

Centre for Primary Health Care and Equity
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Reflections on ways HIA can be made most useful to Local Government in NSW

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Further Information

Elizabeth Harris

Director

Health Inequalities, Health Impact Assessment and Healthy Public Policy Stream (CHETRE)

Research Centre for Primary Health Care and Equity

University of New South Wales

Email e.harris@unsw.edu.au

Phone +61 2 9828 6230

Fax +61 2 9828 6232

Locked Mail Bag 7103

Liverpool BC NSW 1871 AUSTRALIA

Web <http://www.cphce.unsw.edu.au>

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1. Introduction

Local government has an important role in planning, creating and maintaining the local physical, social, economic and man-made environment. In Australia and internationally, local government has been an important partner with health services in undertaking Health Impact Assessments.

For the past five years NSW Health has funded the Centre for Health Equity Training, Research (CHETRE) and Evaluation to develop capacity within the NSW Health System to undertake HIA. Part of this project has focussed on the development of local capacity through a “Learning by Doing” approach. This involved local Area Health Services identifying a local project, program or policy that they felt would benefit from a HIA. Selected developmental sites were then required to attend a five day training program undertaken in a series of one or two day blocks, a site visit by one of the HAI team, help-desk support as required and opportunities to share experiences across sites. The sites were required to write a HIA report.

The purpose of this report

A total of six HIAs were undertaken in collaboration with local government. The purpose of this report is to review the experiences of Local Government on the usefulness of the HIA process and to identify ways in which, based on their experience, HIA can most effectively be built within Local Government planning processes.

Several of the projects were Developmental Sites in 2005. In all these HIAs, the Area Health Service staff approached the local Council to invite them to participate in an HIA. For this review Local government staff, including planners, community services staff, environmental health officers, and some Area Health staff were interviewed to reflect on what they thought were the strengths and limitations of HIA in a local government context.

The project was undertaken by Ms Trish Menzies from *The Public Practice*, who has worked extensively in and with Local Government in NSW, in order to allow participants to freely reflect on ways HIA can be made most useful to in Local Government in NSW.

Participants

The sites that participated in the review were:

- Palerang Council, HIA on an urban development strategy for Bungendore
- Shellharbour City Council, HIA on the Shellharbour Foreshore Management Plan
- Wollongong City Council, HIA on the Wollongong Foreshore Precinct Project
- Parramatta City Council, HIA on the Regeneration Strategy for Greater Granville
- Kempsey Shire Council, HIA on an Indigenous Environmental Health Worker Proposal
- Western Sydney Regional Organisation of Councils, HIA on Urban Growth in

Greater Western Sydney

Fifteen people were interviewed in all – four planners, five community service managers, two environmental health officers, one program co-ordinator from local government and three staff from Area Health Services. Of these, thirteen people were interviewed by visits to their workplaces and two were interviewed by telephone.

2. Findings:

All those interviewed who had been on Steering Committees for HIA projects said that their understanding of health impacts had developed significantly, that the findings of the HIA were valuable and that they enjoyed their involvement in the HIA project. All said that they and their Council would participate in a HIA again.

All interviewees said that local government does not have the resources, mainly the time, to undertake a HIA without the intensive support of their local health service. Health staff provided administrative support, convened meetings, wrote reports and undertook the literature review to provide evidence about health impacts. In most instances, Council staff would not have had the time or research skills to find or review relevant evidence.

The support from CHETRE staff was also crucial to the success of their HIAs, particularly in focusing the Steering Committees' thinking towards the limited number of probable health impacts, as so many factors could have been considered. The training on HIA by CHETRE staff was also considered to be invaluable to their understanding of HIA.

2.1 Factors for Success in HIAs in Local Government

Health Impact Assessments can have a sustained effect in local government because knowledge and understanding of the health impacts of council activities on the local population can change the thinking of senior staff members, particularly those with responsibility for urban planning. Gaining the support of a Council's General Manager, and keeping them informed of HIA findings is a key step to ensuring that the HIA process is given some priority, and that Councillors and senior staff are aware of the HIA and that the knowledge gained is communicated to them.

Selecting the best HIA Steering Committee

The composition of the HIA Steering Committee can affect the extent to which learning is spread across Council. Where a steering committee was chaired by a Councillor, they became an effective advocate or champion and communicated the importance of considering health impacts to other Councillors. Where more junior staff or representatives of the community services sections of the Council were the only Council participants on the Steering Committee, awareness of the project did not spread to senior staff or urban planners effectively.

