To the Editors:

A ‘health impact assessment’ (HIA) on proposed projects?

When a coal-fire electricity generation plant or a deep ocean trench along the Palk Strait is proposed, the proponents are required to submit an ‘EIA’ or Environmental Impact Assessment as part of their proposal. This is a good thing for it serves as a brake, albeit small, on damage to the natural environment. People concerned with the environment have created a mechanism to have impact on it considered as a routine procedure in relevant decisions. A measure of their success is the fact that ‘EIA’ is now part of common parlance.

A similar assessment is worth mooting in relation to health impact to large projects and of policy decisions relating to specific matters. When, for example, a government proposes to enter into a trade agreement with another country, potential health impact from its terms should be among the things to be considered. What will happen through the proposed agreement to the price of various essential food items or the marketing of infant foods or the retail price of alcoholic beverages? Could a proposed relaxation of some labour laws lead to increased occupational health risks? And so on. This potential impact is not routinely assessed now, as an obligatory part of the decision making.

Including a section spelling out the likely health impact of a proposed project, trade agreement or policy decision can help decision-makers take on board that important consideration. The case for a ‘Health Impact Assessment or HIA, akin to the EIA, cannot easily be dismissed. It may, for instance, take the form of a paragraph, or even just a sentence, in the case of Cabinet papers. A more in-depth assessment may be deemed necessary in some cases. (In this country, where proposed legislation or policy changes are not publicly discussed before Cabinet decides, the case for making a health impact assessment an obligatory component of Cabinet papers is strong.)

Mechanisms to ensure that the HIA is accurate can easily be built in. It may be possible to have a designated agency or officer to provide this. The wider ‘health community’ can be allowed space to question the assessment of the designated responsible agency or officer. Precedents are available in how the EIA is used and operates.

Advocates of environmental protection and conservation have succeeded in making the EIA part of the policy decision making and project approval process. It’s time to work for a HIA of similar status.

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