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Report for the

***“Short-term Graining on Health Impact Assessment  
of Large Infrastructural Projects”***

Conducted at Golf Course Hotel in Kampala  
From 14 – 17 February 2023

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## Acknowledgement:

This short training course in Health Impact Assessment was jointly organized and sponsored by the Dean - Makerere University School of Public Health, through the Department of Health Policy & Planning, and the Research for Development Initiative' ([hia4sd.net](http://hia4sd.net)) of the Swiss Tropical and Public Health Institute. Our gratitude goes to them because without their financial support this training would not have materialized.

That apart, also special gratitude goes to Professor Freddie Ssengooba and Professor Winkler who organized this course, as well as Mr. Kaganda Paschal, Ms. Zuriah Namakula and Ms. Junia Landtwin who coordinated the preparatory activities and the writing of this training report.

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## 1. Background

Makerere University School of Public Health (MakSPH) with support from the Swiss Tropical and Public Health Institute organized a 4-day short course titled "**Health Impact Assessment (HIA) of Large Infrastructure Projects.**" The impacts of development initiatives on health are multi-dimensional and consist of both positive and negative effects. As observed by COP27 in Sharm El Sheik - Egypt, the conveners concluded that if the unwanted effects of development are left unmitigated, this poses a real threat to human and planetary health. To minimize negative impacts on health, WHO and UN recommend the use of Health Impact Assessments to generate evidence and engage members of the public affected by particular development initiatives to mitigate or minimize their potential negative effects. Globally, HIA has been identified as a critical competence that facilitates both government and national leaders in steering and addressing the health impacts that arise from development initiatives. As part of the initiatives (main-streamed by WHO, UN and advocates for climate change) for building local capacity and generating evidence for mitigating adverse effects of development, including climate change, Makerere University School of Public Health in conjunction with the Swiss Tropical Institute organized a short HIA program in Uganda.

### 1.1 Rationale for HIA training in Uganda

The HIA training program sought to contribute to the development of local capacity for the use, oversight, and regulation of health and environmental impacts at the national and regional levels. It covered a range of topics like scoping of health issues through rapid assessments of natural extraction projects, design of a health action plans in consultation with stakeholders; implementation of interventions and the monitoring cum evaluation of long-term health impacts of various development initiatives. As such, these activities were expected to promote the generation of evidence that informs and facilitates policy dialogue, policy change and strengthen application of impact assessment as a regulatory tool for improving the progress and agenda for attaining the Sustainable Development Goals.



The main **objectives** of this HIA course were two-fold, namely:

1. To train government officials and improve their appreciation of the practice and need for Health Impact Assessments in large infrastructural projects.
2. To build the capacity of MakSPH to generate a critical mass of HIA trainers and leaders for future sustainability of the practice.

## 2. Introduction

Makerere University School of Public Health in conjunction with the Swiss Tropical and Public Health institute recently introduced a health impact assessment (HIA) short training course. HIA is a useful tool for assessing how planned projects affect;- the health of given population(s), the distribution of project impact and permits identification of vulnerable populations that are more likely to be impacted by new projects and also provides insights into the distribution of health impacts within the affected populations. It also improves understanding of the health risks and benefits associated with given development(s).

Understanding, assessing and managing community health as well as the safety risks and impacts of large infrastructure projects on adjacent areas often poses unique challenges to decision makers. Large projects like mining, construction of large buildings, roads, bridges, water dams or railways not only strain the demand for health care, but also create additional risks that could be mitigated. Such risks could be evident in; deterioration of community health, high influx of workers, accelerated expansion of informal markets and increased stress on available health care services or at worst, fast transmission of infectious diseases that are often too costly to manage. It is in response to this, that the 'Research for Development Initiative' ([hia4sd.net](http://hia4sd.net)) introduced a short training program to facilitate the use of health impact assessment (HIA) in the licensing process of large infrastructure projects.

The objective of the course was to contribute to a solid understanding of the HIA approach, which remains fundamental in the promotion of HIA practice in Uganda. As such, participants learnt the concept of HIA and its systematic approach to managing and promoting community health and safety in project-affected communities. It was conducted in such an interactive manner that theory was blended with case studies from Uganda and surrounding countries like Tanzania.



***Opening remarks by Freddie Ssengoba***

### 3. TRAINING APPROACH

This training was largely interactive and it used demonstrative presentations or instructional lectures that were delivered by both Prof Freddie Ssengooba and Dr. Elizabeth Ekirapa from the Department of Health Policy, Planning and Management of Makerere University School of Public health, Prof Winkler and Ms. Landtwing from The Swiss Tropical and Public Health Institute.



***Professor Winkler making a demonstration***



***Dr. Elizabeth Ekirapa making contributions during one of the training sessions***



While the facilitators provided the blueprint and instructions of how to identify the need for HIA and conduct the evaluations, the practical application of the principals and concepts was largely reserved for the trainees. To facilitate instant appreciation of HIA concepts, all presentations were accompanied with interludes of practical demonstrations that relied on local case studies and practical trials of case-specific applications of various concepts which were done in small groups (composed of assorted professionals). Thus, irrespective of the trainee's backgrounds, they were all able to gain hands-on experience of being a consultant that can ably apply HIA concepts and design evaluation steps from either a field or office setting. This was in part facilitated by the sets of illustrations that were derived and led by professionals from various professional backgrounds that included; engineering, agriculture, health and medicine, political administration, education and sociology.



