



**REGIONAL PLAN ON  
ENVIRONMENTAL AND HEALTH  
IMPACT ASSESSMENT (EHIA)  
2000-2010**

**Preliminary Version**

**Washington, D.C., September 1999**

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# REGIONAL PLAN ON ENVIRONMENTAL AND HEALTH IMPACT ASSESSMENT (EHIA) 2000-2010

## 1. INTRODUCTION

One of the most notable causes of environmental degradation in the Region of the Americas has been the lack of foresight with respect to the problems and consequences associated with certain development projects such as highways, hydroelectric dams, geothermal installations, reservoirs, irrigation projects, industrial plants, port and airport construction, the introduction of new crops, fishing and mining projects, etc. With the passage of time, some of these projects have produced adverse impacts that have compromised the health of local residents. In several instances, these facilities have created new health problems, while increasing the incidence of preexisting diseases in others.

Beginning with the United States in 1969, and now in more than 100 countries, the Environmental Impact Assessment (EIA) has been the primary prevention tool for environmental management, seeking to meet a specific objective of environmental policy: to reconcile economic growth strategies for public and private sector investments with adequate environmental protection measures.

The EIA was developed as a methodological instrument for application in the planning stages of development projects. In this context, information on probable impacts, possible alternatives, and the mitigation measures are taken into account during the decision-making phase of proposed activities, such as national development plans, regional programs, sectoral programs, and specific projects (new development projects, expansion of existing projects, and new phases of projects already under way).

In view of the mandates issued by the Governing Bodies of the Pan American Health Organization (PAHO), the current situation, which involves an endless number of agents acting with limited and frequently isolated objectives, inadequate consideration of health in EIA, and the lack of a proactive role by the health sector in EIA processes at both the national and international levels, PAHO has taken steps to fill the existing vacuum and promote the adoption of an integrated approach through the Regional Plan on Environmental and Health Impact Assessment (EHIA).

The EHIA methodology is designed to help complete and strengthen the EIA in aspects of public health and safety related to accidents. Moreover, the EHIA is a component of the EIA.

## 2. BACKGROUND

During the United Nations Conference on Environment and Development (UNCED), held in Rio de Janeiro in June 1992, major international agreements and commitments were signed, one of which was the Rio Declaration on Environment and Development.

Cited here are three important principles of the Rio Declaration:

Principle 1 states:

*“Human beings are at the center of concerns for sustainable development. They are entitled to a healthy and productive life in harmony with nature.”*

Principle 10 states:

*“Environmental issues are best handled with the participation of all concerned citizens...States shall facilitate and encourage public awareness and participation by making information widely available....”.*

Principle 17 states:

*“Environmental impact assessment, as a national instrument, shall be undertaken for proposed activities that are likely to have a significant adverse impact on the environment and are subject to a decision of a competent national authority.”*

Upon analyzing the progress made since the UNCED, the United Nations Commission on Sustainable Development (UNCDS), at its fifth session (April 1997), expressly indicated that included among the unmet expectations was the lack of a component for incorporating health impacts within the environmental impact assessment of development projects.

This is due, among other things, to the following:

- The donor agencies that have made loans and grants conditional on EIA have done relatively little to broaden the health dimension in their assessment methodologies;
- The desk officers are geared to conservation and global issues, and their health counterparts have not moved beyond the delivery of health-care services;
- The lack of analytical capacity within most ministries of health handicaps their participation as full partners in the intersectoral negotiations that must take place in any serious EIA exercise.

The World Health Assembly, the highest body of the World Health Organization (WHO), has repeatedly manifested concern in this regard through decisions issued over the past 15 years:

- In 1982, it recognized that many development projects pose major health hazards and threats to the environment. On the other hand, the planning and implementation phases of development projects tend to lack sufficient resources for assessing and eliminating such risks. The Assembly further recognized that in the past, the health of populations and the environment deteriorated as a consequence of development projects, especially those related to water resources, mining, and transportation. Based on these facts, the Assembly urged the Member States, and national and international organizations, as well as financing entities, when planning and executing development projects:
  - To provide a detailed analysis of the potential public health and environmental risks of proposed development projects or projects already under way.
  - Insofar as possible, to include adequate measures in the planning and implementation phases of projects to prevent risks to health and the environment.
  - To allocate resources for the necessary preventive measures in the financing plans of development projects.
- Furthermore, the World Health Assembly declared that WHO is fully committed to working with Member States, national and international agencies, and financing entities to implement the

necessary preventive measures in development projects and thus minimize health and environmental risks.

