Health Impact Assessment Training:

A Path to Health In All Policies
Little Rock, Arkansas 2016

This Health Impact Assessment is sponsored by the Childhood Obesity Prevention Research Program at the Arkansas Children's Research Institute through funding from the Arkansas Biosciences Institute.

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Childhood Obesity Prevention RESEARCH PROGRAM

ARKANSAS Farm to School

UPSTREAM PUBLIC HEALTH

Introductions: Your Hosts

Arkansas Children's Research Institute
Childhood Obesity Prevention Research Program
Department of Pediatrics, College of Medicine
University of Arkansas for Medical Sciences

- Dr. Judith Weber, PhD, RD
- Emily English, MPS, MPH
- Jenna D. Rhodes, MA, MPS, MPH – **HIA contact**

Upstream Public Health:

- Tia Henderson, PhD, MST

Get to Know Who is In the Room Activity

- Post it note – write down an open ended **question** related to your definition of the activities/places/conditions that create a healthy community (for example “what is your favorite way to be active?”)
- Introduce yourself to another person. Ask each other your questions. SWAP post it notes.
- Move to the next person, repeat asking each other the new questions, SWAP post it notes.
- Move to the next person and repeat until you get your post-it note back!

Training Learning Objectives

We Aim to Support You

- Build shared understanding about health impact assessments (HIAs)
- Develop capacity to work on HIAs and Health in All Policy approaches
- Understand HIA rationale, process, outcomes and tools

And the Farm to School HIA

- Build and expand relationships for the Farm to School HIA
- Build participant capacity to consider health implications in the Farm to School HIA

Arkansas Farm to School HIA

Brief History of Farm to School in Arkansas: Why an HIA?

- Various independent F2S activities taking place beginning mid-2000s
- Statewide F2S conference hosted in 2009 by Heifer International
- Delta Garden Study (2009-2013): increased focus on, collected evidence in support of school gardens
- Arkansas Grow Healthy Study (2011-2016): built capacity, collected data from stakeholders, described F2S landscape, assessed capacity
- Independent activities, including regional workshops, increasing across the state, funded in part by USDA F2S grant mechanism
- Informal network currently being developed: website, conference calls, social media messaging
- Growing demand for technical assistance
- 2016 - HB 1979: interim study proposal – impact of local food system
- HIA on F2S Coordinator: report to be released December 2016

Goals of Farm to School HIA

1. Develop capacity in the HIA process;
2. Establish a core of HIA expertise in Arkansas for addressing the potential health impacts of other decisions;
3. Inform and improve the planning and decision-making process around farm to school programs in Arkansas;
4. Engage external local partners who work on childhood obesity/nutrition-related conditions to help identify the linkages between farm to school and health.

Farm to School HIA
Entering Scoping Stage

Your Role Today

- Learn about HIAs
- Provide perspectives on Farm to School HIA
- Feedback on draft scope for Farm to School HIA
- Developing first draft of Assessment questions for the scope

Day's Agenda

- Rationale for HIA, history, what "success" looks like
- Training materials and resources
- Steps of HIA – overview
- Screening deep dive
- Scoping deep dive
- Assessment warm up
- Recommendation warm up
- Report communication warm up
- Evaluation & Monitoring in HIA discussion
- Wrap up

Introduction to Health Impact Assessment Practice

Why HIA?
Our Environments Affect Our Health

Childhood Obesity Prevention

ARKANSAS Farm to School

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UPSTREAM PUBLIC HEALTH

Our Decisions Could Maximize Health

- Housing programs, policies
  - Affordable units
  - Safety for renters
- Land use plans
  - "Health promoting" retail
  - Desirable destinations
  - Incentives for supermarket locations
  - Parks, green space access, safety
  - Housing location
- Transportation plans, policies
  - Safe streets, sidewalks
  - Mass transit access
  - Lighting
  - Limit air pollution
- Education policies
  - Physical education opportunities
  - Dual language immersion programs
- Fiscal and economic policies
  - Tax credits
  - SNAP
  - Minimum wage


