New Rapid HIA Model
used for the Farmers Field Rapid HIA Project

Background about the Rapid HIA Model

- Costs in the range of ~ $75K
- The HIA report can be completed in ~3 months
- Results in a short report
- Meets HIA Minimum Elements
- Engages and empowers those impacted and/or facing inequities

Consensus Process Models Used to Inform the Rapid HIA

- http://www.participedia.net/wiki/Participatory_consensus_conferences
- National Institute of Health consensus conference approach (see: http://consensus.nih.gov/aboutcdp.htm)
- Danish Institute of Technologies consensus process approach (Anderson and Jaeger 1999 available at: http://www.pantaneto.co.uk/issue6/andersenjaeger.htm)
- Citizens, experts, and the environment: the politics of local knowledge by Fischer, 2000
- Delphi method (Miller and Cuff 1986)

The Farmers Field Rapid HIA

Project Goals

1) Facilitate a diverse panel of potentially impacted residents to:
   - come to consensus about some of the potential health impacts of the Proposal based on data from the literature, existing conditions, input by subject matter experts, and deliberation;
   - come to consensus on a set of recommendations that could improve the health outcomes of the proposed project; and
   - develop and then disseminate a short report about the panel's findings and recommendations.
2) Engage residents in the decision making process and in participatory democracy (as opposed to representative democracy).

3) Empower residents with new information, skills, and confidence that can encourage them to become leaders and to influence important decisions affecting their lives.
4) Identify the trade-offs associated with various project alternatives.
5) Provide decision makers with credible findings and recommendations that can influence them to modify the proposed project in order to improve its impacts on health.
6) Pilot a new rapid HIA model.

Rapid HIA Process

1) Preliminary screening of this project was completed within approximately 3 weeks by the Los Angeles Community Action Network (LA CAN) and Human Impact Partners (the "Planning Committee"), and with some involvement from the funding agency, The California Endowment. The Planning Committee used HIA screening criteria (available at http://www.humanimpact.org/hips-hia-tools-and-resources) and discussed the intent to focus the HIA on displacement and impacts to housing affordability, including the connection between jobs and housing (but not a more extensive analysis of jobs), as well as the link between displacement and access to public spaces.
2) The Planning Committee, together with project partners the Legal Aid Foundation of Los Angeles (LAFLA) and Physicians for Responsibility – Los Angeles (PSR-LA) set up the following three panels, and invited/confirmed participants.
   1. Impacted Residents (~15 people)
   2. Interested Stakeholders (the Offices of Elected Officials, Advocacy Groups, Community Organizations)
   3. Subject Matter Experts (Public Health, City Planning, Housing; ensuring a diversity of opinion)

   Activities included identifying potential participants, writing a letter explaining the process/expectations and inviting them to participate, and following up with phone calls.

3) In-person meeting 1: Scoping (~1 day)

   Attendees:
   - Planning Committee and partners
   - Impacted residents panel
   - (Subject matter experts and other stakeholders invited to observe the process)

   Goals for the meeting:
   - Ensure everyone understands the rapid HIA process in which they will be participating

- Ensure everyone has a clear understanding of the Farmers Field project proposal
- Provide Impacted Resident Panelists with training on the links between development and health, as well as case study examples demonstrating the integration of health into decision making
- Impacted Residents Panel:
  - came to a shared understanding about the potential impacts of concern by reviewing and revising proposed pathway diagram(s) linking the project to health determinant(s) and outcomes,
  - prioritized a manageable set of issues on which to focus, using pathway diagrams
  - Developed and came to agreement on a set of research questions, indicators, and methods that address the prioritized issues
    - Facilitation: HIP & LA CAN
    - Preparation (agenda, materials, etc.): Planning Committee
    - Logistics: LA CAN
    - Attendees: Impacted Residents Panel; Planning Committee; (Optional: Interested Stakeholders); (Optional: Subject Matter Experts)