Having Community Services staff involved on the Steering Committee was seen as important as they already had a broad understanding of health issues and had links to or could easily contact potential stakeholders in the community for their input. However, because many Councils are not well integrated and tend to operate in 'silos' where communication across divisions is not standard, representation from the planning division on the steering committee was seen as very important for spreading understanding of health impacts to key decision makers.

Overcoming “Silos” in Councils

It was acknowledged that gaining the participation of senior planning staff is currently very difficult to achieve because of a shortage of urban planners and the level of demands on these staff, especially in Councils in growth areas. However, it was also recognised that urban planners developing plans for new release areas and strategic planners developing new planning instruments, such as Local Environment Plans (LEPs) are the staff who have the greatest potential to influence health impacts through their design and regulatory functions.

In summary, having the support of the General Manager and including a Councillor, senior staff members from the planning and community services sections of a Council can facilitate the knowledge gained from Health Impact Assessments having a sustained effect on Council activities, and ultimately on the health of communities.

2.2 Major Benefits of HIA

Valuable evidence

Local government representatives all agreed that the evidence provided by the literature review was very valuable. Several local government staff commented that the rigour of the research undertaken by Area Health Service staff exceeded that of research usually carried out by local government staff who in most instances do not have time or well developed research skills. The evidence not only extended their own understanding about health impacts, but could add weight to the case being put to the Council in reports. Rather than simply asserting that doing X rather than Y would be of benefit to the community, staff could put fact based arguments which were more likely to convince those Councillors who may have been sceptical about the benefits of allocating scarce resources to projects.

As an Advocacy tool

The findings of the HIA, backed up by evidence from the literature review, can be used as an advocacy tool in policy submissions to other levels of government. Given that most Councils lack sufficient resources to carry out expensive works projects or fund new community services directly, the health evidence from HIAs strengthened funding applications to the State and Commonwealth, via the Grants Commission or other funding programs.

Changing priorities for works

In several projects the effect of the HIA was to change the order of priorities for implementing works, i.e. to put those with higher health benefits higher up the list. For example, footpaths and cycle ways which would improve connectivity and opportunities for more active lifestyles were given higher priority, as the evidence showed the extent to which social cohesion and fitness can be improved by these measures.

Health checks on design

In some cases, having health staff comment on the design of proposed works acted as a design check. This brought about changes to design such as:

- a safer proposal for a shared footpath and cycleway,
- linking shorter unconnected walking paths to extend exercise opportunities
- provision of shade cover over picnic tables for sun protection,
- additional and better located water fountains and taps along a walking track,
- more accessible seating for people with disabilities and additional lighting to reduce the risks to personal safety in the area.

Whilst many of these seemed like commonsense measures with obvious health and safety benefits, they had been overlooked in the original plans.

Having Area Health staff comment on plans can act as a health check on the health impact of planning proposals, bringing health and safety benefits which may have been overlooked in plans for open space and recreation areas
Evidence about gathered from literature reviews on health impacts is powerful and persuasive. It can assist Councillors to make decisions to improve opportunities for health and wellbeing in their communities.

Improved relationships between health and local government

Both local government staff and area health staff said that the HIA project had established relationships between the organisations that had not existed prior to it. They felt that they had a better understanding of the structure of the other organisation and how it functioned. Even though most had not had extensive contact since the HIA was completed, they had established contacts who could direct them to the appropriate person in any future inquiries.

Valuable health statistics

Local government staff became aware of health statistics and information about the local population that is collected by health which is of value to them when developing policies or planning community activities and services.

Joint projects can evolve

In one case, the relationship developed through the has already led to cooperation on a joint project. This project consisted of a walking bus for school children, improving their safety and fitness and increasing social interaction between families in a new housing area.

Title?

In general, Health staff contacted local government colleagues regularly, initially monthly, to check on the implementation of projects since the completion of the HIA, but with decreasing frequency where projects were still awaiting funding for implementation. Local government staff tended to contact the health person they knew (from the HIA) as the need arose, for example, where they sought data or to find the right person to involve in existing or new projects, such as representative for a 'families first' project.

Opportunities for dialogue between stakeholders

The structure of the steering committee provided an opportunity to bring together stakeholders and those from different disciplines and backgrounds around a table to discuss contentious issues. The evidence provided by the literature review and dispassionate analyses of issues in reports to the steering committee provided a common ground for understanding and helped focus the debate on key issues. It allowed for consideration of wider factors, such as regional transport infrastructure, that can impact on health locally.

