

The views expressed in this presentation are the views of the author/s and do not necessarily reflect the views or policies of the Asian Development Bank, or its Board of Governors, or the governments they represent. ADB does not guarantee the accuracy of the data included in this presentation and accepts no responsibility for any consequence of their use. The countries listed in this presentation do not imply any view on ADB's part as to sovereignty or independent status or necessarily conform to ADB's terminology.

# Asian Development Bank the Business Case for HIA

**Emma Marsden** 

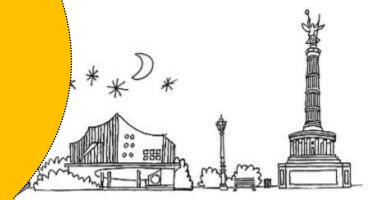
Senior Environment Specialist

Michiko Suga

Senior Social Development Specialist



HIA is a structured process that combines scientific evidence and community engagement to inform decision-makers about how they can increase the positive health benefits and reduce the negative health impacts of new infrastructure development. It also looks at how the benefits of development can be shared equitably and fairly across all affected communities.



ADB, 2016





## ADB strengthened HIA through a three pronged approach:

#### **BUSINESS CASE:**



Building a strong business case for HIA



#### **DEVELOP SKILLS:**

Providing capacity development, tools and resources

#### **DEMONSTRATE BENEFITS:**



Undertaking demonstration projects





#### **BUSINESS CASE:**



Building a strong business case for HIA

Benefit for better project design; improved occupational, community health and safety impact and risk management; and, improved economic outcomes of development projects

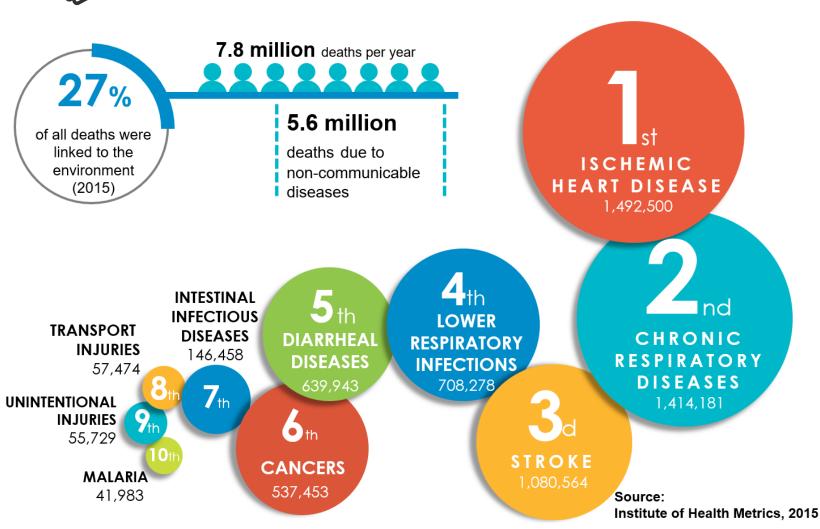


## 77

#### **BUSINESS CASE:**



Building a strong business case for HIA



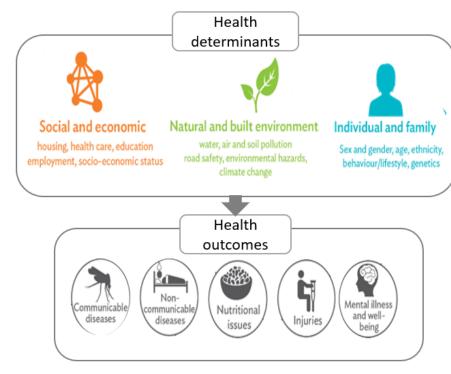




#### **BUSINESS CASE:**

## (IEI)

#### Building a strong business case for HIA



## Investing in Health Prevention:

+ \$1.60-2.50 rate of return

- Paying attention to health can improve revenue opportunities for governments, business and communities
- Reactive health management is really expensive... major businesses do not operate this way any longer
- Poor health conditions risk international businesses not being able to achieve their social and environmental performance commitments

International SOS, 2016

## Operational Plan for Health, 2015-2020

Strategy 2020

2008

health sector investments 1%-2%

Midterm Review

health sector investments

3%-5%

Every country faces challenges providing and financing health care.











medical goods

countries in meeting the post-2015 sustainable development goal of universal health coverage

Support developing member

Continue leveraging successful health outcomes from infrastructure projects

Support improvements in the regional public goods of the health sector

3 --- ADB health team --FOCUS AREAS

2020

#### infrastructure

hospitals • clinics • human resources • management systems

### health governance

accreditation • regulation • regional public goods

### health financing

insurance • private sector • public budgets

The initial health sector support efforts of ADB will focus on 8–12 interested developing member countries with existing health operations.