- In 1986, the World Health Assembly requested that the Director-General of WHO develop and strengthen activities to help countries to formulate, implement, and evaluate intersectoral actions and establish intersectoral mechanisms to ensure that no development initiative entails adverse health impacts.
- In 1992, the World Health Assembly urged its Member States to analyze health impacts associated with current and future development projects, and to apply the requisite protective measures to safeguard, promote, and improve the health of affected populations.

### **3. CURRENT SITUATION**

In most countries of the Region of the Americas, current legislation recognizes the need to apply EIA processes to relevant investment proposals. Moreover, health issues are implicit in much of this legislation.

However, there are limitations to implementing such legislation, especially the lack of health impact assessment in the evaluation of different projects and the lack of a proactive approach by the health sector to keep this issue at the forefront.

With respect to the use of this instrument, an analysis of the current situation in the countries of the Region has identified certain problems that hinder the adequate and timely application of the EHIA.

The main problems detected are the following:

- 1) In virtually all the countries, the existing environmental legislation, regulations, and policies do not adequately address the health dimension with respect to the evaluation of proposed activities;
- 2) In the majority of the countries, the institutional framework for the approval of plans, programs, and projects lacks a clear vision that would permit the incorporation of health issues into such activities;
- 3) Those responsible for the preparation and evaluation of plans, programs, and investment proposals are either unaware of or lack the requisite methods and/or instruments needed to incorporate human health analysis in these activities;
- 4) Most countries lack the trained technicians and professionals needed to participate in the preparation and evaluation of proposed activities, especially with regard to analyzing their health impacts.
- 5) The lack of coordination and interaction among the public health, environmental, and economic sectors results in an approach to EHIA that is more reactive than preventative;
- 6) Significant groups of the population of the Region and nongovernmental organizations (NGOs) are unaware of existing opportunities and the need for adequate and timely information to participate actively and consciously in decision-making on proposed activities.

Moreover, numerous environmental conflicts have occurred between countries, and in border areas, resulting from incompatible interests or different perceptions of the risks associated with particular

projects. Accordingly, three types of actors can be distinguished in such conflicts: the “generators” or the proponents of a project; the “regulators” or public authorities who have the power to authorize the implementation of a project; and the “receptors” or the population affected by a project.

#### **4. GUIDING PRINCIPLES**

The guiding principles of the Regional Plan on EHIA are:

##### **1) Harmonization**

Countries and international organizations must adopt similar instruments to address the health issues for both the preparation and evaluation of proposed activities. The countries, as well as the international, regional, and bilateral agencies providing technical and financial cooperation, must have compatible instruments.

##### **2) Coherence**

Efforts by the various agents and actors, aimed at incorporating health issues into the decision-making of planned activities, must be oriented toward the objectives established in the Regional Plan on EHIA.

##### **3) Effectiveness**

The inclusion of health issues in the preparation and evaluation of proposed activities must be timely in order to guide the decision-making process. The EHIA is an environmental management tool that uses scientific information and up-to-date methodologies for decision-making.

##### **4) Equity**

Health impact analysis on populations affected by proposed activities must involve the participation of the parties directly involved and the receptor population, as well as populations that are indirectly affected and any other groups currently outside the decision-making process.

##### **5) Comprehensiveness**

In the preparation and evaluation of planned activities, a holistic approach must be followed to explicitly incorporate the health issues of the affected populations. The EHIA is based on WHO’s broad definition of health: “health is a state of complete physical, mental, and social well-being, and not merely the absence of disease.”

6) **Participation**

The conscious, active participation of the population is required in decision-making processes involving proposed activities. A well-informed public and well-informed institutions play a key role in advancing the cause of public and environmental health.

6. **Sustainability**

The capacity to incorporate health in the EIA that the Plan generates must have a framework that ensures the sustainability of the mechanisms generated.

5. **PURPOSE AND GENERAL OBJECTIVE OF THE PLAN**

The Regional Plan on EHIA is to be implemented over a 10-year target period (2000-2010). Its purpose is:

*To strengthen the capacity of the countries, and in particular the health sector, to exercise leadership and provide assistance in the management of the health issues to be included in plans, programs, and projects, thus ensuring sustainable human development.*

The general objective of the Regional Plan on EHIA is:

*To ensure that all countries of the Region of the Americas have an operational framework in place regarding the use of the Environmental and Health Impact Assessment.*

6. **PROGRAMMATIC AREAS**

The Regional Plan on EHIA consists of five closely related programmatic areas:

1. Policies, legislation, and regulations;
2. Institutional framework;
3. Methods and support instruments;
4. Human resources development;
5. Public awareness and participation.

