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DEVELOPMENT OF A CANADIAN HIA COURSE

REVIEW OF EXISTING HIA COURSES METHODS AND RESULTS

Preliminary version—for discussion



National Collaborating Centres
for Public Health
Centres nationaux de collaboration
en santé publique

Institut national
de santé publique
Québec The Quebec coat of arms logo, featuring three fleurs-de-lis.

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NATIONAL COLLABORATING CENTRE
FOR HEALTHY PUBLIC POLICY

OCTOBER 2009



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*Institut national
de santé publique*
Québec The logo features the text "Québec" next to a stylized representation of the Canadian flag's four fleurs-de-lis.

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FOREWORD AND CONCLUSION

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LAYOUT

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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. It is one of six centres funded by the Public Health Agency of Canada located across Canada, each with a mandate for knowledge synthesis, translation and exchange in a different area of public health.

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The views expressed herein do not necessarily represent the views of the Public Health Agency of Canada.

This document is available in its entirety in electronic format (PDF) on the National Collaborating Centre for Healthy Public Policy website at: www.ncchpp.ca

La version française est disponible sur le site Internet du CCNPPS au www.ccnpps.ca.

This is a preliminary document. We invite reader feedback, which can be sent to ncchpp@inspq.qc.ca.

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

PROLOGUE

About the National Collaborating Centre for Healthy Public Policy (NCCHPP)

The National Collaborating Centre for Healthy Public Policy (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. They provide focal points for the exchange of knowledge on these topics.

The specific mandate of the NCCHPP is to support public health actors across Canada (including, notably, public administrators and members of community organizations) in their efforts to promote healthy public policies. Such efforts include bringing public health concerns and criteria about social, economic and environmental health determinants to bear on other public policy sectors (transport, development, agriculture, finance, employment, etc.). It should be noted that policies relating to health care services, such as those concerning Medicare, waiting lists or medical technology, for example, are explicitly excluded from our mandate so that our attention and efforts can be focused on non-medical health determinants.

FOREWORD

In order to assist HIA practitioners in Canada and increase capacity for Health Impact Assessments (HIA), the National Collaborating Centre for Healthy Public Policy (NCCHPP) asked Habitat Health Impact Consulting to develop a Canadian HIA course. The first task was to review existing HIA courses worldwide and report on the main lessons learned by providers in order to inform Canadian development. Included in this report is a description of the methods used, the outcomes of the scan of existing courses, and an analysis of the results.

The people who agreed to share their experience in Health Impact Assessment training are warmly thanked. The list of people who were asked can be found in the Appendix.

The content of this document has been provided mainly by Habitat Health Impact Consulting, but NCCHPP bears all responsibility for the report's conclusions on applying HIA to the Canadian context.

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1 METHODS

Course identification

The first goal was to identify and review all HIA training workshops or courses currently being offered worldwide. Courses were identified by:

- Searching course listings on HIA web sites (WHO, HIA gateway, CHETRE, HIA Connect, etc.),
- Listing courses previously known to Habitat,
- Searching the Internet using the Google search engine (key words: Health Impact Assessment trainings/workshops/courses), and
- Surveying several well-connected HIA practitioners to see if they knew of any courses that had not yet been identified.

All short workshops and online courses are included. Virtually all courses that are currently (or were previously) run in English or French-speaking regions have been identified. A total of 19 courses run by 15 organizations in Australia, New Zealand, the UK, Ireland, Canada, and the USA have been identified.

Table 1 summarizes the courses that have been identified and documents the level of success in exchanging with workshop organizers as well as in obtaining course materials.

Excluded courses

A number of courses were identified but not included in the final analysis. The following list summarizes the courses that were not included and provides an explanation as to why the decision was made to exclude them:

- HIA training provided as semester-long university courses was not included in this review because it is significantly different in length, depth, approach, and audience needs from the course that will be developed through this project.
- Pierre Gosselin's HIA website – This collection of web pages was originally thought to be an online course in HIA. However, after discussions with Mr. Gosselin, it was determined that this is not a course but rather a collection of pages to inform people about HIA worldwide.
- Belfast Healthy Cities – In conversations with this group it was determined that these courses are run sporadically, and for official training they refer to the Institute of Public Health, which is already included in this review.
- New Zealand Health Impact Assessment Support Unit – According to Matt Soeburg of this department, their training is offered by the University of Otago (Louise Signal) in conjunction with Robert Quigley. Information about these courses is included in the Health, Well-being and Equity Impact Assessment Unit, Otago University reviews.