human resources infrastructure capacity development technology

Achieving better health outcomes demands innovative approaches

for managing health care more effectively, and improving quality at a lower cost.

efficiency qua

quality





#### **BUSINESS CASE:**



#### Building a strong business case for HIA

## Safeguards Operational Review ADB Processes, Portfolio, Country Systems, and Financial Intermediaries Independent Evaluation ADB

Review of ADB safeguards implementation recognized that the assessment of health impacts and risks could be strengthened:

"For environmental safeguards, the review's analysis identified (...) shortfalls in relation to the identification of potential construction, operational, and other impacts [including] information on risks to (...) community health and safety."





## HEALTH IMPACT ASSESSMENT

Bangladesh: Rupsha 800-Megawatt Combined Cycle Power Plant Project

Oh, we are affected by the new power plant project.

2900

Ms. Hridi and her family live in Rupsha near the proposed site for the gas fired power plant.

In her community, power outage is frequent, health clinics in the area don't have continuous access to energy needed to refrigerate medicines, vaccines or sterilize material.

PROJECT

WELL

MANAGED

WITH HIA

PROJECT

**POORLY** 

MANAGED



Ms.Hridi doesn't worry about construction site, workers and traffic. They are clean, organized, and healthy. Her two children and other 400 schoolchildren benefit from the new project clinic in the area. Ms. Hridi and her children will benefit from social investment

benefit from social investment on efficient use of electricity, livelihood and employment, a new solar system, better school materials.

Upon completion of plant with pollution control and shifting from diesel to natural gas on existing plant, they enjoy cleaner air and no noise pollution.



Infrastructure and economic development affect human health. Solid policy and legal frameworks for health impact assessment, effective institutional arrangements between key sectors, sound public health management plan, and effective monitoring and mitigation systems are critical to realizing positive health impacts from infrastructure development.

#### What does HIA require?



Practical HIA Guidelines



Capacity Development Training



Policy and Regulatory Framework



Clear Institutional Arrangement between Relevant Sectors





4 in 10 people don't have access to electricity.



96% of the population use solid fuels as the main source of energy for cooking in Khulna division.

108,000

Number of people die from poor outdoor air quality every year, including 7,000 children under 5 years of age.



Ms. Hridi worries safety of her children for traffic accident by trucks passing near school. Dengue is increased due to mosquitoes from construction site.

Ms. Hridi worries about HIV commercial sex for construction workers, and TB from workers overcrowded housing.

Clinic is crowded with construction workers. No space for her children to receive service.



Air pollution and noise from the power plant cause annoyance, high blood pressure, respiratory symptoms in Ms. Hridi, and delayed cognitive development in the children.



## HEALTH IMPACT ASSESSMENT

#### PHILIPPINES: PROJECT INDUCED RESETTLEMENT



Esmerelda Lopez and her family are informal settlers along the right of way for a new railway line.

In her community they are constantly worried about being evicted as they lack legal tenure. As a result they also lack equal access to local services and empowerment to access them.

RESETTLEMENT

WELL

MANAGED

WITH HIA

RESETTLEMENT **POORLY** 

**MANAGED** 

WITHOUT HIA



Esmerelda does not unduly worry about the relocation. The process is open and transparent. They are informed regularly about where they will go, when and how.

Her two children and their friends benefit from the well resourced health clinic located right in their resettlement site.

Esmerelda has legal tenure and is supported by the government to set up a small business after she receives livelihoods training.

When resettlement is fully complete, she enjoys a cohesive social environment. She has access to sufficiently resourced services and the financial means to fulfil her family's needs.



### HIA

Infrastructure and economic development affect human health. Solid policy and legal frameworks for health impact assessment, effective institutional arrangements between key sectors, sound public health management plan, and effective monitoring and mitigation systems are critical to realizing positive health impacts from infrastructure development.

#### What does HIA require?





Training







Clear Institutional Arrangement between Relevant Sectors

#### **Health Challenges and Impacts** of Resettlement

#### HEALTH CHALLENGES

- Poor location of new settlement
- Loss of livelihood
- Loss of community cohesion
- Loss of spiritual links to ancestral land

#### **HEALTH IMPACTS**

- Malaria epidemic
- Malnutrition
- Communal and domestic violence and injury
- Substance abuse and gambling
- Depression and anxiety

Source: ADB. 2018. Health Impact Assessment: A Good Practice Sourcebook.