***Collage showing some of the training practicals guided by Prof Winkler & Ms. Junia Landtwing***

The training was concluded with stakeholder discussions that sought participant opinions on how to inculcate and improve the application and use of HIA evaluations in Uganda.

## 4. TRAINING OUTPUT

### 4.1 CUSTOMISED HIA TRAINING COURSE

While Uganda initially never had an HIA training program to address its HIA needs, currently a short HIA training program has been designed and adapted to suit the Ugandan context and address the local demand for such training. Hopefully, the same blue print and the inaugural training will be used to benchmark and streamline future HIA training programs in Uganda.

### 4.2 BENEFICIARIES OF THIS HEALTH IMPACT ASSESSMENT TRAINING



*Cross section some of the training participants*

This course imparted skills and competencies within the realm of; impact assessment, risk identification, regulation of risks, and identification of mitigation measures for these risks and

designing of regulatory and policy actions. Although some countries in Africa like Tanzania, Mozambique, Ghana and Burkina Faso had already benefited from similar trainings, in Uganda this training was relatively new. So in Uganda, this course initially benefitted key decision makers and participants from: Ministry of Energy and mineral development, Ministry of Works and Transport, Ministry of Health, Ministry of Finance and Economic Development, the policy Analysis Unit in the President’s Office and public agencies like UNRA, National Planning Authority and Makerere University School of Public Health.

The inaugural HIA training in Uganda lasted 4 days and took place from **13 - 17 February 2023** and was conducted at Golf Course Hotel. It was organized by a team of 4 people and it attracted over 28 participants from multiple sectors that included both private and public institutions. Below is a summary of the list of training participants by their professional backgrounds.

	Sectoral representaion	Number of trainees
i	Facilitators	4
ii	Doctors	6
iii	Engineers	6
iv	Epidemiologists/ Public Health scientists	5
v	Line Managers & Administrators	3
vi	Lecturers	2
vii	Social/ Public Policy Analysts	4
viii	Health Economists	2
ix	Environmental Engineering Consultants	5
	TOTAL	32



## 5. SCOPE OF THE TRAINING

Given the nouvelle nature of this inaugural HIA training program in Uganda, efforts were made to provide trainees with materials that introduced them to variations in the choice of HIAs i.e while participants were reminded that they need to assess the context and choose between conducting a **Desktop HIA**, **Rapid HIAs**, **Limited In-country HIA** or **Comprehensive HIAs**, they were also introduced to several concepts and steps involved in the HIA process.

The concepts included how to: **identify the social determinants** that could influence the need for HIAs, do **HIA screening** in order to estimate the magnitude of health impact of a given development, how to do **HIA scoping** in order to generate credible and acceptable TOR, to do **risk assessment** and identification of vulnerable populations that could greatly benefit from HIA evaluations, **the 6 steps of HIA reporting**, how to implement and do monitoring for an HIA, **designing of HIA evaluation plans** to mention but a few.

All these activities were aided with examples and illustrations of work done in other countries particularly under the HIA4SD project. The relevance of these case studies formed the basis for the trainees' discussions that culminated into recommendations of how similar cases could be handled or adapted to suit the Ugandan setting. Details of the HIA process activities that were handled are provided in Annex 1.

### 5.1 PRIORITIES OF THE INAUGURAL HIA TRAINING

During the design of this training the main focus was placed on raising awareness and building capacity of individuals, institutions and companies that accidentally perform HIA on a day to day basis. As such, the main focus of this training was placed on identifying the right personnel in critical need of honing their HIA basic skills and improving their knowledge about the systematic processes necessary for the conduct of a high quality and effective HIA evaluation.

Hence this training initially sought to

- i. To train government officials and improve their appreciation of the practice and need for Health Impact Assessments in large infrastructural projects.
- ii. To build the capacity of MakSPH to be able to generate a critical mass of HIA trainers and leaders for future sustainability of the practice.

## 6.0 STAKEHOLDER DISCUSSIONS AND OPINIONS

During the last session that involved solicitation and synergizing of stakeholder opinions about how to promote HIA in Uganda, members present noted that there was need to;

- Conduct more trainings, but after more comprehensive stakeholder mobilization, so as to benefit from the support of more critical stakeholders.
- There was need to institutionalize HIA. To realize this, members observed the need to design an institutionalization plan that would guide the HIA process.
- Advocate for integrated assessments so that HIA compliments other EIA and Social Impact assessments about given development initiatives.
- Coalesce with leadership of other assessments.
- Share the inaugural HIA training report with all stakeholders.
- Strive and ensure that HIA is catered for in existing national assessment guidelines through advocacy for addendums or revisions of essential guidelines.
- Ensure that the HIA training is more practical i.e add more field trips or excursions.
- Enhance and identify new and more robust avenues of advocating for the conduct of HIA and demonstration of how it can be done. This could enhance the visibility of both its importance and feasibility to the general public.
- Organize a meeting for Uganda Impact assessors' association, environmental practitioners, Ministry of Water and Environmental Protection and NEMA to identify and spearhead a review of the necessary guiding documents. Also ensure that those with the mandate are consulted and take the lead to avoid conflicts.
- Make a courtesy call to the Commissioner for occupational safety for him to clarify on the current practices and plan appropriately on who to engage next and what activities to include as part of the next steps.
- Do a landscape analysis to generate more credible evidence to support the need to invest in formalizing the conduct of HIA.
- Build local capacity and a local HIA network with a platform to enhance collaboration and sharing of ideas.