Data gathering

For each course that was identified, different steps were taken:

- a) Material was gathered about the course.¹ This included: promotional materials, the course syllabus, slide presentations, course notes, teaching manuals, and any other materials used in the training.
- b) A telephone interview was scheduled with the course organizer. The purpose of the interview was to acquire any information that could not be obtained from the course materials, as well as to learn from their experience in developing and teaching HIA training workshops.

Course review

Each course was reviewed for a standard set of parameters, including usual audience, course duration, objectives, core competencies, educational methods, formats and schedules, costs, number of teachers, and how the course specifically addressed healthy public policy. All information was gathered on standard review sheets. One sheet was created for each course. As much information as possible was extracted from the course materials provided (advertising flyer, syllabus or teaching materials), and missing information was gathered through a phone conversation with the organizer.

Analysis

Based on the review of course materials and the telephone discussions with course organizers, a number of key success factors for HIA course development were identified, as well as specific factors that may be relevant to developing an HIA course in Canada. The analysis is presented below.

2 ANALYSIS

This section reviews key characteristics that influence the success of HIA training courses. The review focuses on a number of different course characteristics: course duration, audiences, course format, cost, core competencies, and healthy public policy focus. Table 2 provides a high-level summary of some of the key course characteristics.

¹ The course materials that have been gathered are proprietary to the organizations that donated them. The firm was given permission to review these materials in order to assemble this course. However, these materials should not be distributed or used for other purposes without obtaining the permission of the people who developed them.

Table 1: High-Level Summary of HIA Courses Included in the Review

ORGANIZATION, LOCATION	COURSE ORGANIZERS	MOST RECENT COURSE	LENGTH OF COURSE	COST TO PARTICI- PANTS ²	OPTIMAL NUMBER OF PARTICIPANTS	CORE COMPETENCIES/CONTENTS ³	HEALTHY PUBLIC POLICY FOCUS	COURSE MATERIALS OBTAINED
World Health Organization	Marla Orenstein, Murray Lee, Debbie Abrahams, Carlos Dora	June 17-19, 2008	3 days	N/A	20-30 people	<ul style="list-style-type: none"> • What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) • Other HIA methods – logic frameworks, describing the baseline, finding and evaluating evidence, quantitative analysis and modeling, qualitative approaches • Engaging the community/stakeholder participation • Building capacity • HIA's role in other assessment modalities (integrated assessments, EIA, SIA) 	Does not explicitly address healthy public policy	Syllabus Teaching materials
San Francisco Department of Public Health	Rajiv Bhatia, Jonathan Heller, Lili Farhang, Aaron Wernham	July 22-25, 2008	4 days	\$300 USD (increasing to \$500; \$614 CAD)	30-40 people	<ul style="list-style-type: none"> • What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) 	HIA is understood as a tool for creating healthy public policy; policy issues are addressed	Syllabus Teaching materials

² Canadian dollar equivalents were calculated using exchange rates on March 26, 2009.³ Other core competencies that could be covered in the course may not be listed here.

ORGANIZATION, LOCATION	COURSE ORGANIZERS	MOST RECENT COURSE	LENGTH OF COURSE	COST TO PARTICI- PANTS ²	OPTIMAL NUMBER OF PARTICIPANTS	CORE COMPETENCIES/CONTENTS ³	HEALTHY PUBLIC POLICY FOCUS	COURSE MATERIALS OBTAINED
						<ul style="list-style-type: none"> • Other HIA methods: qualitative analysis and modeling, qualitative approaches • Engaging the community/stakeholder participation • HIA of a specific context (urban development) • HIA tools • HIA in a policy context • HIA's role in other assessment modalities (integrated assessments, EIA, SIA) 	throughout the course; examples in the course focus on urban development projects and policies.	
UCLA/ California Endowment	Brian Cole, Jonathan Fielding	N/A	1 day	Free	N/A	<ul style="list-style-type: none"> • What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) • Determinants of health • Other HIA methods—logic frameworks • HIA tools 	Does not explicitly address healthy public policy; use of some policy case studies	Teaching materials
Centers for Disease Control (CDC)	Candace Rutt	April, 2009	½ day to 2 days	Participants cover the travel expenses of the instructor	N/A	<ul style="list-style-type: none"> • Determinants of health • HIA's role in other assessment modalities (integrated assessments, EIA, SIA) • HIA in a policy context • Steps in the HIA (screening, scoping, assessment, recommendations and 	Does not explicitly address healthy public policy; use of some policy case studies.	Syllabus Teaching materials

