

Ensuring Equity in the Practice of Health Impact Assessment

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Lifting Up What Works®

Session Goals

- Present an imperative for the inclusion of equity in the practice of HIAs
- Identify strategies to implement equity in HIAs
- Present examples of HIAs which have promoted equity effectively
- Discuss challenges and lessons learned

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Panelists



• Shireen Malekafzali, PolicyLink

- Imperative for Equity in HIA
- Strategies to Ensure Equity

• Rajiv Bhatia, San Francisco Department of Public Health

- Role of research in promoting equity
- Analytical tools/methods to ensure equity in HIA analysis
- Jonathan Heller, Human Impact Partners
 - The role of power in ensuring equity in HIAs

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- Just and fair inclusion into a society in which everyone can participate and prosper.
- The goals of equity are to create the conditions that allow all to reach their full potential, erasing disparities in health and economic outcomes by race, income, ability, geography, age, gender and sexual orientation.
- Many inequities in health outcomes result from the systematic and unjust distribution of social, economic and environmental conditions needed for good health outcomes.
- Recognizing historic and current disadvantages and providing communities the resources needed to participate and prosper.

Why Ensure Equity in HIA?

- Equity is an imperative not an add-on
- Health disparities are prevalent
- Field of public health is changing
- HIA are growing in the US and abroad
- Without explicit attention to equity we may continue to perpetuate health inequities even if overall health outcomes improve.

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Strategies to Ensure Equity

- Target HIA practice towards priorities of disadvantaged populations
- Ensure a goal of the HIA is to evaluate outcomes for those most vulnerable
- Evaluate distribution of impacts across populations
- Ensure community leadership, ownership, oversight and participation

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Strategies to Ensure Equity

- Identify recommendations that maximize benefits for those most vulnerable
- Share and communicate about the HIA and findings in ways that are appropriate to impacted populations
- Use the HIA process to support the authentic participation of vulnerable populations in decision-making processes
- Use the HIA process to build capacity within communities

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Target HIAs to Community Priorities

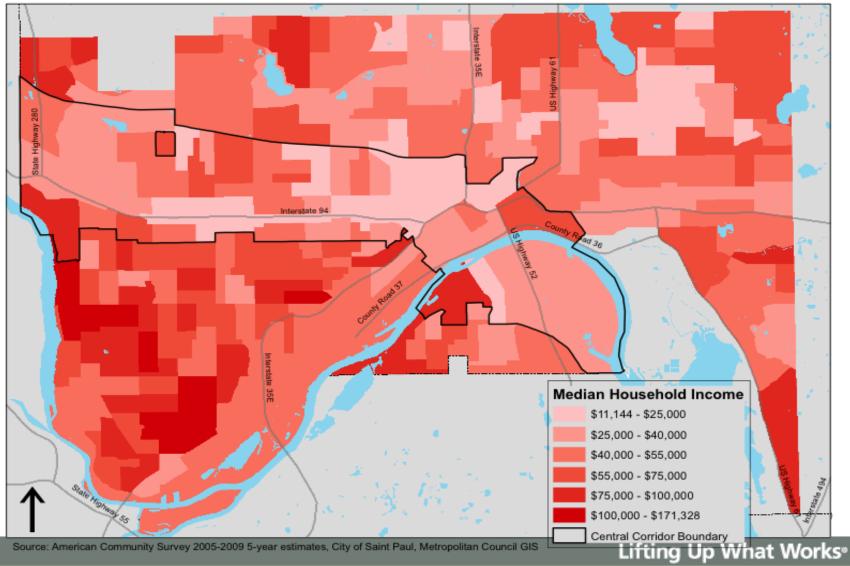
- Partner with community groups working with disadvantaged populations
 - Ex: ISAIAH, TakeAction Minnesota and PolicyLink partner to conduct an HIA on transit-oriented development policy in the Twin Cities.
- Ensure a goal of the HIA is to evaluate outcomes for those most vulnerable
 - Ex: Healthy Corridor for All (HCA) Goals
 - Assess impacts on health, health inequities, and the underlying conditions that determine health
 - Maximize health benefits
 - Empower local communities to meaningfully engage
 - HCA Values: Equity, community empowerment, collaboration, accountability and scientific integrity
- Evaluate distribution of impacts across populations
 - Ex:

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The Central Corridor

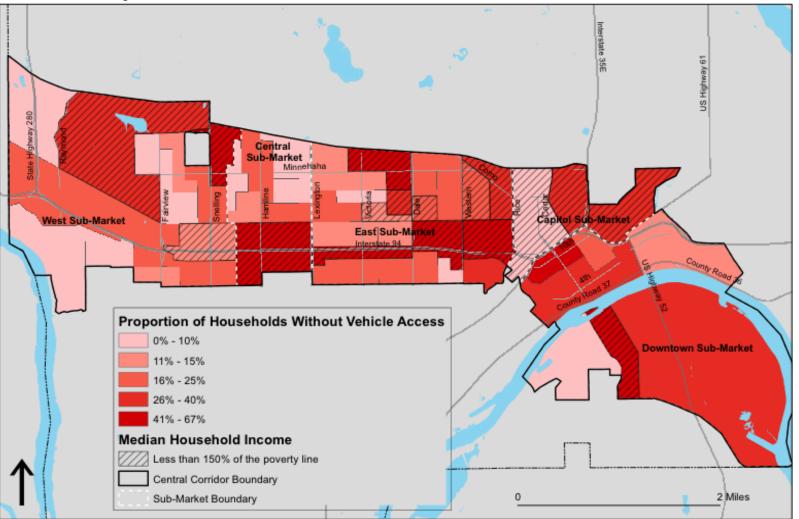


Median Household Income Distribution, Saint Paul, 2009



Transit Dependence in Central Corridor PolicyLink

Transit Dependence in the Central Corridor, 2009



Source: American Community Survey 2005-2009 5-year estimates, City of Saint Paul, Metropolitan Council GIS

Note: The federal threshold for household income at 150% of the federal poverty line is \$27,465 for a family of three. We used the standard for a family of three as the average household size in the Corridor is approximately 2.6 as of 2009.

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Potential Impacts of Redevelopment on Business PolicyLink

Proximity of Small and Minority Owned Businesses to Parcels With High and Medium Potential for Redevelopment





- Ensure community leadership, ownership, oversight and participation
 - Lead by community organizing groups
 - Community Steering Committee with constituents along corridor



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