Each programmatic area includes a specific objective, expected results, and basic activities designed to achieve the desired results (see the attached matrix).

7. **KEY ACTORS AND PARTNERS**

The countries constitute the key actors in the execution of the Plan of Action, especially the institutions of the health and environment sectors.

International, regional, and bilateral agencies that provide technical and financial cooperation, such as the agencies of the United Nations system, are recognized as key partners with important roles in supporting the various activities.

Also, envisaged is the participation of Collaborating Centers specializing in the field covered by the Plan.

Moreover, efforts will be made throughout the process to seek public, private, and financial sector commitments to adequately support implementation of the Regional Plan and to secure the active and responsible participation of civil society and NGOs.

## **8. STRATEGIES**

The success of the Regional Plan on EHIA depends on the leadership role and initiatives assumed by governments, international organizations, and other actors, for which the following strategies will be pursued:

- Promote partnerships and coordination among international organizations, United Nations agencies, and other organizations involved in the execution of the Plan;
- Incorporate and ensure the participation of civil society (private enterprise, organized groups, etc.) in EHIA processes;
- Orient the plans of action at Collaborating Centers to strengthen programmatic areas of EHIA;
- Incorporate other regional and subregional technical and financial cooperation institutions into the execution of the Plan;
- Facilitate horizontal cooperation among countries;
- Create an ad hoc working group consisting of representatives from technical and financial cooperation agencies, Collaborating Centers, and other special invitees in order to follow up the Plan.

## **9. IMPLEMENTATION**

Preparation of the Plan has involved the participation of groups of experts and Collaborating Centers, as well as consultation with all the countries of the Region. Moreover, it has benefited from the conclusions and recommendations of national and international forums.

The Plan emphasizes the need for national leadership and the important role played by international, regional, and subregional agencies as well as other institutions, in the application of a common perspective, required to synchronize cooperation activities and optimize available resources on behalf of the countries. Additionally, the cooperation and participation of communities and private enterprise is a must, since their actions are vital for ensuring that development projects foster public health, safety, and well-being .

The Plan is envisaged as a frame of reference for countries that will enable them to prepare plans, policies, and programs that improve decisions associated with development projects. Moreover, the Plan is crucial for promoting and orienting international and horizontal cooperation among countries, agencies, and institutions (national and international), thus optimizing available resources.

In view of the changing situation in the countries and the Region, the Plan was designed as a flexible and dynamic instrument, capable of adapting to new situations and trends.

## **PAHO Role and Activities**

PAHO technical cooperation under the Regional Plan on EHIA is based on the principles of Pan Americanism and equity. PAHO responds to the mandates issued by its Governing Bodies and, more specifically, to the strategic and programmatic orientations (SPO) on environmental protection and development. Accordingly, it complies with the recommendations of WHO, UNCED, the Summit of the Americas, and UNCDS.

As resources permit, PAHO will continue to collaborate with countries to strengthen national capacity with respect the Regional Plan on EHIA, with particular emphasis on implementation of the national measures provided for under the Plan. In this context, PAHO collaboration with countries shall:

- Promote the mobilization of human, financial, and material resources;
- Promote and collaborate in the strengthening institutional networks in technical/scientific and policy areas;
- Promote and collaborate in the planning and programming of activities at the national level;
- Promote the participation and collaboration of international organizations and other external actors in EHIA activities;
- Emphasize horizontal cooperation among countries from a regional and subregional perspective;
- Promote the implementation of public information systems on health in development projects undertaken in the countries;
- Promote and facilitate the participation of society in environmental activities and disseminate information on the Primary Environmental Care Strategy (PEC) and promote its implementation.

## **Initiatives and Leadership of National Governments**

At the country level, the success of the Plan depends on the leadership role and initiatives assumed by governments with respect to the following:

- Ability to carry out synchronized sectoral, intersectoral and interinstitutional activities aimed at a specific purpose, in order to improve the EIA health dimension;
- Ability to identify areas that would most benefit from international cooperation;

Among the specific actions recommended for national governments are:

- Establish intersectoral coordination among ministries, the private sector, communities, nongovernmental organizations, local governments, international agencies, and other actors;

- Develop and implement effective national policies and laws, and adopt national standards for the inclusion of health issues in decision-making on development projects;
- Foster development of society's capacity to determine the relationship between investment proposals and health, developing the capacity of local authorities and promoting community participation.