ORGANIZATION, LOCATION	COURSE ORGANIZERS	MOST RECENT COURSE	LENGTH OF COURSE	COST TO PARTICI- PANTS ²	OPTIMAL NUMBER OF PARTICIPANTS	CORE COMPETENCIES/CONTENTS ³	HEALTHY PUBLIC POLICY FOCUS	COURSE MATERIALS OBTAINED
						reporting, evaluation) • HIA tools • Engaging the community/stakeholder participation		
IMPACT	Debbie Abrahams, Kate Ardern, Martin Birley, Anthea Cooke, Hilary Dreaves, Sophie Grinnell, Fiona Haigh, Andy Pennington, Alex Scott-Samuel	Nov. 2008	5 days	£795 for academic and voluntary sectors; £995 for private sector (\$1,413 - \$1,770 CAD)		• What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) • Other HIA methods – qualitative approaches • Building capacity • Experience conducting HIA • Quality assurance	N/A	Flyer Teaching materials
London Health Observatory	Anthea Cooke, Fiona Sawney, Kate Benson, Lynn Snowden, Jean Rowe, Anna Boltong	Approx. Nov. 2007	1 day	£125 (\$222 CAD)	N/A	• What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) • HIA in a policy context	HIA is understood as a tool for creating healthy public policy; policy issues are addressed throughout the course.	N/A
London Health Observatory	Anthea Cooke, Fiona Sawney, Kate Benson, Lynn Snowden,	Approx. Nov. 2007	4 days	£450 (\$800 CAD)	N/A	• What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, scoping, assessment, recommendations and	HIA is understood as a tool for creating healthy public policy; policy issues are	Flyer Syllabus Teaching materials

ORGANIZATION, LOCATION	COURSE ORGANIZERS	MOST RECENT COURSE	LENGTH OF COURSE	COST TO PARTICI- PANTS ²	OPTIMAL NUMBER OF PARTICIPANTS	CORE COMPETENCIES/CONTENTS ³	HEALTHY PUBLIC POLICY FOCUS	COURSE MATERIALS OBTAINED
	Jean Rowe, Anna Boltong					<ul style="list-style-type: none"> reporting, evaluation) • HIA in a policy context • Building capacity • Networking/finding resources • Experience conducting HIA • Determinants of health • Engaging the community/stakeholder participation 	addressed throughout the course; role of evidence in policy making is discussed, along with examples from participants.	
Inukshuk Consultancy	Anthea Cooke	Feb. 2009	3 days	£400-£500 (offered on a sliding scale) (\$711 – \$890 CAD)	15-18 people	<ul style="list-style-type: none"> • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) • Building capacity • Engaging the community/stakeholder participation • Experience conducting HIA 	HIA is understood as a tool for creating healthy public policy.	Flyer Syllabus Teaching materials
Birley HIA	Martin Birley, Veronica Birley	2008	4-5 days – depends on whether field trip is included or not	N/A	12-24 people	<ul style="list-style-type: none"> • What is HIA? (types, rationale, utility, definitions, values, principles) • Experience conducting HIA • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) • Quality assurance • Engaging the community/stakeholder participation • HIA in a specific context (resource development) 	Does not explicitly address healthy public policy	Flyer
Welsh Health Impact Assessment Support Unit, Wales	Liz Green, Gareth Williams, Chloe Chadderton,	Oct 9-10, 2008 (Int. HIA Confer- ence)	1 ½ hours to one day	Free	8-10 people per facilitator	<ul style="list-style-type: none"> • What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, scoping, 	HIA is understood as a tool for creating healthy public	Syllabus Teaching materials