In some cases, relationships with residents who were consulted during the HIA process have been strengthened and continue to develop further since the HIA.

Health understanding carrying across to other projects

In one case, where the key staff members on the steering committee were senior planners in the Council, they considered that one of the main benefits was in their increased awareness and understanding of health impacts. They were sure that this knowledge would flow across to their work on future projects.

Local Government staff found that the HIA deepened their understanding of how Council activities can influence people's health substantially. Bringing together people from different disciplines and backgrounds can broaden everyone's understanding of issues and come up with solutions that add value to projects.

2.3 Limitations of HIA

Time frames

There were some concerns that the HIA had taken longer than expected, and that routinely undertaking HIAs on urban planning projects would further lengthen the already considerable time that planning takes. There was, however, acknowledgement that this may have been because the group were doing a HIA for the first time and that they were learning how to do it as they went along. They felt that the experience they gained in doing a HIA would mean that the process would be less time consuming on future projects. Some felt that the screening and scoping phases of the HIA could have been combined into a shorter process.

Lack of funding

Many interviewees mused that HIAs could be more effective if they were backed up by additional health funding to help pay for the recommendations. There was an acknowledgment that this was more a reflection of the severe shortage of funding for implementing projects within local governments' current resources. Some public works projects are likely to take over a decade to be completed because of lack of funding in local government. But there was a sense that as projects had now been refined by the HIA to have increased health benefits for the population, a contribution from health would be well received and a great inducement for Councils to conduct HIAs on other projects in the future.

Raising residents expectations

In one project where residents were consulted during the HIA, it was felt that they grew more aware of health benefits and therefore their expectations that Council would carry out such beneficial works in a timely manner increased. This could lead to heightened frustration amongst residents where Councils would not be able to complete works for many years or at least soon enough to benefit the residents' own families. This problem is not unique to HIAs. Local Councils risk raising residents' expectations when consulting them on plans for projects with high value to the general public. Risk of resident frustration is greater where there are longer time frames for implementation and personal benefits to residents are at stake.

Consultation can motivate residents too

Interestingly, in this same project, although footpaths are yet to be constructed, residents have been motivated to increase activity levels in their children and responded well to a joint health and Council initiative that set up a walking "school bus". It seems that raising residents expectations of Council and awareness about health benefits, although potentially frustrating, can also be motivating for residents.

Long lead times for proving health benefits

It may be difficult to demonstrate the value of HIAs to Council in the short term because even after public works such as cycle ways and walking paths are completed, many of the health benefits for the population are long term and may be difficult to quantify or prove for many years. The health benefits of providing opportunities for active lifestyles amongst children may not be fully evident until they reach mid life or old age. This was not seen as a major limitation, as most Councillors are persuaded by the available evidence about the value of exercise for health and from studies that the provision of walking paths does increase activity levels.

Proving health benefits from HIAs through research on community health improvements may take years, but most people are persuaded about potential benefits by the available evidence.

2.4 Capacity of Local Government to carry out HIA

Time and skill constraints

All Council staff interviewed agreed that the assistance given by the Area Health Service was essential for the HIA. Local government staff are generally very busy and would not have the time to provide the administrative support, convene meetings or write the reports required for the HIA. In most cases local government staff would not have the time, skills or access to relevant research to carry out the literature review.

Rigour in health research

Councils greatly appreciated the academic rigour that health's research staff brought to the project in finding relevant evidence on the issues determined as most important during the scoping phase of the HIA. Some local government staff commented that the standard of data required in their day to day work is generally below that required in a health context.

Shortages of planning staff

Participation in HIAs by local government planners is particularly difficult at present because of a shortage of qualified planners across the sector. Urban Planners in Councils in areas of rapid population growth are particularly busy because of the number of Development Applications (DAs) that they are required to assess, each within a forty day time period. Councils are increasingly held up to public scrutiny regarding the time that processing DAs takes as residents and developers complain of delays. Similarly, strategic planners in growth areas are particularly busy developing and revising planning instruments such as Local Environment Plans (LEPs) and Development Control Plans (DCPs).

Healthy design vital in growth areas

These factors can make it very difficult for planners to participate in HIA Steering Committees. This is unfortunate because consideration of health impacts, for example in the design of new release areas, and incorporation of healthy design principles into planning instruments have perhaps the greatest potential to influence health outcomes in communities. Where planners have been involved in HIAs they have commented that their understanding of the impact of planning decisions on health has been changed fundamentally by their participation.