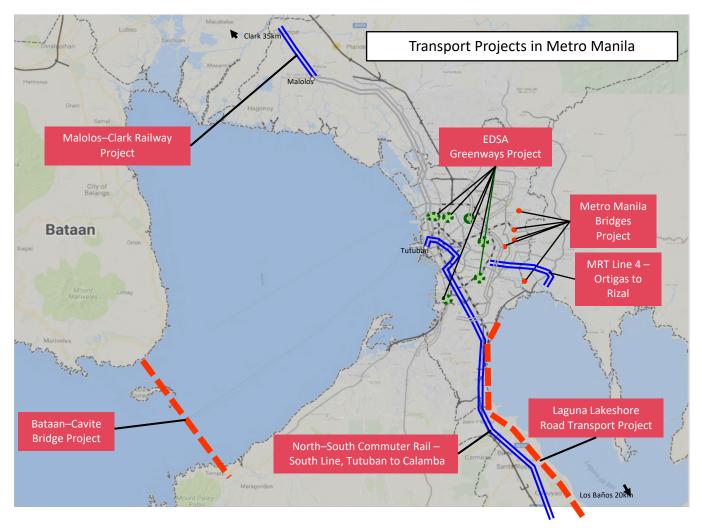
Esmerelda worries about where she is being moved to, the risks the location poses and her family's access to services there. She does not know how to prepare.

Esmerelda worries about HIV and commercial sex as neighbors begin to practice risky behaviors due to lack of work and presence of construction workers. She worries about TB due to overcrowding.

There is an increase in illness due to a lack of capacity for the host community to handle the influx of resettled families.

There are poor services at the resettlement site, community participation is poor, there are no economic opportunities. Everyone's mental and physical health suffers.





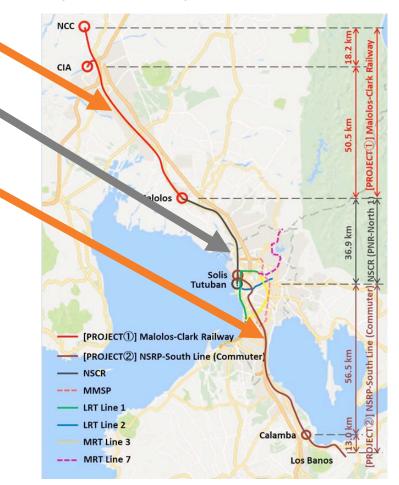




### Philippine Railway Development

- Malolos-Clark Railway Project (ADB approval anticipated 2019, cofinanced by JICA)
- Tutuban–Malolos Line (JICA-financed)
- North-South Commuter Rail –
   Tutuban to Calamba
   (ADB approval anticipated 2020, cofinanced by JICA)









## RESETTLEMENT DETERMINANTS

**COHESION** 



**LIVELIHOODS** 



AGE:



- ✓ Community
  participation, social
  networks, trust, access
  to and quality of
  services, support
  networks
  - Personal and community resilience to shocks
    - > Trust
- ✓ Community action and participation
- Quality of and access to services (health/market)
- Control in community (development/safety...)

- ✓ Livelihoods, access to opportunities, income, socioeconomic status, Income
  - Stability
  - Social status
    - Housing
  - Access to services
    - Resilience
  - ✓ Access to services
    - Transport
  - Training and assets
    - ✓ Social Cohesion
      - Community participation

#### **Children and Youth:**

- ✓ Parents' access to services/income,
  - ✓ School
- ✓ Household income/ livelihoods (child labor, food security...)
- ✓ Community social cohesion

(safety, freedom from violence)

- **✓** Participation
- ✓ Coping mechanisms



## FINDINGS AND RISKS

Resettlement SITE SELECTION and IMPLEMENTATION
TIMELINE may impact
EFFICACY OF SERVICES and LIVELIHOODS OPPORTUNITIES
which may impact

ACCESS TO school, health services, income and ALL HEALTH OUTCOMES

E.g. nutrition and hygiene, communicable and non-communicable diseases, mental health and well-being



## FINDINGS AND RISKS

- Resettlement Risks: in-city < out-of-city</li>
- COHESION:

RISKS: Support networks and social capital: inevitably broken and reduced

- ✓ MITIGATION: Transparency, participation and community support
- LIVELIHOODS:

RISK: Loss of income & livelihoods/no opportunities at resettlement site

- ✓ MITIGATION: Detailed and contextualized market assessment necessary
- CHILDREN/YOUTH:

RISK: increased out of school youth/child labor

MITIGATION: Children consulted and considered in resettlement planning

#### RISK EXAMPLES

RISK: increased out of school youth/child labor RISK: increased risky behavior leading to teen pregnancy, STIs/HIV, substance abuse, heightened vulnerability to disease





Providing capacity development, tools and resources:

Raising capacity by supporting the development of national HIA guidelines, a sourcebook for use in training and project preparation, establishing a network of HIA academics and practitioners, and providing a range of training opportunities





Developing sound regulatory and policy frameworks in the GMS:

- Myanmar and Viet Nam governments completed draft HIA guidelines
- Integration of health into the EIA process was initiated in Cambodia, Myanmar, and Viet Nam
- Lao PDR held national consultations on updating their existing HIA guidelines







#### Developing tools and resources for HIA practitioners:













Raising capacity at developing country level in the GMS:

6 universities in the GMS offered a HIA certificate course, targeting 240 future HIA practitioners

government and non-government participants trained to meet the needs for effective HIAs

- Developing a HIA curriculum in collaboration with the WHO Collaborating Centre for Environmental HIA at Curtin University
- Offering HIA certificate courses in partnership with universities in the GMS
- Training of government staff working in ministries of health and ministries of environment in 5 languages







#### Raising capacity within the ADB:



#### Integrated into:

- regular poverty and social analysis training
- regular social and environmental safeguards training
- technical training on labor, health and safety in ADB projects
- technical training on air quality management
- Training provided to project officers, environment and social safeguards staff in collaboration with existing training programs
- Capacity development of ADB staff is critical to mainstreaming HIA in the region and investment projects





Undertaking HIAs for infrastructure developments as demonstration projects:

HIAs for various infrastructure development projects, providing demonstration projects to show the benefits of HIA to ADB staff and government counterparts







#### Undertaking HIAs for infrastructure developments as demonstration projects:



Hongsa Power Plant (Lao PDR)



- Savannakhet SEZ (Lao PDR) - Mukdahan SEZ (Thailand) - Thilawa SEZ (Myanmar)

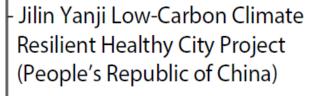


Second Rural Water Supply and Sanitation Sector Project (Cambodia) Ho Chi Minh City Wastewater and Drainage System (Viet Nam)



- Mandalay Urban Services Improvement (Myanmar)

- Yunnan Lincang Border Economic Cooperation Zone Development Project (People's Republic of China)





Second Human Resource Development Project (Viet Nam)



GMS East-West Economic Corridor Eindu to Kawkareik Road Development (Myanmar)

## BEST PRACTICE IN HEALTHY INFRASTRUTUCTURE DESIGN



Healthy urban development





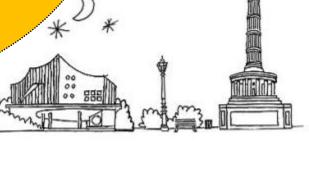


"Health isn't everything, but without it, everything else is nothing."







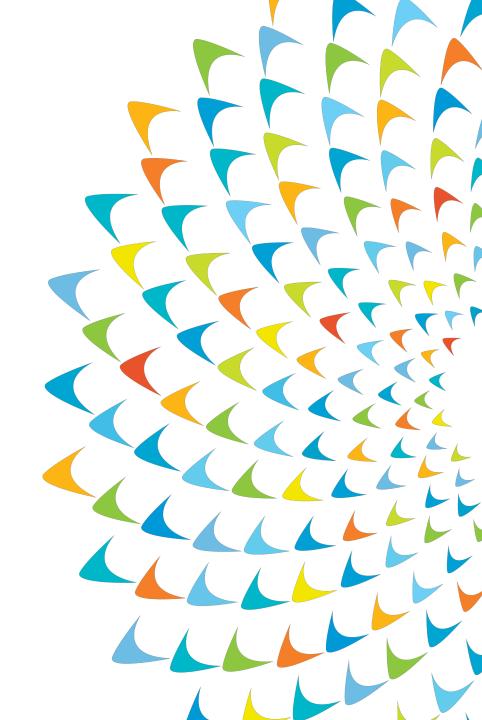








Thank you!





## Now choose your caravan sessions:

TITLE	PRESENTER
HIA Case Studies And Transboundary Health Issues	Filipe Silva
HIA For Economic Zones in the GMS	Janis Shandro
Hazardous Material Management in Thilawa SEZ, Myanmar	Gene Peralta
Advancing HIA in Lao PDR	Tayphasavanh Fengthong
Thai Experiences on HIA From Policy To Practice	Jittima Rodsawad
Towards the Establishment of the HIA Network Asia	Helen Brown