ORGANIZATION, LOCATION	COURSE ORGANIZERS	MOST RECENT COURSE	LENGTH OF COURSE	COST TO PARTICI- PANTS ²	OPTIMAL NUMBER OF PARTICIPANTS	CORE COMPETENCIES/CONTENTS ³	HEALTHY PUBLIC POLICY FOCUS	COURSE MATERIALS OBTAINED
(WHIASU)	Eva Elliot					<p>assessment, recommendations and reporting, evaluation)</p> <ul style="list-style-type: none"> • Determinants of health • Experience conducting HIA • Networking/finding resources • HIA tools 	<p>policy; main clients are involved in policy making.</p>	
CHETRE, Australia	Ben Harris-Roxas	Feb 25- 27, 2009	3 days	\$935 AUD (\$806 CAD)	25 people	<ul style="list-style-type: none"> • What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) • HIA's role in other assessment modalities (integrated assessments, EIA, SIA) • Other uses of HIA (equity, health promotion, health protection) 	<p>HIA is understood as a tool for creating healthy public policy, one module focuses on healthy public policy.</p>	Flyer Syllabus Teaching materials
Deakin University, Australia	Jenny-Lynn Potter, Mary Mahoney	N/A	1 day	N/A	N/A	N/A	N/A	Flyer
Deakin University, Australia	Jenny-Lynn Potter, Mary Mahoney	June 30- July 3, 2009	4 days	\$1,250 AUD (\$1,079 CAD)	30 people	<ul style="list-style-type: none"> • What is HIA? (types, rationale, utility, definitions, values, principles) • HIA in a policy context • HIA's role in other assessment modalities (integrated assessments, EIA, SIA) • HIA tools 	<p>HIA is understood as a tool for creating healthy public policy; policy issues are addressed throughout the</p>	Flyer Syllabus Teaching materials

ORGANIZATION, LOCATION	COURSE ORGANIZERS	MOST RECENT COURSE	LENGTH OF COURSE	COST TO PARTICI- PANTS ²	OPTIMAL NUMBER OF PARTICIPANTS	CORE COMPETENCIES/CONTENTS ³	HEALTHY PUBLIC POLICY FOCUS	COURSE MATERIALS OBTAINED
						<ul style="list-style-type: none"> • Building capacity • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) • Engaging the community/stakeholder participation • Other uses of HIA (equity) 	course; role of evidence in policy making is discussed, along with examples from participants.	
New Zealand Health Impact Assessment Support Unit and Health, Well-being and Equity Impact Assessment Unit	Robert Quigley, Louise Signal, Martin Ward	Feb 23-24, 2009	2 days (Introductory course)	\$400-\$500 NZD (\$284-\$355 CAD)	15-24 people	<ul style="list-style-type: none"> • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) • Other uses of HIA (equity) • HIA in a policy context • Determinants of health • HIA tools 	HIA is understood as a tool for creating healthy public policy; policy issues are addressed throughout the course; discussion of the role of evidence in policy making, policy making theory and examples from participants.	Teaching materials
New Zealand Health Impact Assessment Support Unit and Health, Well-being and Equity Impact Assessment Unit	Robert Quigley, Louise Signal, Martin Ward	Feb 23-24, 2009	2 days (Advanced level course)	\$400-\$500 NZD (\$284-\$355 CAD)	15-24 people	<ul style="list-style-type: none"> • What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) • Other HIA methods – finding and evaluating evidence 	HIA is understood as a tool for creating healthy public policy; policy issues are addressed throughout the course;	Teaching materials

