoping Plan for the HIA is based on an equity focus that recognises that positive and negative health effects differentially impact on residents according to vulnerability factors.

<u>HIA target vulnerable groups</u>
<ul style="list-style-type: none"> ▪ Pregnant women; ▪ Infants; ▪ Children; ▪ Youth; ▪ Older residents; ▪ Parents/carers of young children; ▪ Socioeconomically disadvantaged people; ▪ Aboriginal and Torres Strait Islander people; ▪ People with disabilities ▪ Locationally disadvantaged residents; ▪ People with difficulties communicating in English

The areas of Health, Community, Transport, and Environment in the Lithgow City Council Strategic Plan were nominated in the HIA Scoping Plan. This was based on:

- Greatest potential impacts of the strategies on the health of residents;
- Capacity of Lithgow City Council or SWAHS to be the lead agency in recommendations.

Identification step of HIA

Identification is the third step of a HIA. It involved consultation with key informants and collection of evidence, including: systematic reviews, journal articles, published reports and reports. This included Lithgow City Council's Social Plan, Issues Report, and Council Community Consultations; and the SWAHS Health Profile and SWAHS Diabetes Report.

Assessment of evidence step in HIA

Assessment of evidence is the fourth step in a HIA. This involved synthesising and critically assessing the information. This included undertaking triangulation of methods; mapping the potential impact of the strategies in the Lithgow City Council Strategic Plan on the determinants of health; developing a matrix of the positive and negative health impacts on vulnerable groups in Lithgow LGA; and assessing the overall health impacts in terms of the size of the impact (how many in the population affected) and the differential impact on the population.

Key findings of HIA

Potential positive impacts of the strategies in the Lithgow City Council Strategic Plan

- Strategies and actions in the ten areas of the Lithgow City Council Strategic Plan will positively affect the majority of determinants of health. This includes health determinants related to employment, developing the local economy, education, access to services, lifestyle and behavioural factors, natural environment, built environment, heritage/culture/arts, and managing the environment. Subsequently, this would have positive impacts on the health of the population.
- The Health H1 strategy to provide health services that meet the needs of the community and the Community C3 strategy to encourage equitable access to services will potentially have health benefits for the Lithgow LGA population.
- The Health H2 strategy to develop partnerships to facilitate a healthy lifestyle is an effective way to address risk behaviours, as multidisciplinary approaches are more effective than a singular approach. This strategy is very important given the higher rates of mortality and hospitalisation related to the risk factors of smoking, physical inactivity and overweight and obesity in the Lithgow LGA population.
- Transport strategies T1, T3, T4, T5 will benefit the population by providing road infrastructure, equitable access and pedestrian access and connectivity (Health H1 action2). Transport and pedestrian access is important to facilitating access to health and other essential services. Pedestrian access encourages physical activity, which has many health benefits.
- The Community C1 strategy Action 3 to develop an Ageing Strategy provides the opportunity to ameliorate some of the negative aspects of ageing by highlighting the positive aspects of healthy ageing and supporting older residents with services.
- The Community strategies (C7, C9, C10) to ensure open spaces, provide a range of housing and to facilitate a safe community are excellent strategies that target the determinants of health.
- Environmental strategies E1, E5, E6, E9 and H3 will potentially have positive health effects on all people, but some of the vulnerable groups will particularly benefit.
- Improved air quality will benefit the population and particularly children and older people who are more susceptible to respiratory diseases than the general population.
- Improved water quality will benefit the population and children and older people who are more susceptible to infectious diseases than the general population.
- Improved water quality will benefit maternal health and the developing foetus as foetal development can be very adversely affected by water contaminants.
- Fluoridation in the water will greatly improve the oral health of developing children in the short term and longer term.

Strategies that potentially increase health inequalities

There were no strategies or actions in the Lithgow City Council Strategic Plan that would have a direct negative impact on the health of the population. Strategies, however, should explicitly consider the needs of the target HIA vulnerable groups or risk increasing health inequalities i.e. people in the vulnerable groups will not gain the same level of health benefits as other residents.

