



350.org, 20 Jay Street Suite 732, Brooklyn NY 11201, USA

✉ donations@350.org ☎ +1 802 552 4067 📠 +1 888 503 0670

House Bill 109 – Public Service Commission – Certificate of Public Convenience and Necessity –Rapid Health Impact Assessment Requirement

February 13, 2019 1:00pm
Committee: Economic Matters
Position: **SUPPORT**

Thank you for the opportunity to address this body by written submission.

My name is Tamara Toles O’Laughlin and I am the North America Director of 350.org, a global grassroots organization dedicated to the fast and just transition to 100% renewable energy, ending all fossil fuel projects, and divesting from fossil fuel companies.

The bill before this body aligns with our ongoing support of our local affiliates’ desire for impactful action in the climate decade. Moreover, the health equity of this bill as written aligns with our mission and vision for a multiracial and multigenerational movement to address the impacts of climate crisis consistent with science and justice.

As a resident of Maryland, I have an organic interest in legislation aimed at supporting greater health and longevity for the chronically underserved facing increased threats in the climate crisis. Policies that promote environments of clean air and water, strong local economies, and meaningful community engagement in policy-making go a long way to a better Maryland.

For these reasons, I urge support for House Bill 109, because it will improve the health and well-being of communities across the state and the region. Health Impact Assessments make use of readily available quantitative, qualitative, and participatory techniques to fully assess the impact these policies, plans, and projects will have on a community.¹

Rapid Health Impact Assessments are quickly becoming a standard tool to evaluate the human impact of long term infrastructure investment. In fact, a February 2015 report from the Health Impact Project, which considered data from the National Conference of State Legislatures, from 2009 to 2014, found that 17 states had considered a total of 56 bills to mandate that health impacts be taken into account prior to making final decisions on proposed projects and policies.² While many of these bills did not explicitly seek the use of an Health Impact Assessment (HIA) tool, 8 states considered bills that included most of the elements of a traditional HIA.³

Health Impact Assessments are generally supported by the World Health Organization, the Centers for Disease Control and Prevention who have included the process as a part of their planning resources for their *Healthy People 2020* initiative.⁴ Likewise, the Environmental Protection Agency, cites these assessments as essential tools to maximize potential positive health impacts while minimizing potential negative health impacts.⁵

Notably, in 2017 our own legislature took up the question of improved human health outcomes in state planning and projects by way of its SB340/HB1225 legislation and required a workgroup of State and non-state agency

¹ World Health Organization. Health Impact Assessment. <http://www.who.int/hia/about/why/en/>. Accessed March 6, 2018.

² Health Impact Legislation on the States, https://www.pewtrusts.org/~media/assets/2015/01/hia_and_legislation_issue_brief.pdf Accessed February 1, 2019.

³ *Id.*

⁴ Centers for Disease Control and Prevention. Health Impact Assessment. <https://www.cdc.gov/healthypplaces/hia.htm> September 19, 2016. Accessed March 6, 2018.

⁵ Environmental Protection Agency. Health Impact Assessments. <https://www.epa.gov/healthresearch/health-impact-assessments>. July 19, 2017. Accessed March 6, 2018.



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representatives to examine the health of Maryland residents and to determine ways for “State and local government to collaborate to implement policies that will positively impact the health of residents of the state”⁶ The findings of the subsequent workgroup, of which the Network was a member, lay out a framework, which is being tested now, for how human health conscious planning could be implemented with the collaboration of public, private and government sectors.⁷

It is important to note that Health Impact Assessments provide essential information to decision-makers, because they deliver more complete information on the potential impact of a proposal on the entire population, particularly communities identified as vulnerable. And while these assessments benefit communities, they can also ensure sustainability of projects overall by evaluating both the short and long-term impacts of a project. At its core, HIAs are founded on the “values of democracy, equity, sustainable development, and the ethical use of evidence”.⁸ HIAs allow all stakeholder parties to participate in appraising the impact of an action. This collaborative effort can result in more positive and less combative outcomes for all involved.

Studies show that HIAs boost the participation of community members while helping to support the development of responsive policies.⁹ For these outcomes to be realized, it is essential that HIAs be included as part of the planning process as soon as is possible. Not only can decision-makers benefit from inclusive information gathering but the process supports the promotion of public health as a practice and improves the quality of life for residents who are not caught unawares by development projects where they live.¹⁰

Finally, this bill was conceived of by Maryland residents who are concerned about harm to the air, water, soil and how that could translate to the overall health of their communities. During the process of drafting the original legislation they sought out the advice of the Bill sponsor and Public Service Commission, and the Office of People’s Counsel to determine the most sensible way to navigate this process.

I believe that this bill reasonably addresses the human health concerns of those who will be affected most by the projects that the Public Service Commission presides over as a part of its mission to create standards to encourage the public trust and enforce the public interest. Similarly, I am confident that the use of a rapid HIA would enhance the processes of the PSC and should be welcomed as a measure of parity that relates to improved health, well-being, and safety for all Marylanders. As such I urge a favorable report on HB 109.

Thank you for your consideration.

Tamara Toles O'Laughlin
North America Director
350.org

⁶ 2017, Maryland General Assembly (SB340 p. 2 (b), Report required by State Government Article 5-112 (MSAR #5566)

⁷ See supplemental materials for The University of Maryland School of Public Health, Center for Health Equity Workgroup on Health in All Policies (SB340) report.

⁸ Centers for Disease Control and Prevention. Health Impact Assessment. <https://www.cdc.gov/healthyplaces/hia.htm> September 19, 2016. Accessed March 6, 2018.

⁹ Broeder LD, Uiters E, Have W, Wagemakers A, Schuit AJ. Community Participation in Health Impact Assessment: A scoping review of the literature. *Environmental Impact Assessment Review*. 2017; 66: 33-42.

¹⁰ Harris-Roxas B, O’Mullane M. Health Impact Assessment for Health Promotion, Education and Learning. *Global Health Promotion*. 2016; 24(2): 3-4.