4) After Meeting 1:
   - HIP prepared a short document with:
     - information about decision to be made
     - the scope of the rapid HIA (with a list of priority issues and measures to include in the HIA)
     - the findings of a brief literature review with evidence that confirms or refutes pathway links
     - readily available existing conditions data
   - LA CAN reviewed the document and provided feedback to HIP; HIP revised the document
   - Planning Committee sent the document out to Impacted Panel members well in advance of Meeting 2; Panel participants could provide feedback to the Planning Committee via email
   - Optional: Planning Committee could hold a separate meeting to present the content of the document to the Impacted Residents Panel members well in advance of Meeting 2; Panel participants provided feedback to the Planning Committee at this meeting
   - Planning Committee met to discuss proposed revisions
   - HIP revised the document
   - Planning Committee sent panelists a revised document as well as a list of any unresolved issues at least 1 week before Meeting 2
   - Planning Committee sent the final scope of the rapid HIA to Subject Matter Expert Panelists

5) Meeting 2: Assessment and Recommendations (2 days over one weekend, a few weeks following Meeting 1)
   - Day 1 Goals:
     - Based on the Scope, Subject Matter Expert Panelists and Interested Stakeholder Panelists provide brief summaries of the considerations they believe to be most important for the Impacted Resident Panel to consider in their deliberations regarding project impacts.
     - Impacted Resident Panel consider input, deliberate on the potential impacts, have questions answered, and come to a consensus about the direction, magnitude, severity, and quality of evidence of the most important health impacts of the proposed Specific Plan.
     - Outline the draft consensus of the Impacted Resident Panel and topics on which consensus was not reached.
     - Allow Subject Matter Expert Panel and Stakeholder Panelists to comment on the draft consensus.
     - Impacted residents revise consensus based on feedback from Subject Matter Experts and Stakeholder Panelists.
   - Day 1 evening:
     - HIP summarizes main conclusions from Day 1
   - Day 2 Goals:
     - Review main conclusions from Day 1 and revisit/revise as needed
     - Subject Matter Expert Panelists and Interested Stakeholder Panelists provide brief summaries of potential mitigations of any potential negative impacts identified
     - Impacted Resident Panel considers input, deliberates on the potential mitigations, has questions answered, and comes to a consensus about recommendations to make
     - Document consensus recommendations and where consensus was not reached
     - Impacted Resident Panel deliberates on a plan for monitoring impacts, has questions answered, and comes to a consensus on a monitoring plan
   - Facilitation: HIP & LA CAN
   - Preparation (agenda, materials, etc.): Planning Committee
   - Logistics: LA CAN

6) After Meeting 2:
   - HIP documented the consensus Assessment and Recommendations (as well as where consensus was not reached) and developed a report that included a description of the complete process and findings (Screening, Scoping, Assessment, Recommendations and Monitoring).
   - Planning Committee

- Reviewed and revised the report
- Sent out the report to the Impacted Resident panelists for review and approval
- Revised the report document if there are inaccuracies (but not with new information or changes from what was agreed upon in the meetings)
- Disseminated the final report to the 3 panels
- Worked with panelists to disseminate the findings to decision makers and others, including: holding a public briefing, meeting with decision makers, and posting the report on-line
- Wrote up case study about the project and process.

Timeline

- Send out invitations to panelists: April 1, 2012
- Meeting 1: April 25, 2012
- Meeting 2: May 12-13, 2012
- Final Briefing: July 11, 2012

Questions that were considered in the application of the rapid HIA model

- Do the impacted residents need to be given training (e.g., regarding what research is and how it can be used) to participate? (to include in the Scoping meeting (Meeting 1)?)
- Should impacted residents be members of a community organization or not?
- Should students be part of the process somehow?
- Who should be invited to participate in each of the panels?
- Do we need to ensure some sort of "balance" among the subject matter experts? (Yes, welcome people with different views, but not those who are antagonistic or closed to the process)
- Will we have Spanish-only speaking participants? Will translation services need to be arranged?
- Do we need to have the meetings on weekdays or weekends?
- After the scoping meeting, should we invite the impacted residents to send us data (e.g., photos, videos, etc) about existing conditions?
- What are the costs for LA CAN to coordinate activities and for HIP?