## 6.1 CHALLENGES ENCOUNTERED

- i. During the preparation of this training, the organizers had limited resources and practically lacked corporate support to facilitate both the workshop as well as the advocacy activities for this training. Hence, they relied heavily on volunteers. This limited the scope of activities in the program.
- ii. Given that most participants were corporate executives, it was not easy to find adequate time for the course and balance it with the work demands of the participants.

## 6.2 RECOMMENDATIONS ON THE WAY FORWARD

**Short term measures:** In order to realize the dream of promoting HIA, the following activities were suggested as the next immediate steps. In the short term, members agreed to;

- Produce and circulate a report about this inaugural HIA training program.
- Visit and orient pre – identified strategic offices
- Conduct more short trainings with more targeted groups
- Undertake more concerted resource mobilization activities.
- Agree on necessary institutional arrangements
- Create a critical mass of trained HIA, EIS and SIA analysts.
- Form an HIA Task force to oversee the formation of the introduction and professionalization of HIA.
- Hold a strategy meeting with key stakeholders from government, private sector, professionals.
- Map the locations and activities of the main institutions performing HIA, EIA and SIA evaluations. Explore the potential roles or how to engage or involve the following stakeholders in promoting the HIA agenda.

**In the medium & long term, the primary steps / tasks could include but may not be limited to:**

- Considering and deliberating on the need to revise the national Public Health Act.

- Exploring the possibility and feasibility of integrating the EIA, HIA and SIA regulations and practices. Explore engaging professionals and legal experts to help in drafting the legal basis for Health Impact Analysis cum evaluation.

**ANNEX 1: POTENTIAL STAKEHOLDERS THAT MEMBERS RECOMMENDED TO BE CONSULTED ABOUT MAIN STREAMING THE CONDUCT, PROMOTION AND TRAINING OF HIA.**

1	Development partners like European Union, USAID, JICA, Etc.
2	Parliament of the Republic of Uganda
3	Local Governments and Urban Authorities
4	Ministry of Health,
5	Ministry of Water and Environment
6	National Environment Management Authority
7	Ministry of Energy and Mineral development
8	Ministry of Trade, Commerce and Industry
9	Private Sector Foundation
10	Uganda Investment Authority
11	Uganda National Association of Building and Civil engineering contractors
12	The National association of Building and engineering contractors
13	Ministry of Works and Transport
14	Ministry of Gender, Labor and Social Development
15	Office of the Prime Minister
16	State house of Uganda

## ANNEX 2: Process activities covered in the HIA training

Time	TRAINING PROGRAM FOLLOWED
<b>Day 1</b>	
09:00 – 09:15	Opening remarks
09:15 – 09:30	Course syllabus and introductions
09:30 – 10:15	Introduction to HIA
10:15 – 10:30	Practical 1: Health determinants and health outcomes
10:30 – 10:45	<i>Coffee break</i>
10:45 – 11:45	Health in the context of large infrastructure projects
11:45 – 12:30	The HIA process
12:30 – 13:30	<i>Lunch break</i>
13:30 – 14:00	Introduction to case studies
14:00 – 14:30	HIA step-by-step: screening
14:30 – 15:00	Practical 2: screening and scale of HIA
15:00 – 15:15	<i>Coffee break</i>
15:15 – 15:45	Presentation practical 2
15:45 – 16:30	Practical 3 (quiz) and closure day 1
<b>Day 2</b>	
9:00 – 9:30	Recap day 1
9:30 – 10:30	HIA step-by-step: scoping
10:30 – 10:45	<i>Coffee break</i>
10:45 – 12:00	Practical 4: affected communities and vulnerable groups
12:00 – 12:30	Presentation practical 4
12:30 – 13:30	<i>Lunch break</i>
13:30 – 14:15	HIA step-by-step: Baseline definition
14:15 – 15:00	HIA step-by-step: Impact assessment and mitigation
15:00 – 15:15	<i>Coffee break</i>
15:00 – 16:30	Practical 5: risk assessment and mitigation
<b>Day 3</b>	
9:00 – 9:15	Recap day 2
9:15 – 10:30	Presentation practical 5
10:30 – 10:45	<i>Coffee break</i>
10:45 – 11:30	HIA step-by-step: monitoring and evaluation
11:30 – 12:30	Practical 6: monitoring plan
12:30 – 13:30	<i>Lunch break</i>
13:30 – 16:00	Promoting of HIA teaching and training in Uganda
16:00	<i>Course closure and certification</i>