### **Areas of Action for International Organizations and Other Actors**

At the global level, several actors are involved in EIA, either directly or indirectly. The number will vary with the geographical region, the level of industrialization, the nature of the problem, and other factors. The aim of the Regional Plan is to gradually prepare a list of the actors in the Region of the Americas, particularly those that are being incorporated into the Plan.

While it is hoped that agencies will participate in all aspects of the Plan, the following tentative list of institutions and programmatic areas for activities has been proposed, in view of their characteristics and in order to facilitate a specific orientation within the Plan:

#### **Inter-American Development Bank (IDB)**

Technical and financial cooperation in programmatic areas 3 and 4.

#### **World Bank (WB)**

Technical and financial cooperation in programmatic areas 2, 3, and 4.

#### **Economic Commission for Latin America and the Caribbean (ECLAC/ILPES)**

Technical cooperation in programmatic areas 1, 2, and 4.

#### **United Nations Development Program (UNDP)**

Technical and financial cooperation in programmatic areas 2 and 5.

#### **United Nations Environment Program (UNEP/ROLAC)**

Technical cooperation in programmatic areas 1, 2, and 4.

#### **Organization of American States (OAS)**

Technical cooperation in programmatic areas 1, 2, and 5.

**Caribbean Community/Caribbean Environmental Health Institute (CARICOM/CEHI)**

Technical cooperation in programmatic areas 1, 2, 4, and 5.

General support for the Plan is expected from PAHO/WHO Collaborating Centers, particularly from the following:

**University Hospital Center of Quebec (CHUQ)**

Technical cooperation in programmatic areas 3, 4, and 5.

**University of Oklahoma (Environmental and Ground Water Institute and School of Civil Engineering and Environmental Science)**

Technical cooperation in programmatic areas 3 and 4.

**10. MATRIX OF THE REGIONAL PLAN ON EHIA**

**PROGRAMMATIC AREAS, SPECIFIC OBJECTIVES, EXPECTED RESULTS, AND BASIC ACTIVITIES**

**PROGRAMMATIC AREA 1: POLICIES, LEGISLATION, AND REGULATIONS**

**Specific Objective**

To ensure that governments incorporate human health issues in environmental impact assessments of proposed activities (plans, programs, and projects), legislation, regulations, and pertinent policies.

<b>EXPECTED RESULTS</b>	<b>BASIC ACTIVITIES</b>
1. The environmental impact on human health will be explicitly addressed in the laws on environmental impact assessments of proposed activities approved by the countries' legislative and executive branches. Term: 2009	1.1. Analyze status of existing legislation in the countries of the Region on the inclusion and implementation of human health issues in environmental impact assessments of proposed activities (2001-2002).
	1.2. Prepare guidelines to assist countries in the preparation of pertinent legislation for the adequate inclusion of human health issues in environmental impact assessments of proposed activities (2003-2004).
	1.3 Evaluate implementation of guidelines and legislation introduced in the countries on the inclusion and implementation of human health issues in environmental impact assessments of proposed activities (2005-2008).
2. Human health issues will be explicitly addressed in regulations governing environmental impact assessments of public and private sector activities. Term: 2010	2.1. Analyze the status of existing regulations in the countries of the Region governing the inclusion and implementation of human health issues in environmental impact assessments of proposed public and private sector activities (2001-2003).
	2.2. Prepare guidelines to assist countries in the preparation of pertinent regulations for the adequate inclusion of human health issues in environmental impact assessments of proposed public and private sector activities (2003-2005).
	2.3 Evaluate implementation of guidelines and regulations introduced in the countries on the inclusion and implementation of human health issues in environmental impact assessments of proposed public and private sector activities (2007-2009).
3. Human health issues will be explicitly addressed in the respective national development plans and economic policies. Term: 2010	3.1. Analyze the status of existing policies of the countries of the Region on the inclusion and implementation of human health issues in environmental impact assessments of national development plans and economic policies (2002-2003).
	3.2. Prepare guidelines to assist countries in the preparation of pertinent policies for the adequate inclusion of human health issues in environmental impact assessments of national development plans and economic policies (2005-2006).
	3.3 Evaluate implementation of guidelines and policies introduced in the countries on the inclusion and implementation of human health issues in environmental impact assessments of national development plans and economic policies (2008-2010).

