Citizen Participation in Health Impact Assessment: An Overview of the Risks and Obstacles

November 2011

One of the mandates of the National Collaborating Centre for Healthy Public Policy (NCCHPP) is to inform Canadian public health practitioners about effective strategies for promoting the adoption of healthy public policies. Health Impact Assessment (HIA) currently represents one of the most structured practices available to public health actors. It is applied to policies developed by sectors other than that of health that can significantly affect health determinants. This fact sheet focuses on one of the methodological aspects of implementing health impact assessments, namely the role that can be assigned to citizen participation.

Definitions

HEALTH IMPACT ASSESSMENT

Health Impact Assessment (HIA) can be defined as a combination of procedures, methods and tools by which a policy, program or project may be judged as to its potential effects on the health of a population (European Centre for Health Policy, 1999).

CITIZEN PARTICIPATION

Citizen participation refers to all of the means that are used to involve, whether actively or passively, citizens or their representatives in an HIA process.

Risks/Obstacles to Citizen Participation

The founding documents of HIA, and in particular the Gothenburg Consensus paper (European Centre for Health Policy, 1999), identify citizen participation as one of the cornerstones of HIA. In fact, some practitioners and researchers maintain that an HIA remains incomplete without the effective and concrete participation of the community (Dannenberg, Bhatia et al., 2006, p. 266). However, participatory practices in HIA are still limited in scope and number (Gagnon, St-Pierre et al., 2010). In addition, even the idea of citizen participation in HIA seems poorly

articulated and is sometimes called into question (Mahoney, Potter et al., 2007; Wright, Parry et al., 2005).

Basing our discussion on a review of the literature on HIA¹ carried out using predetermined terms,² we will explore, in this fact sheet, five categories of factors that can explain the significant gap between the participatory rhetoric attached to HIA, and actual practices. It should be noted that these factors can be simultaneously viewed as risks or obstacles. In fact, strong advocates for citizen participation see them as obstacles that can and must be overcome. Others see them more as real risks that serve to explain these actors' mitigated interest in, perhaps even their opposition to, citizen participation in HIA.





Four databases indexing scientific journals covering public health and the social sciences were consulted for our literature review: PubMed, OvidSP, EBSCO Host and CSA Illumina. Searches were carried out using predetermined terms and were aimed at identifying all of the relevant publications published before July 2009, in both French and in English. Initial searches led to the identification of 443 potentially relevant articles. The title and abstract of each article were analyzed to determine their relevance and duplications were eliminated. All articles examining citizen participation in other sectors were eliminated (e.g.: environmental impact assessment). The relevant articles were then analyzed in greater depth, along with their references, so as to identify other publications of interest. Our final inventory included 51 articles focused on citizen participation in HIA.

Searches carried out using PubMed and OvidSP used the following terms and boolean operators: "health impact assessment" AND "consumer participation". The searches carried out in EBSCO Host and CSA Illumina used the following terms and boolean operators: (Public OR Communit* OR Citizen* Or Stakeholder*) AND (Participat* OR Consult* OR Involv* OR Engag*).

1) Organizational Risks/Obstacles

Public organizations that are called on to conduct HIAs (e.g.: public health branches, regional health authorities, or municipalities) have limited human and financial resources with which to support citizen participation strategies (Kearney, 2004). In addition, establishing participatory processes can prove incompatible with decision-making timeframes, which are often very short (Wright et al., 2005; Mahoney et al., 2007). Thus, tension continues to exist between the time and resources available to meet decision makers' demands with respect to HIA, and the time and resources required to establish a citizen participation strategy.

2) Community Risks/Obstacles

Some HIA practitioners appear to doubt the desire of citizens to invest time and energy in an HIA process; citizens already being quite busy fulfilling their own daily obligations (Parry & Wright, 2003, p. 388). Moreover, some excluded or marginalized groups might be difficult to mobilize (Wright et al., 2005, p. 61). It is also possible that citizens' mistrust of governmental institutions makes the participatory methods used in HIA appear untrustworthy to them (Kearney, 2004, p. 227).

The Five Risks/Obstacles to Citizen Participation

- 1. Organizational
- 2. Community
- 3. Political
- 4. Theoretical
- 5. Methodological

3) Political Risks/Obstacles

Decision makers can also themselves be mistrustful, and may associate certain risks with citizen participation in HIA. Unlike some authors who see the participatory approach as consensual and cooperative (Lester & Temple, 2006, p. 916), others, like Kearney (2004, p. 227), point out that it can spark controversy within a community or reignite a latent conflict, which will impede the decision-making process. Some government authorities also fear that citizens could mount systematic opposition toward any large-scale project and that the decision-making process could thus be held hostage (Kearney, 2004, p. 225). Still according to Kearney (2004), decision makers are generally risk-averse. They could be

hesitant to commit to a participatory process that risks undermining their ability to implement projects, programs or policies.

4) Theoretical Risks/Obstacles

Some authors contend that the idea of citizen participation is poorly articulated in the founding documents of HIA; these documents evoke the notion without, however, making explicit what is meant (Mahoney et al., 2007). Thus, it seems that the meaning of "citizen participation" remains rather ambiguous, as does the way to integrate it into the science of HIA. Some even argue that the theoretical foundations of HIA have not yet reached a level of maturity that allows for the risk-free involvement of citizens (Cole, Shimkhada et al., 2005, p. 385).

5) Methodological Risks/Obstacles

The literature on HIA offers few clear answers to the questions that concern practitioners: Which citizens should be involved? At which point in the HIA process should they be involved? What should be their level of involvement in (or degree of influence on) the HIA process? The absence of a proven method thus seems to feed a certain amount of scepticism toward citizen participation. Some view it as an intangible practice and an unattainable goal (Elliott & Williams, 2008, p. 1112).