CORVALLIS
GUNS
South Side Suds
LAUNDROMAT
Hair Cuts
$9.99
HAIRCUTS
$9.99
HONDA

Our Decisions May Not Address Negative Impacts

- Housing programs, policies may not adequately address:
  - Dilapidation
  - # of affordable units
- Land use policies may not address:
  - No connections, sidewalks – can't safely, easily, walk or bike places
  - No parks, green spaces
- Transportation polices and plans may not address:
  - Lack of infrastructure to protect walkers, bicyclists
  - Transit access
- Education policies may not address:
  - Climates that reduce bullying
  - University campus impact on affordable housing
- Fiscal policies may not address:
  - Food deserts
  - Inequitable burdens based on income

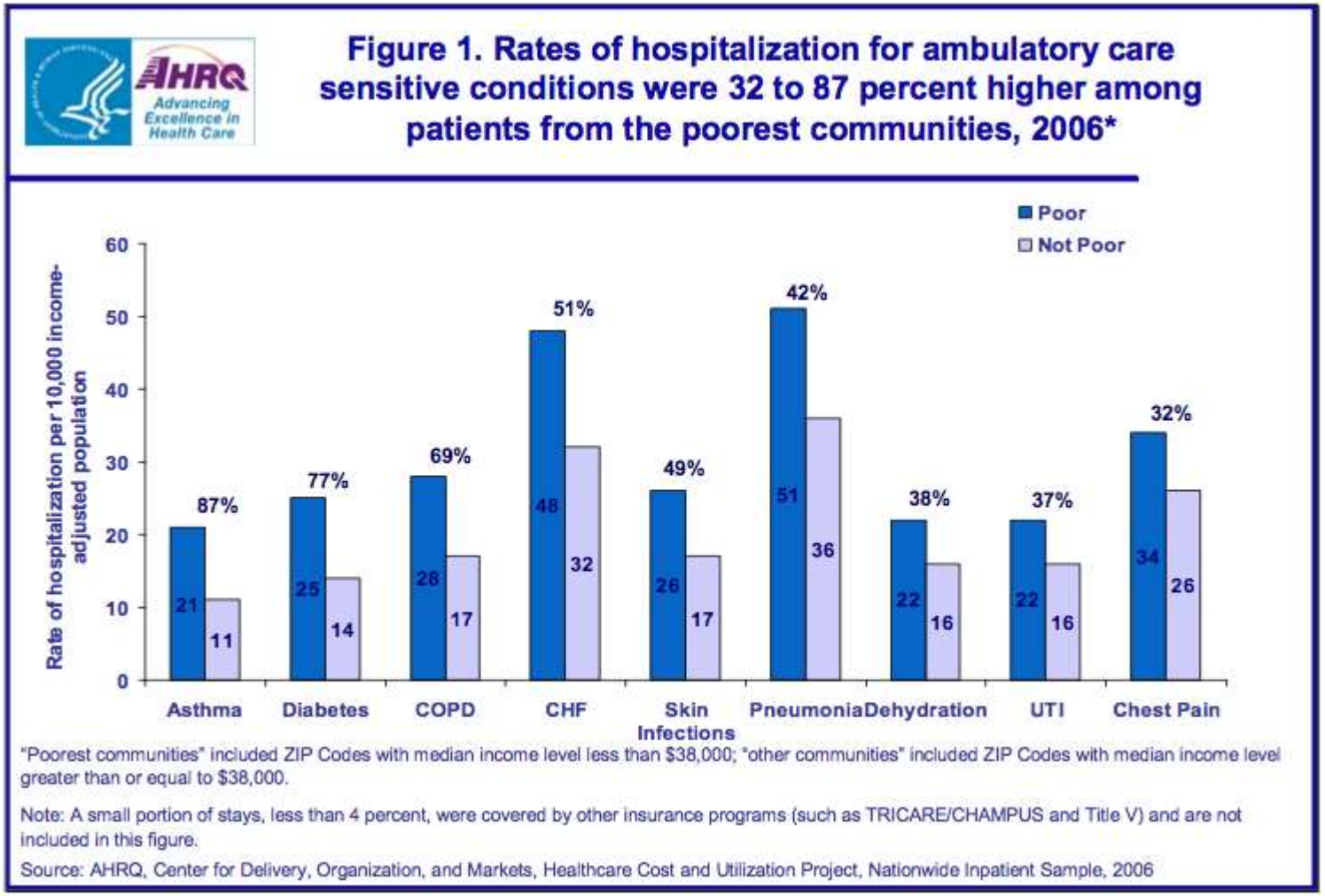
Challenge:
Not Everyone Lives in a Healthy Place

