Achieving Equity Through HIA

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HUMAN IMPACT PARTNERS

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Equity is Fundamental to Project Screening

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Housing

- USC Expansion – gentrification and displacement
- Rental Assistance Demonstration – public housing
- Pittsburg BART Extension – affordable housing in TOD

Transportation

- I-710 Expansion – goods movement

Land Use

- NMRT Waste Facility – environmental justice

Labor policies

- Paid Sick Days legislation – worker rights
- Gender Pay Equity legislation – wages

School to Prison Pipeline

- School Funding – distribution of resources
- School Discipline – school push out
- Alternatives to Incarceration – criminalization

Next Step: Data and Analyses

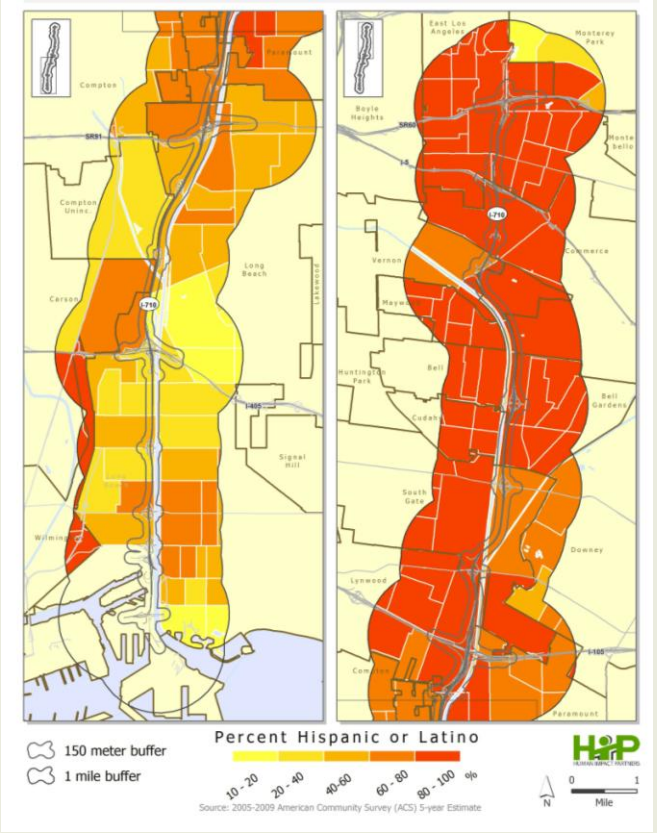
After selecting a topic, need data about disproportionate impacts

This involves:

- Scoping: asking the right questions
- Assessment: acquiring relevant data and doing appropriate analyses
- Recommendations: proposing mitigations that account for disproportionate impacts

Challenges:

- Appropriate data is not always available
- Targeted mitigations can be difficult to develop



But the HIA Process is Key to Equity

Data without power is unlikely achieve equity

Without a commitment to equity and democracy on the part of those controlling the HIA process,

and without power in the hands of those who support these values,

HIA can become another technocratic tool that supports those in power who are interested in maintaining the status quo.

What About “Objectivity”?

No one person or organization (including an HIA practitioner) is truly objective

A diverse stakeholder group representing many interests may be the closest thing to objectivity

Diverse stakeholder groups still must have a commitment to equity

A commitment to equity is often called “bias”

Building Power Through the HIA Process

How do we do this?

- Engaging, organizing, and empowering impacted populations
- Analyzing power distribution and being strategic
- Strategic communication
- Public health leadership

Empowering Impacted Populations

USC Specific Plan HIA:

HIP, SAJE & Esperanza Community Housing Corporation

Brought together a panel of 15 impacted residents

- Deliberated and came to consensus about impacts and recommendations; informed by “subject matter experts”
- Advocated for recommendations in the community and at hearings