ORGANIZATION, LOCATION	COURSE ORGANIZERS	MOST RECENT COURSE	LENGTH OF COURSE	COST TO PARTICI- PANTS ²	OPTIMAL NUMBER OF PARTICIPANTS	CORE COMPETENCIES/CONTENTS ³	HEALTHY PUBLIC POLICY FOCUS	COURSE MATERIALS OBTAINED
						<ul style="list-style-type: none"> • Other uses of HIA (equity) • HIA in a policy context • Determinants of health • HIA tools 	discussion of the role of evidence in policy making, policy making theory and examples from participants.	
Institute of Public Health, Ireland	Claire Higgins, Owen Metcalfe, Teresa Lavin	N/A	½ day	Free	N/A	<ul style="list-style-type: none"> • HIA in a policy context • What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) 	HIA is understood as a tool for creating healthy public policy; policy issues are addressed throughout the course.	N/A
Institute of Public Health, Ireland	Claire Higgins, Owen Metcalfe, Teresa Lavin	Feb, 2009	3 days	Free	24 people	<ul style="list-style-type: none"> • What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) • Other HIA methods – finding and evaluating evidence • HIA tools • Engaging the community/stakeholder participation 	HIA is understood as a tool for creating healthy public policy; policy issues are addressed throughout the course.	Syllabus
NHS Scotland (On-line)	N/A	N/A	Approx. 10.5 hours	Free	N/A	<ul style="list-style-type: none"> • What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, 	HIA is understood as a tool for creating	Teaching materials

ORGANIZATION, LOCATION	COURSE ORGANIZERS	MOST RECENT COURSE	LENGTH OF COURSE	COST TO PARTICI- PANTS ²	OPTIMAL NUMBER OF PARTICIPANTS	CORE COMPETENCIES/CONTENTS ³	HEALTHY PUBLIC POLICY FOCUS	COURSE MATERIALS OBTAINED
						<p>scoping, assessment, recommendations and reporting, evaluation)</p> <ul style="list-style-type: none"> • Other HIA methods – finding and evaluating evidence • Experience conducting HIA • Other uses of HIA (equity) • Determinants of health 	healthy public policy.	
WHO-PAHO CC on Environmental and Occupational Impact Assessment and Surveillance, Quebec (On- line)	Pierre Gosselin, Jacinthe David	Premieres in May 2009	50 hours (on-line)	Attempt being made to obtain funding so that the course can be offered for free	N/A	<ul style="list-style-type: none"> • What is HIA? (types, rationale, utility, definitions, values, principles) • Steps in the HIA (screening, scoping, assessment, recommendations and reporting, evaluation) • HIA's role in other assessment modalities (integrated assessments, EIA, SIA) • HIA of a specific context (mining) • Quality assurance • Engaging the community/stakeholder participation • HIA tools 	Does not explicitly address healthy public policy	Teaching materials

3 KEY FINDINGS

3.1 COURSE DURATION

The courses ranged in length from a few hours to 5 days. Generally speaking, the aims of shorter courses were different from the aims of longer courses. The shorter courses were designed to introduce HIA concepts to upper management or to persons with little prior knowledge of HIA. Shorter courses are also used for people who require a refresher on HIA methods. The longer courses were developed to provide sufficient training for individuals to undertake an HIA at a beginner level.

Table 2 summarizes course durations for the 19 courses that were identified, followed by some additional notes on course length.

Table 2: Course Duration of HIA Courses

Course Duration	Number of Courses
1.5 hours to 1 day	6*
2 days	3*
3 days	4
4+ days	5
Online course	2

*The CDC course was counted in both of these categories because it can vary from a ½ day to 2 days.

- Four out of the six organizations offering short courses (one day or less) also offer multi-day courses. Organizers see the audiences and purposes of the courses being sufficiently distinct as to create a need for both.
- Typically, shorter courses (one day or less) are attended by organization leaders to learn about HIA and determine whether or not HIA is a tool worth applying in their organizations. A short course format is also used as a way to provide additional training to HIA practitioners who are looking for a refresher course or advanced training. The longer, 2-5 day courses are attended by people who will be carrying out HIAs or who are currently practicing HIA and require more training. **The different course lengths complement each other; the short courses generate interest and demand for HIAs and HIA practitioners, and the longer courses provide capacity in HIA.**
- Over time, most organizations have encountered difficulties maintaining both the longer and shorter courses. Three of the six short courses (one day or less) are no longer offered due to insufficient funding and resources (personnel). However, all of these organizations

agree that the shorter course helps raise awareness of HIA and increases demand for a longer training course.

- Most organizations offer courses that are 3 days or less. Many organizers say that this length is ideal, as it allows participants to absorb enough material to be comfortable carrying out an HIA at a basic level, and participants feel that they can manage the time away from work.