Cost shifting

Because local governments' abilities to increase revenue through rate increases has been constrained by "rate pegging", Councils are particularly sensitive to the devolution of state government responsibilities onto local government, without commensurate increases in funding to meet these increased responsibilities. Even though many Councillors are concerned about the health and safety of residents, they may be resistant to implementing measures which improve health and safety without additional resources for both staff and capital expenditure.

Legislating to require HIA

There was a broad range of opinions regarding the legislative requirements stipulating that Councils carry out HIAs on projects of a certain significance would be beneficial. Some felt that the existing EPA (Environmental Planning and Assessment Act) legislation could easily be extended to include health in the current clause (79C.b) which requires the consideration of social impacts, or alternatively under NSW Department of Local Government requirements for social plans. Even though this will add to an already large number of considerations that must be assessed, such as heritage, parking and traffic effects, safety and environmental impacts, to name a few, some of those interviewed considered that impacts on people's health was well worth the additional workload.

HIA less onerous than some legislative requirements

Some thought that the consideration of health impacts is likely to be far less onerous for planners than the current requirements, for example, the assessment of heritage issues. Others said that current legislative requirements are not always enforced and that adding another layer of health assessment could lead to a tick box mentality, whereby consideration of health impacts could be seen to be done, and therefore given some superficial routine consideration rather than actually done with the rigorous assessment that characterizes the HIA process.

3. Ways forward for HIA in Local Government

3.1 Healthy Planning Guidelines

Some of those interviewed felt that some guidance that sets out standards, healthy planning principles or guidelines for planners would be valuable. It would be helpful if there were guidelines that were tailored for use in the development of planning instruments such as Local Environment Plans and Development Control Plans. Although it is important to consider the full range of potential health impacts for each project, in order to ensure that unique aspects of proposals or plans are thoroughly examined, there may be enough common areas which would be amenable to checklists or guidelines. Ultimately, such principles could be accepted as elements of “good design”, in the same way that “safety by design” elements are now accepted by planners and integrated into many local government planning instruments.

3.2 Evidence summaries

Similarly, it may be helpful for local government staff if summaries of evidence found in literature reviews that have been undertaken in HIAs to date were made available. For example, evidence on the health benefits of ambulation in communities, social cohesion and access to healthy food is new, persuasive information that would be relatively easy to present in summary form. Publication of articles on these topics on the HIA website, in local government newspapers, distribution via email and other newsletters could also promote interest and acceptance of HIA and further usage of the HIA website.

3.3 Training Opportunities

The training that has been provided by CHETRE staff has been greatly appreciated by those interviewed. There are many who could be described as HIA enthusiasts who are keen to see the Councils that they work in use HIA in future projects. Continuing to provide opportunities for training local government staff in HIA will be very important to embedding the use of HIA by local government. The staff who are most likely to attend and benefit from HIA training are strategic and urban planners, environmental health officers and community development/services staff.

3.4 Training for senior managers and Councillors

It would also be valuable to raise awareness of the value of HIA with General Managers and Mayors, and other senior managers. This may be possible by holding seminars or providing information sessions at conferences held by the Local Government and Shires Association (LGSA), or through the professional development and training sessions they provide for Councillors and staff throughout the year. There are also Conferences and training for various types of staff, provided by their own professional associations such as the Local Government Managers Association (LGMA), and the Local Government Community Services Association (LGCSA).

3.5 Regular training opportunities

Once the importance of HIA is accepted and embraced by local government, it may be possible to set up regular training programs that Local Government staff can attend, similar to that provided by NSW Police for Crime Prevention through Environmental Design (CPTED). Currently NSW Police provide four day CPTED training for local government staff (mainly planners and community safety officers) throughout NSW on a regular cycle throughout the year. Although some Council's senior staff may need a prompt from local police from time to time to ensure that their planning staff attend the training, the importance of designing for safety is now reasonably well accepted by local government. Councils pay approximately \$500 for each staff member to attend CPTED training.

3.6 Showcasing successful HIA

Managers in local government are generally keen on taking up new ideas from projects that have been demonstrably successful in other Councils. Pressure on performance is high and innovation is encouraged. "Copycatting" of good projects in other Councils is frequent as staff are asked to do "new" things that will also be successful and not waste rate payers' money. Replicating successful projects in other areas satisfies these demands, by lowering risk and saving developmental time for staff in busy work environments. Therefore, showcasing successful projects to local government staff and Councillors is an important part of a strategy to encourage use of HIAs in local government.