Analyzing Power

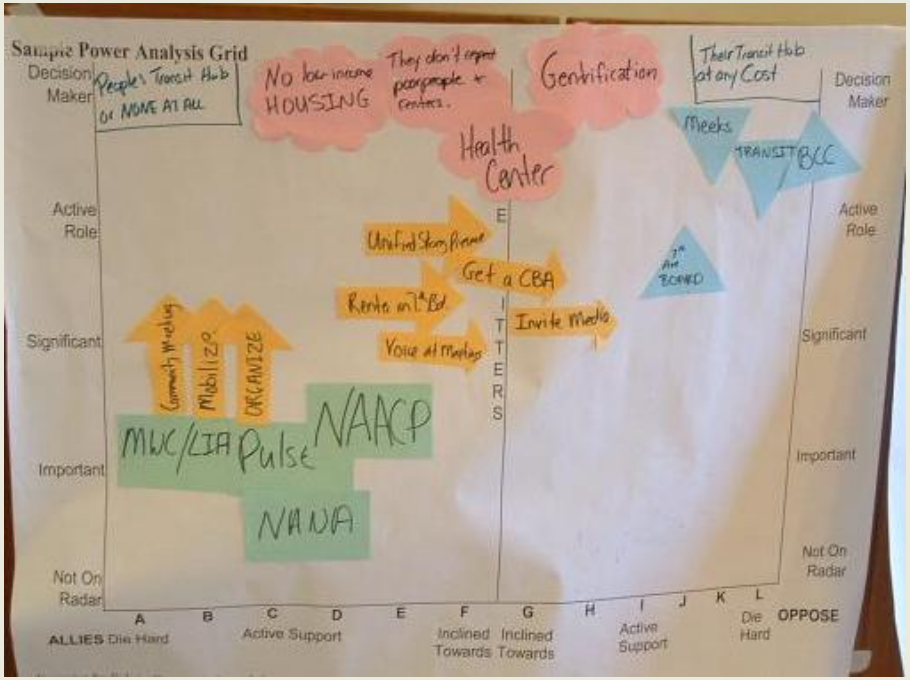
Power Analysis

Builds understanding of how and by whom power is exercised to cause and maintain problems and conditions that others may seek to change

Has been used to inform:

- Participation in HIAs (e.g., steering committees)
- HIA Scope
- Messaging

Equity agenda — Opposing agenda



Power

Level of Support

See: http://www.scopela.org/section.php?id=66

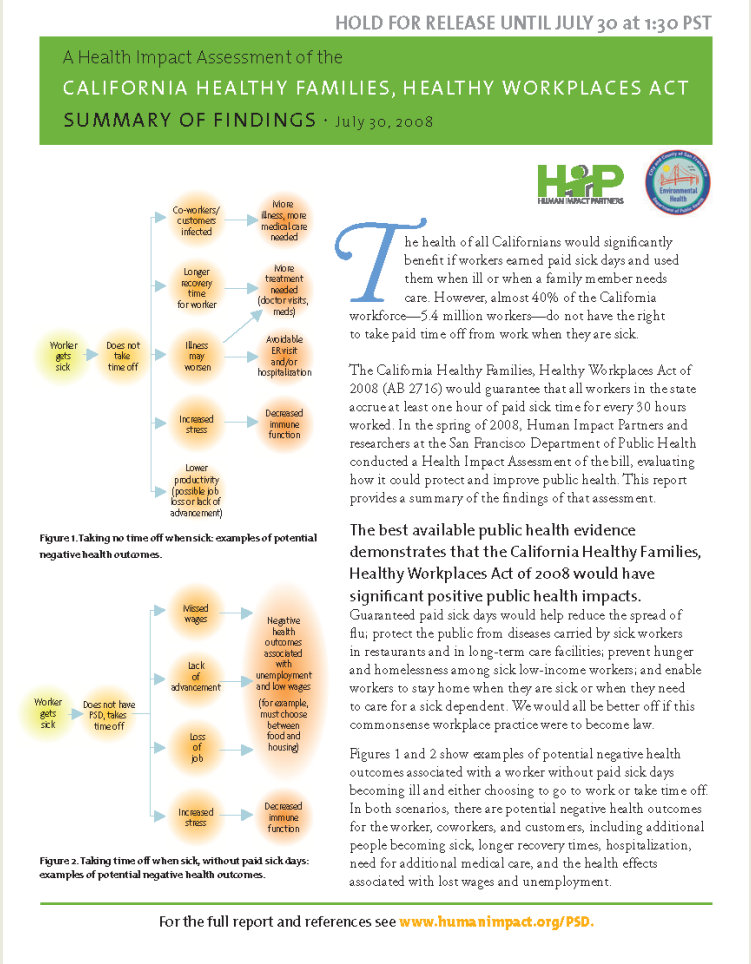
Strategic Communication

Message Frames

- "All Californians"
- "Common sense"
- "Disconnect between known best practices and current policies"

Communication Strategies

- HIA report
- Summary of findings
- Public health spokespeople
- TV, radio and print media (including Spanish language)



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A Health Impact Assessment of the

CALIFORNIA HEALTHY FAMILIES, HEALTHY WORKPLACES ACT

SUMMARY OF FINDINGS · July 30, 2008

Figure 1. Taking no time off when sick: examples of potential negative health outcomes.

Figure 2. Taking time off when sick, without paid sick days: examples of potential negative health outcomes.

