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June 15, 2018

Honourable George Heyman  
Minister of Environment and Climate Change Strategy  
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Dear Minister Heyman:

**Re: Environmental Assessment Revitalization**

Thank you for the opportunity to contribute to the Province's effort to revitalize the Environmental Assessment (EA) process. Medical Health Officers (appointed under the BC *Public Health Act*) working in the regional health authorities, and Medical Officers working in First Nations Health Authority have roles and responsibilities with respect to promoting and protecting the health of the communities they serve. We advise local governments and First Nations communities on issues that may affect the health of their populations. Collectively, we have extensive experience in assessing and responding to environmental health hazards and threats. We are regularly called upon by various levels of government as well as communities to assist in risk assessment and risk communication. Together, we and other public health professionals in our health authorities have had extensive experience working with the Environmental Assessment Office (EAO) on a variety of project assessments throughout the province. Based on our experiences, we offer the following recommendations:

**1: Ensure that the Revitalized Environmental Assessment Process is holistic, integrated, and comprehensive**

The current *Environmental Assessment Act* requires an assessment of the environmental, economic, social, heritage and health effects of a reviewable project (the 5 pillars). However, as presently practiced, the EA process tends to be heavily weighted towards assessing impacts to the physical environment, with less rigor, scope, and sensitivity to health and social impacts. A definition of health consistent with our understanding of the determinants of health is lacking. Similarly sustainable development is implied, but a lack of definition and framework limits the assessment process from fulfilling its intended purpose. We therefore recommend:

- Rename the *Environmental Assessment Act* to *Impact Assessment Act* (or similar) to underscore the need for Government to take a holistic, integrated and comprehensive approach to major project assessments;

- Include in legislation and policy a clear definition of health that is reflective of the World Health Organization’s definition of health, our current knowledge of the determinants of health and health equity, and inclusive of the philosophy of health and wellness as defined by BC Indigenous peoples and communities (see [First Nations Perspective on Health and Wellness](#));
- Include in policy and guidance clear expectations and approaches to assessing health impacts consistent with the definition of health in a revised legislative framework;
- Include in the legislation and policy a clear definition of sustainable development that gives considerations to net benefit for present **AND** future generations. Furthermore, incorporating the [United Nations Sustainable Development Goals](#) (SDGs) and standards such as the World Bank *IFC Performance Standards on Environmental and Social Sustainability* in the assessment framework will help ensure that the revitalized EA process is holistic, integrated and comprehensive;
- Include in policy and legislation the assessment of both positive and negative impacts, with the overall objective of minimizing harms and maximizing positive benefits across the 5 pillars. Recent work in this area, including a [report](#) summarizing Northern BC First Nation communities engagement on health impacts from resource development and a [report](#) developed by provincial health agencies on the social determinants of health impacts may assist with this recommendation.
- Implement regional and strategic assessments considerate of cumulative impacts within communities or from a particular industry or sector across space and time in parallel to project-level assessments;
- Strengthen the EA process as a system that effectively acts throughout the life of the project. Once approval has been granted it should continue to confirm assumptions and ensure conditions, appropriate management plans and commitments are not only being followed but continue to align with leading best practices;
- Improve the sensitivity of criteria under the *Reviewable Project Regulation* to impacts outside the environmental pillar; and
- Include in policy and guidance, the need to assess and manage for socio-economic and health-related climate change impacts from reviewable projects.

**2: Increase the capacity, expertise, professional qualifications and standards to support a more holistic, integrated and comprehensive assessment process.**

A major reason underlying the limited scope often used in assessing health impacts, as currently practiced in the EA process, is the predominance of experts trained in the physical sciences conducting and leading the assessments, both at the proponent and regulatory level. This expertise is then often used to determine social and health impacts, which may be outside of the scope of their training. To be holistic, the EA framework will need to recognize the value that social and health professionals bring to the process. Another limitation is the capacity for local community participation. Local communities are usually the most knowledgeable about potential social and health impacts, however often have limited resources to review applications. The addition of socio-economic and health pillars may further strain this capacity. We appreciate and support the proposal to increase funding to Indigenous communities to ensure they are able to fully participate in EAs. Additional support to non-Indigenous communities is also recommended to ensure meaningful community engagement. A further limitation in the current practice is the lack of sufficient expertise and capacity within governments and allied agencies (especially social and health agencies) to critically review the work of the qualified professionals and participate in the EA process. We therefore recommend:

- Establish clear professional qualifications, competencies and standards for social and health impact assessors;
- Establish clear expectations with respect to inclusion of Indigenous knowledge and expertise in the assessment process
- Provide funding to local communities to meaningfully participate in the EA process for all 5 pillars;
- Provide funding to First Nations and local communities to establish baseline health, socio-economic and environmental data, and to enhance community-specific surveillance systems to enable better assessment of health impacts over time;
- Enhance staffing, expertise and resources within government and health authorities to be able to critically review the work of qualified professionals, participate in the EA process meaningfully and develop guidance and policy to support the EA process.
- Support the development of leading practice guidance and policy for community-level engagement and health and social impact assessment methodologies.

### **3: Increase the neutrality and transparency of the process to increase public confidence.**

The revitalized EA process that we recommend will require an “all of government” approach. It may therefore be no longer appropriate for the EAO to be located within the Ministry of Environment and Climate Change Strategy, even though the EAO is described as a “significant independent or semi-independent office” in the Ministry’s annual service plan report and is stated to be neutrally administering the EA process. It has also been our collective experience that the EAO has had very uneven success in recruiting participation in the EA process from ministries outside of the natural resources sector (for example, education and social services). The public and stakeholders may also question the neutrality of the process when the project proponent is another ministry and/or the project is one that the Province has announced to be priority. A solid best practice approach to community and stakeholder engagement is also required. Even when an assessment is technically well-done and the conclusions technically reasonable, public confidence in the assessment may be lacking due to inadequate engagement and transparency. Who funds, who directs, and who conducts the assessment are important factors influencing credibility and public trust. We therefore recommend:

- Increase the independence of the EAO visibly and materially within the government through legislation and policy changes;
- Strengthen the cross-government decision-making framework for impact assessments to ensure referral to and participation of ministries with mandates in health, heritage, and economic and social development;
- Identify alternate funding models to ensure a clear separation of the assessment funding role (usually the proponent) from the assessment direction and coordination roles that include recruiting and hiring consultants for conducting assessment;
- Increase the transparency of the Minister’s decision (section 17(3)) by prescribing into legislation the expected format and content (including the Minister’s reasons) of the decision statement;
- Review the public and stakeholder engagement process and time frame to maximize meaningful community and stakeholder engagement (and agreement) on the nature, siting and characteristics of a project; and
- As part of the Provincial Government’s commitment to implement the *United Nations Declaration on the Rights of Indigenous Peoples* (UNDRIP), incorporate UNDRIP, inclusive of the principles of Free, Prior, Informed Consent (FPIC), in the processes for determining whether a project is

reviewable, the scope of the review and assessment, as well as the assessment decision. Relevant international guidelines and standards are available.

We make these recommendations with the view that they will support the Province's goal of protecting the environment, supporting sustainable development, advancing reconciliation, and enhancing public confidence and meaningful participation in the EA process. Our staffs are pleased to provide further information to clarify and support each of the aforementioned recommendations. Further dialogue and engagement can be coordinated through Drs. Raina Fumerton (Northern Health Authority) and James Lu (Vancouver Coastal Health Authority).

Respectfully,



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