3.7 Promotional strategies

Opportunities for showcasing HIA projects exist through using existing local government media. The challenge is to gain the attention of staff in an environment where there are many competing demands for their attention and a great deal of information on a wide range of issues is constantly provided. Providing information about HIA on a regular basis is most likely to steadily build awareness and interest.

3.8 Targeting information

It is sometimes difficult to ensure that information is directed to the correct person in a Council unless their position title is used. For example, all mail sent to the "General Manager" is sorted by the Records staff and allocated to the most likely recipient. Information referring to general health matters could be sent either to Community Services staff or those with Public Health compliance responsibilities such as Food Premises Inspectors. Directing information about HIA to planners could best be achieved by addressing mail to the Director of Planning or the Strategic Planner.

Newsletters, Email news and Newspapers

Many senior managers routinely receive weekly email news from the LGSA *Local Government Weekly*. It can also be viewed on the LGSA Website. LGSA also produces a quarterly magazine called *Local Agenda*. The *Local Government Manager* is a bi-monthly publication for Senior Managers, and there are other newspapers such as *Local Government Focus* and *Government News* that also go to Councils for distribution to Councillors.

3.9 Awards

Awards also offer opportunities to showcase successful projects, and a culture of friendly competition is well established in the local government sector. There are many existing awards schemes such as the National Awards for Innovation in Local Government run by the National Office of Local Government, and various annual Awards for Environment, Culture, Communication and Heritage etc, run by the LGSA. Currently NSW Health partners the LGSA in an award for Multicultural Health Communication.

4. Implications for Area Health Services

4.1 MOU: A model for long term co-operation

One Local Area Health Service has developed a Memorandum of Understanding (MOU) with a Council that agrees to action on a variety of issues of mutual concern, including an objective “To identify ways to enhance planning instruments to improve social and health outcomes through the use of learning from Social Impact Assessments and Health Impact Assessments”. The outcomes for this project are to “produce a protocol for Population Health to review and advise Council on health issues in major Planning Instruments and Master Plans”.

This model consolidates and formalises an ongoing relationship between Health and local government staff, and overcomes the potential problems of the two organisations ceasing to relate to each other when key staff who have formed working relationships during an HIA process leave their current positions.

The MOU model has been successfully used by NSW Police working with local Councils on Community Safety strategies. MOUs in this case are negotiated with Councils so that any development over a certain size must be referred to the Crime Prevention Officer in the Local Area Command for comment on safety aspects of the design.

4.2 Maintain Area Health support for HIA

Assistance from Area Health staff will continue to be crucial for the success of Health Impact Assessments in Local Government, because of their research skills and the administrative support they can provide to Steering Committees. When approaching Councils to participate in an HIA, NSW Health staff should seek the endorsement of the General Manager and aim to include senior managers and planning staff on the Steering Committee, where possible. Involving senior staff in the HIA will generally lead to better understanding and communication of learning about health impacts across Council staff and to Councillors.

4.3 Evidence is valuable to local government

Evidence arising from literature reviews is of great value to local government staff in several ways. HIAs extend staff’s understanding of health impacts significantly. The evidence provides a tool for advocacy within their own Council, and in seeking funding for implementation of projects from the Grants Commission and other funding programs. It may be helpful to provide some of the evidence from health literature as “healthy design” principles that could be incorporated into planning instruments, such as LEPs, so that planners consider health impacts in a more rigorous and formalised way. However, healthy planning guidelines could not replace use of HIAs, because these fully review potential impacts to assess factors that are unique to a site or proposal.

4.4 Continue HIA training

Training in HIA and the support provided by CHETRE to Steering Committees and to health and local government staff doing HIAs for the first time, has also been very important to their success. Providing regular opportunities for training local

government staff in HIA into the future will be important to professional understanding of health impacts, particularly for planning staff, and to embedded use of HIA in the sector.

4.5 Health staff must be proactive

Good relationships between Area Health and Councils have been established through working together on HIAs, but NSW Health staff will need to be proactive in monitoring local government activities for future opportunities of doing HIAs on proposals that are likely have significant public health effects . Negotiation of a Memorandum of Understanding between Councils and the Area Health Service provides a good model for formalising this relationship and facilitating consideration of health impacts in planning instruments and development plans.

Realising that HIAs add value

At this stage, awareness of HIA in the local government sector is limited as there have been a relatively small number of developmental sites compared to the number of Councils and Shires in NSW. Ideally, additional HIA projects and increased showcasing of their success to senior local government staff and Councillors through seminars, existing conferences and media, will convince those in local government of the added value that HIAs can bring to their projects, through better outcomes in health and well being for their communities.