3.2 AUDIENCE

The audience for the courses differs depending on the course duration and content. Typically, shorter courses (one day or less) are attended by organization leaders who want to learn about HIA and determine if HIA is a tool that they can apply in their organizations. The longer two to five-day courses are attended by people who are or will be carrying out HIAs.

- Attendees included local and state government officials (generally in planning, environment and health services), public health practitioners, voluntary sector representatives (particularly housing organizations), graduate students, researchers, employees of multinational companies and government, EIA practitioners, health service planners, private consultants, and health promotion practitioners (nurses).
- A few instructors noted the importance of having a diverse audience; particularly a mix of health professionals and city planners or resource sector practitioners, or a mix of real-world practitioners and academics or students. It seems to be important to provide participants an opportunity to work with partners from other industries that they are not normally associated with, yet would need to work with when conducting an HIA. Martin Birley especially emphasized this point.
- The major difference between advertised and actual publics for the courses was the participation by voluntary sectors. Although this group is listed on most advertising pamphlets, discussions with instructors revealed that few people from this sector actually attend the courses, despite being offered discounted prices in most circumstances. Some instructors believe that this sector does not attend the sessions because they are already over-burdened and have few resources. Those who did attend wanted to use HIA as an evidence-based method in funding proposals.
- Course sizes have ranged from 12-40 participants, with most courses given to between 15 and 30 people (8-12 people per facilitator). Factors indicated as important in determining class size include cost-effectiveness, number of instructors, the competency of facilitators, and course management.
- Many of the courses are offered in one location, meaning that participants need to travel to the course; other courses are brought to the participants. The latter arrangement is typical when a private organization offers the course, while institutions tend to offer the course in one location. Ben Harris-Roxas noted that participants will fly 1-5 hours to attend the CHETRE course in New South Wales, Australia, which—like Canada and unlike the UK—has a small population spread over a large geographical area.

3.3 COURSE FORMAT

Schedule

- A day of teaching generally consists of approximately 6.5 hours of instruction, plus two 15 to 30-minute coffee breaks and a one-hour lunch break. One course that provided only a few short breaks received critical feedback from participants on this aspect of the course.
- It is important to schedule ample time for questions and answers as well as small group discussions. In order to grasp the applicability of HIA, it is important for participants to have enough time to learn from each others' experiences and share their own experiences.
- One course (SFDPH) was run in concurrent sessions last year, forcing participants to choose the sessions that they would most like to attend. The participants were critical of this approach because most of them wanted to attend all of the sessions. In this year's version of the course, they will be covering less material and will run only one session.
- Regarding the overall format of the course, a few instructors noted that it is essential to begin with an overview of HIA (what it is) and HIA methods before launching into specific exercises or discussing applications of HIA in other frameworks. Instructors found that students are unable to comprehend the exercises and HIA applications before they understand the stages of HIA.

Teaching techniques

1. Small group exercises - Most courses include a mix of didactic learning and small group exercises. All instructors believe that a participatory approach is essential in order to effectively teach HIA. Screening and scoping exercises are popular small group activities, regardless of the length of the course.
2. Case studies - All courses use case studies to teach specific aspects of HIA methods. The case studies are almost always local examples. Instructors feel that this aspect is important, as it makes the material relevant to the audience. Participants always give positive feedback on this teaching method. The case studies themselves are mostly examples of HIAs carried out by the instructors. In one instance, the case study had been fabricated; however, most instructors do not recommend this method. They feel that case studies should be real, so that the nuances of each case can be explored.

A few of the courses ask participants to bring in their own case studies to work on, but the majority of courses pre-select specific cases. The method for case study selection may depend on the comfort level of the instructor and facilitators or their teaching preferences. Both methods are well received by the participants because the material is relevant to the contexts in which they will be using HIA.

The courses also differ in the number of case studies that they present. A few focus on only one case study throughout the course, while others use a variety of project, planning and policy case studies. It would appear that the number of case studies selected depends on the length of the course and the local situations of participants. For instance, in Ireland, most HIAs are conducted on urban development projects, so one case study

about an urban development project appealed to and was relevant for the entire audience.