- The Health H1 strategy to provide health services that meet the needs of the community and the Community C3 strategy to encourage equitable access to services will potentially have health benefits for the population. However, the actions to achieve this by population modelling and using the Health Profile and Social will not adequately assess the needs of the HIA target vulnerable groups.
- There are no explicit strategies or actions to invest in maternal health (important for mothers and foetal development) and the early years of life. This omission would result in missing this extremely important window of opportunity to provide health benefits that continue in childhood and through to adulthood.
- There are no explicit strategies or actions to address the determinants of lack of social support and poor coping skills. Services that provide practical support and link residents to local networks are important. There are a number of families that have moved from other areas to Lithgow to obtain public housing. This results in dislocation from social networks. Effective coping skills are important as vulnerable people are at risk of more than average levels of life stressors.
- There are no explicit strategies or actions to address the risk of injury through an integrated approach of education, environmental modifications and enforcement. This is essential as there are plans for increased transport infrastructure and growth. It would be judicious to include measures that address the role of alcohol in injury (e.g. motor vehicle accidents and assaults).

Summary of HIA findings

This HIA process revealed that the Lithgow City Council Strategic Plan would potentially enhance the health of the population of Lithgow LGA. If explicit actions to meet the needs of the vulnerable groups are not undertaken, however, health inequalities may be increased. In particular, strategies aimed at enhancing maternal health and increased investment in children in their early years of development should be considered.

Priority Recommendations for Lithgow City Council

Evidence-based recommendations are the primary output of a HIA with the purpose of informing the decision-making process. (In the complete HIA Report, the evidence on which the recommendations are based is provided in summary tables in Pages 37-59 ;and in more detail in the Appendix).

The recommendations were developed in response to the strategies in the areas of Health, Community, Transport and Environment in the Lithgow City Council Strategic Plan. There are five priority recommendations from each of these areas. The recommendations aim to highlight practical ways to build on the potential positive health impacts of the strategies and to address gaps in the strategies that may increase health inequalities of the HIA target vulnerable groups.

All the recommendations are in the summary of evidence section. The following are the priority recommendations for Lithgow City Council as the lead agency.

Recommendations in response to Health Strategies

<p>Lithgow City Council and SWAHS should establish integrated multi-agency project groups with relevant agencies to:</p> <ul style="list-style-type: none">• map the provision of services in Lithgow LGA;• identify gaps in service provision;• work towards integrating services with a special focus on service provision of vulnerable groups;• progress the following recommendations.
<p>Lithgow City Council to base plans and strategies where appropriate on the principle of the paramount importance of investment in maternal health and the health of children 0-5 years. This should include actions that support parents/families and recognise that families with multiple risk factors have complex needs. Actions may include:</p> <ul style="list-style-type: none">• ‘A Learning City’ strategy for affordable effective centre based programs for 3-4year olds;• Transition to school programs and positive parenting programs for at risk and economically disadvantaged residents.
<p>Lithgow City Council to continue to work with SWAHS and other agencies to develop initiatives to protect and promote health e.g. ‘Live Life Well in Lithgow’ Project and incorporate sustainability measures in the initiatives.</p>
<p>Lithgow City Council develop a comprehensive Tobacco Control Policy that will support smoke free environments and assist staff and the community in quitting smoking.</p>
<p>Lithgow City Council and SWAHS to consider strategies for addressing insufficient number of GPs in Lithgow LGA providing primary care. Factors affecting access to GP services include the unavailability of GPs in the villages practices that open for extended hours or bulk bill.</p>

Recommendations in response to Community Strategies

Lithgow City Council to proceed with action proposed in Lithgow City Council Strategic Plan to develop population models to monitor the needs of the population. Population models should be sufficiently sensitive to monitor the target vulnerable groups in the population.
Lithgow City Council to develop a Recreational Plan that includes actions to: <ul style="list-style-type: none"> • Reviewing existing playgrounds in terms of shade provision, water bubblers, the developmental opportunities of play equipment provided and safety of play equipment and toilet facilities; • Consider the needs of youth in planning of local parks and open spaces. This may include increasing accessibility by providing facilities that are not closed by gates; • Audit existing recreation areas on Council controlled land to identify accessibility to people with disabilities or frail and aged. Where possible Council to plan progressive modification of existing facilities as required.
Lithgow City Council Ageing Strategy to include actions to collaborate with relevant stakeholders to: <ul style="list-style-type: none"> • Improve safety and access for older people to the built environment through the provision of accessible footpaths, buildings and facilities (refer to WHO checklist of essential features of age-friendly cities, 2007) and to • Implement falls prevention programs promoting 'staying active' to older people including the promotion of balance exercises; providing supportive physical and social environments that facilitate these actions.
Lithgow City Council to develop a strategy for reviewing the availability and adequacy of Baby Care Rooms or Parents Rooms that provide a safe, private place for women and men to feed and change their young children. The strategy would include a plan to provide these facilities.
Lithgow City Council and SWAHS to work with police and other stakeholders to develop actions to address alcohol as a major factor of violent crime in Lithgow LGA. The actions may include: Crime Prevention Through Environmental Design; surveillance; population health initiatives and enforcement measures.

