# TAC Advice on Guidance Documents on assessing health effects in Impact Assessment

Having reviewed the Impact Assessment Agency of Canada's guidance document <u>Analyzing Health</u>, <u>Social and Economic Effects under the Impact Assessment Act</u> over 2019-20, and Health Canada's (HC) draft Interim Guidance Document For the Health Impact Assessment of Designated Projects Under the Impact Assessment Act (HIA Guidance) at its November 2022 meeting, the TAC provided the following comments on the latter at their January 2023 meeting:

## **Overall Approach**

- Risk of siloed analysis. HC's draft guidance document risks taking a siloed approach in which the health analysis is separate from the main analysis. This approach may lead to a failure to integrate the analysis of health impacts within the IA. As this will lead to challenges for practitioners, it is recommended that HC work closely with IAAC to ensure that all IA guidance is mutually reinforcing. The research memos on HIA prepared for the TAC in 2021, and which are posted on IAAC's website, provide guidance on the integration of HIA and IA.
- 2. **Discrepancies between HC and IAAC guidance.** It is not immediately clear how the seven-step HIA guidance aligns with the <u>five phases of the IA process outlined on IAAC's website</u>. It is recommended that HC either prepare a clear explanation of how the two approaches fit together, or work with Agency to align with IA phases in Agency documents. In particular, it is recommended that HC use the same terminology as IAAC.
- 3. **Revisions are needed before further consultation**. The TAC believes that the problems in the current draft of the HIA Guidance are pressing enough that they should be revised before being sent out for further consultation. In particular, HC should work with Agency to update and align with the IA phases before consulting further on the draft. Other parties are likely to raise similar concerns as the TAC.

#### Additional Recommendations:

- 4. **The text could be more readable**. Portions of the draft are not as user-friendly as they should be. In particular, HC's diagrams are not as intuitive as those that appear in IAAC's guidance or the TAC HIA memos from 2021.
- 5. *More pragmatic*. More practical tools, and a detailed methodology for carrying out an HIA, are needed to clarify expectations.
- 6. *More analysis is needed on Indigenous health impacts.* The TAC welcomes HC's commitment to expanding the section on Indigenous health. It is recommended that IAAC provide further support to HC in this work, for example, by sharing the HC HIA document with other relevant Agency advisory bodies.

7. *More focus on the public interest decision*. Under the *Impact Assessment Act*, a project's approval depends on the public interest determination. HIA analysis should be structured so that it clearly feeds into the public interest determination.

## 8. More emphasis is needed in a subsequent draft on the following:

- Positive health effects
- Cumulative effects
- Analysis of jurisdictional responsibility for health effects
- Research ethics concerns associated with health impact collection and analysis by proponents
- Mental health effects
- o Integration of HIA within the impact assessment as a whole
- Ensure that the level of detail supports analysis of health effects that is as robust as analysis of environmental effects

## **Recommended Actions for IAAC to Support HC's Work**

- 9. Take a "whole of government" approach to finalizing guidance. To avoid two sets of inconsistent guidance on health impact assessment at the federal level, HC and IAAC should commit to a shared guidance finalization process. This process should ensure that HC's guidance will align with, or cause parallel and simultaneous revisions to, the Agency's HSE Guidance.
- 10. *Clarity on when HC versus IAAC's guidance will prevail.* Proponents need clarity on when to refer to IAAC guidance and when to refer to HC guidance. HC and IAAC's guidance documents should refer to each other and clearly indicate when each takes precedence.
- 11. *Showing the linkages between health-related documents*. The development of a concordance table linking IAAC guidance related to health effects to HC's HIA guidance is recommended. It is also recommended that the Tailored Impact Statement Guidelines (TISG) refer to the relevant sections of Agency and HC guidance (once final version available), as well as other relevant texts.
- 12. *Clarifying which documents take precedence*. To clarify matters for practitioners, the Agency should clearly specify the TISGs and Agency guidance take precedence in individual Impact Assessments.
- 13. *Ensure that guidance documents are regularly updated.* The HIA field is new and dynamic. IAAC and HC should ensure that staff keep abreast of best practices and that this learning is interpreted and made available to proponents / practitioners. The Agency should commit to regularly updating the health guidance, so that it reflects changes in the field.