3. Invited speakers - Many courses invite experienced practitioners to teach sections of the course. This feature is always well received by participants. Course organizers noted that there is little resistance from practitioners about giving their time. Some noted that paying for travel expenses is necessary and worthwhile.

Robert Quigley offered a cautionary note, warning that sometimes this technique can backfire if the speaker is not actually an HIA practitioner. Quigley's group is in the process of developing a standard set of questions to guide the invited speaker's presentation and ensure that the speaker is an HIA practitioner (see Quigley review for more details).

4. Pre-reading – Many courses include materials to be read before the class; however, many instructors find that students do not complete the readings before the class.
5. Reading materials often include a completed HIA to help students gain an understanding of what constitutes an HIA. This is appreciated by participants.
6. The use of multiple instructors is seen as very desirable. Reasons for using multiple instructors include: preventing instructor burn-out; allowing instructors to learn from other instructors' teaching methods; appealing to the various learning styles in the class.

Follow-up

Most courses offer follow-up assistance after the course. The instructors feel that this is important in order to build the participant's confidence in their ability to conduct an HIA. Follow-up assistance is offered over the phone and by email. In two instances, instructors have attended stakeholder meetings. The extent of follow-up required should be made clear in advance in order to avoid over-burdening instructors.

It is important to include evaluations at the end of each module/day. These evaluations are used to guide development of future courses and provide instructors with invaluable information.

The conversion rate (participants who go on to conduct an HIA themselves) tends to be low, regardless of the course format. Most instructors are not concerned about this trend, as they believe it is still important to raise awareness of HIA and encourage people to think about health in situations where they normally would not.

3.4 COST

Information was gathered on the registration fees charged for twelve courses. Four of these courses (three organizations) are offered free of charge. Although the CDC offers their course for free, participants must cover the travel expenses of the instructor(s). Training sessions that are free of charge are generally funded by government agencies or public health endowment funds.

The remaining courses charge between \$153 – \$354 CAD per day depending on the audience (most offer a discount for voluntary sector participants). The average cost per day is \$241 CAD. The cost of the course always includes food for the day and all learning materials.

Cost was not mentioned by any of the instructors as a limiting factor in attendance. The price of a course offered in partnership with a university is set by the university. For CHETRE, this means that approximately half of the money brought in is over and above the operational costs of the course. Ben Harris-Roxas noted that running a course through a university is good for the long-term financial viability of his course.

3.5 CORE COMPETENCIES

The core competencies are the key learning areas covered in the training. A list of core competencies was generated by pulling course components from the syllabus and teaching materials and identifying common themes. Therefore, some core competencies may not have been accounted for in a course, particularly due to lack of information about the course. As a result, the values presented below are estimates.

Core Competency	Number of Courses Addressing Competency*
What is HIA? (types, rationale, utility, definitions, values, principles)	14
HIA methods	
- Screening, scoping, assessment, recommendations and reporting, evaluation	14
- Finding and evaluating evidence	4
- Logic frameworks	2
- Baseline description	1
- Quantitative analysis and modeling	2
- Qualitative approaches	3
- Quality assurance	3
Engaging the community/ stakeholder participation	9
HIA in a policy context	7
HIA's role in other assessment modalities (integrated assessments, EIA, SIA)	5
Building capacity to undertake HIAs	5
Other uses of HIA (equity, health promotion, health protection)	3
Determinants of health	6
Experience conducting HIAs	5
HIA tools	9
Networking/finding resources	2
HIA of a specific context	
- Urban development	1
- Resource development/ mining	2

*These numbers are approximate values

The main competencies covered in all courses, regardless of their length, are a description of the use and practice of HIA (including rationale, types of HIA, utility, guiding values and principles) and a sustained focus on the steps in HIA (screening, scoping, etc.). Aside from these two components, each course varied in its specific focus, depending on the local context that the course was developed to address.

3.6 HEALTHY PUBLIC POLICY

The majority of courses introduce HIA as a tool to create healthy public policy and teach healthy public policy as part of the rationale for carrying out HIA. Policy case studies, such as the Living Wage Ordinance, are used in many courses to teach HIA methods, allowing the participant to appreciate the role of HIA in a policy context. Three organizations (London Health Observatory; the Health, Wellbeing and Equity Impact Assessment Unit; and Deakin University) advanced the training of HIA in a policy context by specifically focusing on the use of evidence in policy making and in teaching policy making theories. These courses also allow participants to share their personal experiences with policy making. A more in-depth review of their teaching methods can be found in the respective standard reviews.