Conclusion

The rhetoric of participatory HIA is confronted with several significant risks and obstacles. These reflect, in large part, the fact that citizen participation in HIA is an emerging practice. This novelty gives rise to concerns and uncertainty about the effects citizen participation might have on HIA and on the decisionmaking process. However, it seems important to place these risks and obstacles in perspective, by examining the considerable arguments in favour of involving citizens in an HIA process, which we have documented in another fact sheet. One must also consider the fact that citizen participation can rely on a variety of means to help mitigate some of the risks and obstacles identified above, regardless of the goals one has in undertaking the HIA. Thus, a final fact sheet in this series documents the practical dimensions of implementing a participatory approach.

Bibliography

- Cole, B. L., Shimkhada, R. et al. (2005). Methodologies for realizing the potential of health impact assessment. *American Journal of Preventive Medicine*, 28, 382-389.
- Dannenberg, A. L., Bhatia, R. et al. (2006). Growing the field of health impact assessment in the United States: an agenda for research and practice. *American Journal of Public Health, 96,* 262-270.
- Elliott, E. & Williams, G. (2008). Developing public sociology through health impact assessment. *Sociology of Health & Illness, 30,* 1101-1116.
- European Centre for Health Policy. (1999). Health Impact Assessment: Main concepts and suggested approach. Gothenburg consensus paper. Brussels: WHO-Regional Office for Europe. Retrieved from: http://www.hiaconnect.edu.au/files/Gothenburg Consensus Paper.pdf.
- Gagnon, F., St-Pierre, M.-N., & Daigtnault-Simard, X. (2010). La participation du public dans l'évaluation d'impact sur la santé: Pourquoi et comment? Québec: Groupe d'étude sur les politiques publiques et la santé. Retrieved from: http://www.gepps.enap.ca/GEPPS/docs/Serietransfertdeconnaissances/GEPPS participat ioncitoyenne.pdf.

- Kearney, M. (2004). Walking the walk? Community participation in HIA A qualitative interview study. *Environmental Impact Assessment Review, 24,* 217-229.
- Lester, C. & Temple, M. (2006). Health impact assessment and community involvement in land remediation decisions. *Public Health*, *120*, 915-922.
- Mahoney, M. E., Potter, J. L., & Marsh, R. S. (2007). Community participation in HIA: Discords in teleology and terminology. *Critical Public Health*, *17*, 229-241.
- Parry, J. & Wright, J. (2003). Community participation in health impact assessments: intuitively appealing but practically difficult. *Bulletin of the World Health Organization, 81,* 388. Retrieved from: http://www.who.int/bulletin/volumes/81/6/parry.pdf.
- Wright, J., Parry, J., & Mathers, J. (2005).

 Participation in health impact assessment:
 objectives, methods and core values. *Bulletin of the World Health Organization*, 83, 58-63.
 Retrieved from: http://www.who.int/bulletin/volumes/83/1/58.pdf.

November 2011

Author: François-Pierre Gauvin & Marie-Christine Ross, National Collaborating Centre for Healthy Public Policy

ACKNOWLEDGEMENTS

The authors would like to thank Geneviève Hamel, Anika Mendell and Louise St-Pierre from the National Collaborating Centre for Healthy Public Policy.

The National Collaborating Centre for Healthy Public Policy (NCCHPP) seeks to increase the expertise of public health actors across Canada in healthy public policy through the development, sharing and use of knowledge. The NCCHPP is one of six centres financed by the Public Health Agency of Canada. The six centres form a network across Canada, each hosted by a different institution and each focusing on a specific topic linked to public health. In addition to the Centres' individual contributions, the network of Collaborating Centres provides focal points for the exchange and common production of knowledge relating to these topics. The National Collaborating Centre for Healthy Public Policy is hosted by the Institut national de santé publique du Québec (INSPQ), a leading centre in public health in Canada.

Production of this document has been made possible through a financial contribution from the Public Health Agency of Canada through funding for the National Collaborating Centre for Healthy Public Policy (NCCHPP). The views expressed herein do not necessarily represent the views of the Public Health Agency of Canada.

Publication N°: 1414

This document is available in its entirety in electronic format (PDF) on the Institut national de santé publique du Québec website at: www.inspg.qc.ca and on the National Collaborating Centre for Healthy Public Policy website at: www.ncchpp.ca.

La version française est disponible sur le site Web du Centre de collaboration nationale sur les politiques publiques et la santé CCNPPS) au : www.ccnpps.ca.

Reproductions for private study or research purposes are authorized by virtue of Article 29 of the Copyright Act. Any other use must be authorized by the Government of Québec, which holds the exclusive intellectual property rights for this document. Authorization may be obtained by submitting a request to the central clearing house of the Service de la gestion des droits d'auteur of Les Publications du Québec, using the online form at http://www.droitauteur.gouv.qc.ca/en/autorisation.php or by sending an e-mail to droit.auteur@cspq.gouv.qc.ca.

Information contained in the document may be cited provided that the source is mentioned.

LEGAL DEPOSIT - 2nd QUARTER 2012

BIBLIOTHÈQUE ET ARCHIVES NATIONALES DU QUÉBEC

LIBRARY AND ARCHIVES CANADA

ISBN: 978-2-550-64288-6 (FRENCH PRINTED VERSION)

ISBN: 978-2-550-64289-3 (FRENCH PDF) ISBN: 978-2-550-64290-9 (PRINTED VERSION)

ISBN: 978-2-550-64291-6 (PDF)

© Gouvernement du Québec (2012)