The health of all Californians would significantly benefit if workers earned paid sick days and used them when ill or when a family member needs care. However, almost 40% of the California workforce—5.4 million workers—do not have the right to take paid time off from work when they are sick.

The California Healthy Families, Healthy Workplaces Act of 2008 (AB 2716) would guarantee that all workers in the state accrue at least one hour of paid sick time for every 30 hours worked. In the spring of 2008, Human Impact Partners and researchers at the San Francisco Department of Public Health conducted a Health Impact Assessment of the bill, evaluating how it could protect and improve public health. This report provides a summary of the findings of that assessment.

The best available public health evidence demonstrates that the California Healthy Families, Healthy Workplaces Act of 2008 would have significant positive public health impacts.

Guaranteed paid sick days would help reduce the spread of flu; protect the public from diseases carried by sick workers in restaurants and in long-term care facilities; prevent hunger and homelessness among sick low-income workers; and enable workers to stay home when they are sick or when they need to care for a sick dependent. We would all be better off if this commonsense workplace practice were to become law.

Figures 1 and 2 show examples of potential negative health outcomes associated with a worker without paid sick days becoming ill and either choosing to go to work or take time off. In both scenarios, there are potential negative health outcomes for the worker, coworkers, and customers, including additional people becoming sick, longer recovery times, hospitalization, need for additional medical care, and the health effects associated with lost wages and unemployment.

For the full report and references see www.humanimpact.org/PSD.

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NMRT Dirty Material Recycling Facility HIA

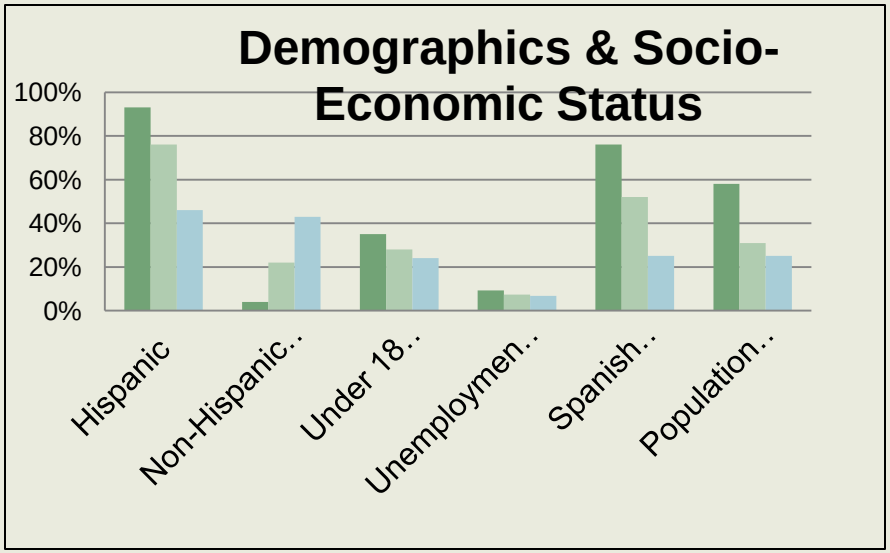
Bernalillo County NM Place Matters: environmental and public health agencies, community residents

Proposed facility in EJ community already impacted by superfund sites, industry and traffic;

Environmental health agency led the HIA process:

- Effectively engaged community through PM
- Focused on topic and issues of concern to community
- Collected data
- Drafted report
- Released report and weighed in at hearings, *despite pressure*
- Built new alliances (i.e., power)

Permit denied



Challenges to Achieving Equity with HIA – 1

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Failure to discuss equity explicitly in HIA

- Lack of clarity of meaning of equity
- Difficult to keep focus on equity
- HIA seen as technocratic tool; discussion of equity and engaging community seen as compromising objectivity

Opportunities

- In Screening, explicitly discuss definition and importance of equity in HIA with participants
- Ensure Scope, Assessment, and Recommendations include equity
- In report, explicitly state equity impacts

Challenges to Achieving Equity with HIA – 2

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Technical difficulty in assessing equity

- Existing conditions data is not always available stratified appropriately or at the necessary scale
- Few impact prediction tools available to assess impacts on equity

Opportunities

- Though not perfect, use data that exists to discuss equity
- Methods development

Challenges to Achieving Equity with HIA – 3

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Lack of power to effect change if you only have data

- Difficult to engage and empower impacted community
- Community organizations have limited capacity
- Discomfort discussing power
- Strategic communication is difficult
- Lack of public health leadership

Opportunities

- Use the HIA process to build power and leadership
- Ensure community partners have necessary resources to participate

Achieving Equity with HIA: Key Ingredients

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Topic selection

Data analysis

Building power

Commitment to equity

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Thank You!

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