Source: Flickr user Drriss & Marrionn, Marion Arkansas Country Home

Challenge:
Even Healthy Places Can Have Harms

Flickr user hectorhannibal

Living in Unhealthy Places Affects Health Outcomes



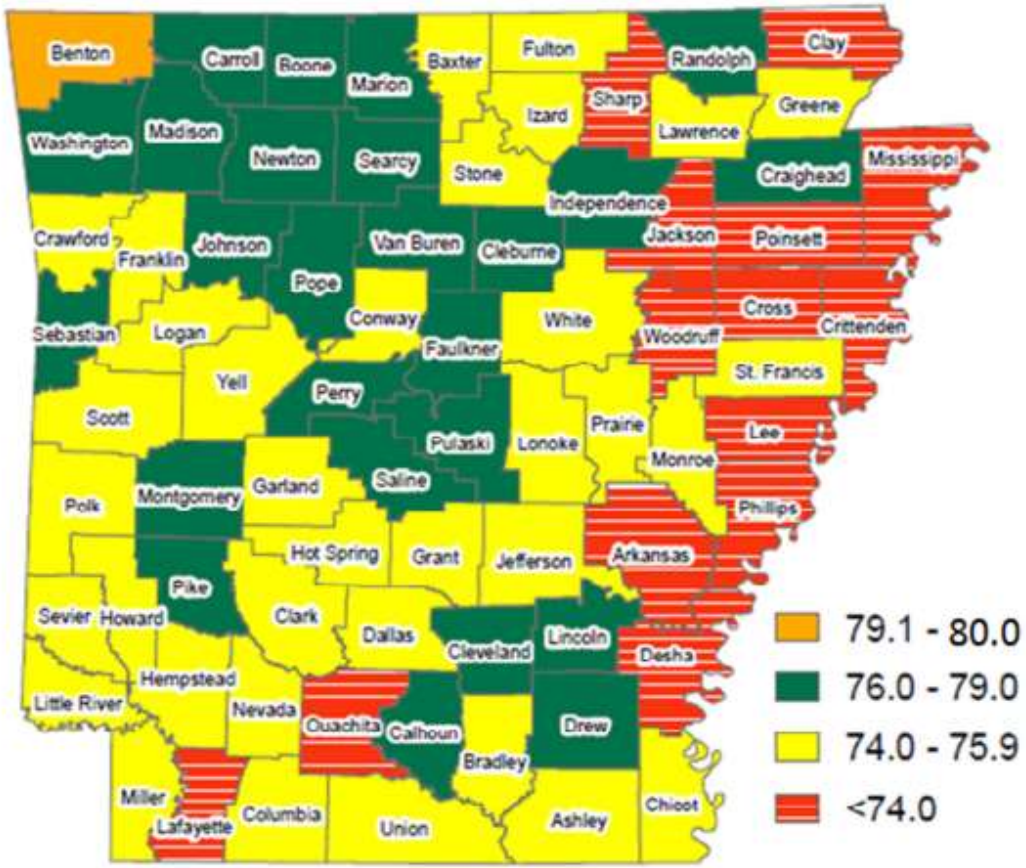
LIFE EXPECTANCY AT BIRTH

2010-2012 Death Data and 2011 Population Estimates

In Accordance with Act 790 and Act 798

State Mean=76.1

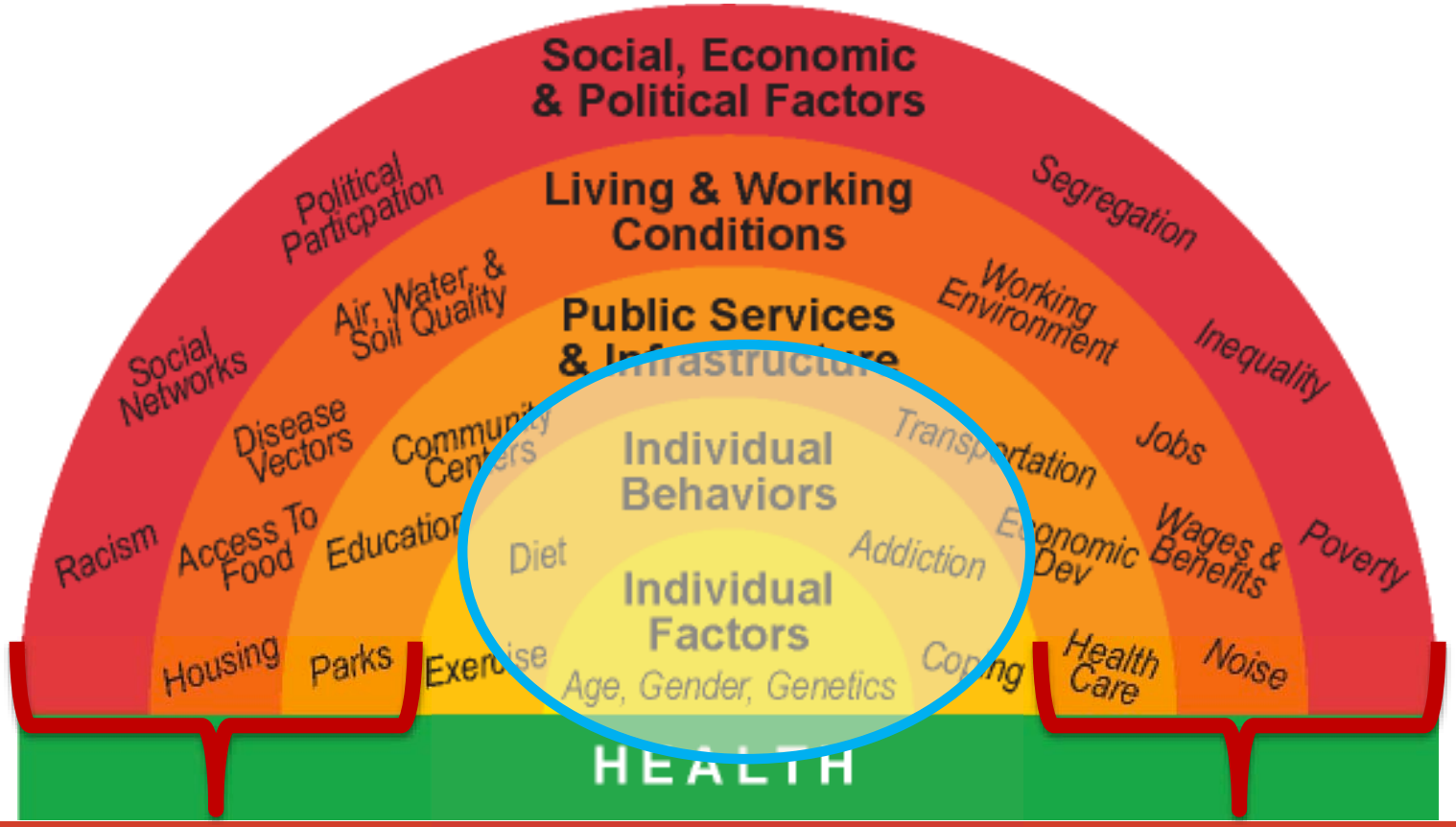
Minimum (Poinsett County) = 71.7; Maximum (Benton County) = 79.6



Source: Health Statistics Branch, Arkansas Department of Health

The Problem:
Traditional Health Care Focus

The Problem: Where health happens – through decisions that don't consider health…



Social and Environmental Determinants of Health

Health Status

Determined by: Genetics ~ 5%, Individual Behaviors ~ 30%

Health Care ~ 10%, Social and Environmental Conditions ~55%

World Health Organization, Commission on Social Determinants of Health, 2008