Recommendations in response to Transport Strategies

Lithgow City Council considers strategies, such as- mapping, audit and analysis through the use of transport planning tools that map transport accessibility and walkability (see Appendix for example of Queensland tool). These tools identify transport needs and ensure effective transport planning based on community needs and to avoid duplication.
Lithgow City Council to survey residents in vulnerable groups to determine transport needs and to identify viable transport options (e.g. public transport, community buses) for all Lithgow and Lithgow villages.
Lithgow City Council facilitate the development of a comprehensive traffic management plan that addresses road safety, environmental and broader health issues in collaboration with RTA, the local Chamber of Commerce, Lithgow Integrated Health Services (LIHS), the local community and other relevant agencies. Focus is required on addressing the needs of children, youth, women and older people in the context of any new road infrastructure in the Lithgow LGA.
Lithgow City Council considers developing a regional approach to public transport provision for the LGA by forming partnerships with neighbouring Councils such as Blue Mountains City Council to advocate for improved public transport at a regional level.
Lithgow City Council considers other strategies that support safe pedestrian and cycling access such as giving precedence to safe cycling and walking spaces, converting road space to green

space and having a physical barriers between cars, cyclists and pedestrian (such as multiple kerbs). The Physical Activity Guidelines for Local Councils are a setting specific tool to assist Council in this area , and can be viewed on the NSW Dept. of Local Government web site at www.dlg.nsw.gov.au

Recommendations in response to Environment Strategies

Air

Lithgow City Council considers online and/or radio community health warnings of health impacts of hazard burning and poor air quality (similar to DECC & Health warnings)
<http://www.health.nsw.gov.au/living/airpollution.html>.

Lithgow City Council to liaise with rural fires control centres/National Parks and Wildlife during winter hazard reduction burns to consider strategies to reduce air pollution over the townships of Lithgow.

Lithgow City Council establish education strategies to raise awareness particularly within Aboriginal and Torres Strait Islander and low socio-economic communities of other indoor air quality hazards such as environmental tobacco smoke, Nox and CO, SO₂, particulate matter, and volatile organic compounds in collaboration with SWAHS, Dept of Housing and other agencies.

Water

Lithgow City Council to adopt a preventative risk management approach as recommended by NSW Health and as required in the *Australian Drinking Water Guidelines 2004* that encompasses all steps in water production from catchment to consumer

- Council with the assistance of SWAHS and other agencies to prepare and implement a Drinking Water Risk Management Plan for the Fish River and Farmers Creek reticulated water supplies within the responsibility of Lithgow Council.

Note: for further information please refer to the Australian Drinking Water Guidelines 2004, Chapter 3 'Framework for Management of Drinking Water – the 12 elements' available at http://www.nhmrc.gov.au/publications/synopses/_files/adwg_11_06.pdf

Lithgow City Council is encouraged to continue water supply demand management strategies to encourage the reduction in potable water demand.

- Council could encourage the installation of rainwater tanks at residences within townships supplied by reticulated water.
- Council could investigate the potential for increased treatment of sewage effluent at sewage treatment plants (STPs) to produce higher quality effluent for reuse.
- Council could investigate third party access e.g. sewer mining opportunities by industry to reduce usage of the potable supply.
- Council could encourage incorporating urban stormwater harvesting systems into urban development where appropriate.

Priority Recommendations for SWAHS

The Health Impact Assessment resulted in the following recommendations where SWAHS is the lead agency with the responsibility for implementation of the recommendation.

The recommendations are organised according to the vulnerability group that the recommendation is targeting.