3.7 MISCELLANEOUS FINDINGS

Facilitators: Having a good facilitator is key to running a successful course. The facilitator must be a good instructor (who uses a variety of teaching methods) and be able to engage the participants. At least one instructor recommended that moderators take courses in facilitation.

Conflict issues: Issues of conflict will arise in any course; however, some instructors identified the key areas where conflict will arise in an HIA course and offered the following solutions:

1. Values and the definition of health – This becomes important in discussions of equity and around the definition of health. Instructors suggest that it is important to be transparent about the values underlying HIA and, if possible, try to remove some of the value-laden terms. For instance, one instructor speaks of differential impacts, as opposed to inequities or inequalities.
2. Resistance to HIA – Participants from specific sectors (EIA, planning, resource development) may not accept HIA methods and the overall purpose of HIA. Often this conflict arises as a result of language barriers between practices. One solution is to have a facilitator who is knowledgeable about or has experience working in the fields that may be opposed to HIA. This facilitator may have an easier time explaining the role of HIA and its importance in the particular area.

On-line courses: Information was gathered on two on-line courses (WHO-PAHO Collaborating Centre on Environmental and Occupational Impact Assessment and Surveillance, and NHS Scotland). Although the analysis includes most of the information collected on these courses, specific information regarding the logistics of running an on-line course can also be found in their respective standard reviews.

4 CONCLUDING REMARKS

HIA Training Course in the Canadian Context

Based on the Habitat study, the NCCHPP underscores the importance of adapting the content of training sessions to the specific context in which they are provided while maintaining the core elements of HIA.

Thus, the core elements should include:

- A discussion of HIA, the values that guide it and its utility,
- The different types of HIA and the rationale for including HIA in various contexts, and
- HIA methods of screening, scoping, assessment, recommendations and evaluation.

The NCCHPP emphasizes the importance of the following principles guiding the HIA process: taking into consideration the impacts on inequities in health, the ethical use of scientific information, the participation of stakeholders and of the community whenever possible, and the importance of understanding the context of the adoption of a public policy.

Potential applications of HIA vary greatly in the Canadian context. Initially, and still today at different levels, HIAs have been carried out as part of environmental impact assessments. Although the content of the training session to be developed for the NCCHPP might be useful in these contexts, it will for the most part be targeted at contexts of supporting the development of public policies, regardless of their anticipated impacts on the environment (or lack thereof). HIA practitioners who work in the context of environmental impact assessments will find useful tools in the guides developed by Health Canada (<http://www.hc-sc.gc.ca/ewh-semt/pubs/eval/index-eng.php>).

The specific contexts to which the training content can be adapted include:

- The Aboriginal setting, in which the concept of health and traditional values will justify the development of appropriate content by people in these communities. The guides and other tools developed in New Zealand will be useful in this context.
- The setting of municipal-level decision-making, which is important for the collaboration with the public health sector in promoting the adoption of healthy public policies.
- The setting of government decision-making, in which interest is growing for the institutionalization of HIA. Experience in Quebec has shown that the HIA process at this level has to be adapted to the administrative and political context of each jurisdiction.

Finally, NCCHPP acknowledges that HIAs can be carried out by actors who do not originate in the public health sector. In this case, HIA training will need to incorporate a section on the determinants of health.

The content of a training session developed through an NCCHPP initiative is intended to be used by any community group or public organization that wants to support capacity building,

with a goal of promoting adoption of healthy public policies in Canada through the HIA process.

APPENDIX:
LIST OF PEOPLE INTERVIEWED

List of People Interviewed

Anthea Cooke	United Kingdom
Martin Birley	United Kingdom
Claire Higgins	Ireland
Pierre Gosselin	Canada
Marla Orenstein	Canada
Jenny-Lynn Potter	Australia
Ben Harris-Roxas	Australia
Robert Quigley	New Zealand
Candace Rutt	USA