Vulnerable Group	Recommendations
	SWAHS and Lithgow City Council in partnership should establish integrated multi-agency project groups with relevant agencies to: <ul style="list-style-type: none"> • map the provision of services in Lithgow LGA; • identify gaps in service provision; • work towards integrating services with a special focus on service provision of vulnerable groups; • progress the following recommendations.
Pregnant women	SWAHS, Lithgow City Council and other stakeholders to implement smoking cessation programs for pregnant women and their partners/family.
	SWAHS, Lithgow City Council and other stakeholders to implement substance abuse programs for pregnant women and their partners/family.
	SWAHS, Lithgow City Council and other stakeholders to develop effective practical support services and referral networks for pregnant women.
	SWAHS to continuously review existing models of antenatal care to ensure there is a range of models for women at risk of delaying or not accessing antenatal care.
Older people	SWAHS, Lithgow City Council and other stakeholders to address elevations in hospitalisation for falls in the 75+ age group by implementing falls prevention programs: <ul style="list-style-type: none"> • incorporating falls assessments in health checks by GPs of the 75+ years age group; • promoting 'staying active' to older people including the promotion of balance exercises; • implementing falls prevention programs in hospital and aged facilities; • providing supportive physical and social environments that facilitate these actions and • including exercise strategies where older people may face barriers to physical activity (consider including in Council Ageing Strategy).
People with disabilities	SWAHS, Lithgow City Council and other stakeholders to review and act on access issues to health services of people with multiple disabilities or conditions. The review would include: <ul style="list-style-type: none"> • identifying physical, transport and financial barriers to accessing health services; • determining the difficulties in co-ordinating and managing contact and compliance with various health service specialities.

Vulnerable Group	Recommendations
All HIA targeted vulnerable groups	SWAHS and relevant stakeholders to: <ul style="list-style-type: none"> ▪ include transport issues in discharge planning; ▪ consider the patients' transport needs in wider health planning processes; ▪ consider home delivery prescription services if needed.
	SWAHS to consider conducting a health needs assessment of the Lithgow LGA in consultation with Lithgow City Council, local GPs, other health providers and the local community. The health needs assessment would include identifying the needs of the target vulnerable groups.
	SWAHS to provide specific health indicators of age groups (infants, children, youth, older residents) to inform the health needs assessment of vulnerable age groups.
General population	SWAHS, Division of GPs, Lithgow City Council and other stakeholders to address elevations in hospitalisation for asthma through strategies to: <ul style="list-style-type: none"> ▪ improve air quality ▪ decrease secondary tobacco exposure (including in homes and cars); ▪ improve access to health care services; including GPs. ▪ implement asthma management plans.
	SWAHS and Lithgow City Council and other stakeholders to address elevations in deaths due to lung cancer by: <ul style="list-style-type: none"> ▪ Implementing smoking cessation programs that consider the social, work and environmental context of smoking; ▪ implementing education programs to reduce passive smoking in the home, car and other paces of exposure near pregnant women and near children; ▪ reducing the risk of exposure to industrial substances or building materials such as asbestos, nickel, chromium compounds, arsenic, polycyclic hydrocarbons and chloromethyl to women and children; ▪ continuing to monitor the compliance of shopkeepers in not selling tobacco to minors; and the compliance of pubs and clubs in preventing smoking in their establishments.
	SWAHS and Lithgow City Council and other stakeholders to address elevations in deaths due to heart disease by: <ul style="list-style-type: none"> ▪ implementing programs aimed at primary prevention focusing on reducing the key risk factors of poor nutrition, physical inactivity, overweight and obesity and smoking; and controlling blood pressure, cholesterol and diabetes; ▪ providing environments that support physical activity and healthy food choices.
	SWAHS and the Division of General Practice to investigate the prevalence and management of diabetes in relation to diabetes-related mortality and the high use of hospital services due to diabetes-related complications.
	SWAHS, Lithgow City Council and relevant stakeholders to develop strategy for the provision of containers for sharps and the disposal of sharps.
	SWAHS and Lithgow City Council to work in partnership with the police and other stakeholders to develop actions to address alcohol as a major factor of violent crime in Lithgow LGA.

Glossary of Terms

Table 1 Glossary of terms

Term	Description
Coping skills	The methods a person uses to deal with stressful situations. These may help a person face a situation, take action, and be flexible and persistent in solving problems.
Decision makers	The people who have control over the final content of the proposal and/or are responsible for its implementation, including the extent to which it is influenced by the HIA
Differential impacts	Where impacts are distributed unequally across or within population groups.
Direct versus indirect impacts	Direct impacts effect the health of the population directly, for example exposure to pollutants (including noise) that a proposal may release in the air, water and soil. Indirect impacts effect the health of the population indirectly through the proposal's influence on the determinants of the health, for example the affects a proposal might have on the local job market, access to local shops and amenities and the availability of public green space.
Enhancement measures	Changes made to a proposal to increase the likelihood of positive impacts.
Health	A state of complete physical, mental and social well being and not merely the absence of disease or infirmity.
Health determinants or determinants of health	The 'causes of the causes of health' that are found outside the traditional health sector, often referred to as social or environmental determinants of health.
Health Equity	Health equity is concerned with whether the differential distribution of health impacts is considered unfair and modifiable.
Health inequalities	This is the term commonly used to indicate the variation of health by socioeconomic status, or differences in people's health between geographical areas and between different groups of people..
Health inequities	Health inequity refers to those inequalities in health that are deemed to be unfair or stemming from some form of injustice
Health Impact Assessment	A tool to assess the impacts of a proposal prior to the implantation of that proposal.
Health impacts	The overall effects, direct or indirect, of a policy, plan, program or project on the health of a population.
Health literacy	Health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions. These are the skills that all people need to, for instance, find their way to the right place in a hospital, fill out medical and insurance forms, and communicate with healthcare providers.

Term	(Table 28 continued)	Description
Health Outcome		A change in the health status of an individual, group or population which is attributable to a planned intervention or series of interventions, regardless of whether such an intervention was intended to change health status.
Health Promotion		Concerned with promoting health and wellbeing.
Health Protection		Concerned with protecting health from risks and hazards.
Health Risk		Indicates the extent to which the potential of a hazard may be realized
Locationally disadvantaged		.People who live in locations that are disadvantaged through lack of access to services and infrastructure or experience high levels of social disadvantage, such as rural and remote areas, outer metropolitan areas, and pockets of disadvantage within metropolitan areas.
Needs assessment		Needs assessment is the first step in planning any health promotion initiative. It is the process of identifying and analysing the priority health problem and the nature of the target group for the purpose of planning any health promotion action. (Hawe, Degeling and Hall 210:1990).
Project team		Those responsible for leading the work of the HIA, for report writing, and for framing the recommendations about modifications to the proposal. eg. SWAHS project team
Proponents		Those responsible for developing the proposal under assessment eg. Lithgow City Council
Proposal		The proposal is a draft policy, plan, program, or project eg . Lithgow City Council Strategic Plan that is examined for the HIA.
Recommendations		Clear and concise statements of action resulting from the HIA.
Short term impacts		Short term impacts are those potentially occurring within a short time frame (may be weeks, months or a few years, depending on the nature of the proposal and impacts).
Long term impacts		Long term impacts are those potentially occurring over a longer time frame, usually years or even decades
Cumulative impacts		Cumulative impacts are a series of smaller impacts that collectively add up to a large impact.
Stakeholders		People involved in or affected by proposal development and implementation, drawn from public, private and voluntary sectors, and the communities or groups affected
Steering group		Group appointed to oversee the process and outputs of an HIA, and comprises representatives from key stakeholder organisations and, ideally, representatives from the communities affected. It sometimes includes one or more of the decision makers.
Strength based approach		A strengths based approach operates on the assumption that people have strengths and resources for their own empowerment. Used in the context of programs for older people in this HIA.
Triangulation		Triangulation refers to the approach of investigating a phenomenon using two or more methods. Similar findings of these different methods about the phenomena in question will strengthen the conclusions and recommendations drawn.
Unanticipated effects		Impacts that may not have been considered for various reasons such as time, resources, or professional orientation, during the development of a proposal.
Values		Beliefs about concepts such as health and equity, as well as views regarding the degree of importance to be placed on elements of HIA such as differential impacts and types of evidence, and views about the processes of HIA such as participation, transparency and decision-making processes.
Source: Taken from Harris et al, 2007. Health Impact Assessment: A Practical Guide, Page 34- with some minor changes and additions.		