**PROGRAMMATIC AREA 2: INSTITUTIONAL FRAMEWORK**

**Specific objective**

To ensure that national, regional, and local health sector agencies have an effective and efficient institutional framework to achieve the inclusion of human health issues in environmental impact assessments of proposed activities.

<b>EXPECTED RESULTS</b>	<b>BASIC ACTIVITIES</b>
1. National and sectoral institutions responsible for drawing up national plans and sectoral development programs will specifically address human health issues in environmental impact assessments of their activities. Term: 2008	1.1. Analyze the status of the countries' national and sectoral institutions regarding the inclusion of human health issues in environmental impact assessments of sectoral development plans and programs (2002-2003).
	1.2. Strengthen capacity of the countries' national and sectoral institutions to include, in a timely manner, human health issues in the environmental impact assessments of sectoral development plans and programs (2004-2005).
	1.3 Review and evaluate the current capacity of the countries' national and sectoral institutions regarding the inclusion of human health issues in environmental impact assessments of sectoral development plans and programs (2008-2010).
2. Regional institutions responsible for preparing regional development proposals will specifically address human health issues in the environmental impact assessments of their activities. Term: 2010	2.1. Analyze the status of the regional institutions of the countries regarding the inclusion of human health issues in environmental impact assessments of regional development programs (2003-2004).
	2.2. Strengthen the capacity of regional institutions responsible for the environmental impact assessments of regional programs so that they address human health issues in these activities in a timely manner (2005-2006).
	2.3 Review and evaluate the current capacity of the countries' regional institutions regarding the inclusion of human health issues in environmental impact assessments of regional development programs (2009-2010).
3. Local institutions responsible for preparing specific project proposals will address human health issues in the environmental impact assessments for these projects. Term: 2010	3.1. Analyze the status of countries' local institutions regarding the inclusion of human health issues in environmental impact assessments of development projects (2003-2005).
	3.2. Strengthen the capacity of countries' local institutions responsible for environmental impact assessments of projects so as to address human health issues in these activities in a timely manner (2005-2007).
	3.3 Review and evaluate the current capacity of the countries' institutions regarding the inclusion of human health issues in environmental impact assessments of development projects (2010).

### **PROGRAMMATIC AREA 3: METHODS AND SUPPORT INSTRUMENTS**

#### **Specific objective**

To ensure that countries have efficient and effective methodologies available, in order to include human health issues in the environmental impact assessments of proposed activities.

<b>EXPECTED RESULTS</b>	<b>BASIC ACTIVITIES</b>
1. Countries and international organizations will have efficient and effective methodologies in place to include human health issues in the environmental impact assessments of development plans. Term: 2006	1.1. Compile and evaluate information on existing methodologies to analyze human health issues in environmental impact assessments of development plans (2000-2001).
	1.2. Prepare and disseminate documents on experiences in the use of different methodologies, where human health issues are specifically addressed in environmental impact assessments of development plans (2001-2004).
	1.3. Analyze use and adjust methodological documents prepared and widely disseminated in the country, in order to analyze human health issues in environmental impact assessments of development plans (2003-2005).
2. Countries and international organizations will have efficient and effective methodologies in place to include human health issues in environmental impact assessments of sectoral development programs. Term: 2005	2.1. Compile and evaluate information on existing methodologies in order to analyze human health issues in environmental impact assessments of sectoral development programs (2000-2001).
	2.2. Prepare and disseminate documents on the experiences in the use of different methodologies, where human health issues are specifically addressed in environmental impact assessments of sectoral development programs (2001-2003).
	2.3. Analyze the use and adjust methodological documents prepared and widely disseminated in the country, in order to analyze human health issues in environmental impact assessments of sectoral development programs (2003-2004).
3. Countries and international organizations will have efficient and effective methodologies in place to include human health issues within environmental impact assessments of regional development programs. Term: 2005	3.1. Compile and evaluate information on existing methodologies in order to analyze the human health impacts in environmental impact assessments of regional development programs (2000-2001).
	3.2. Prepare and disseminate documents on experiences in the use of different methodologies, where the aspects of human health are analyzed explicitly in environmental impact assessments of regional development programs (2001-2003).
	3.3. Analyze the use and adjust methodological documents prepared and widely disseminated in the country, in order to analyze human health issues in environmental impact assessments of regional development programs (2003-2004).
4. Institutions, companies (public and private) and consultants responsible for the preparation and environmental assessment of projects will have efficient and effective methodologies and instruments to include human health issues in their activities. Term: 2004	4.1. Compile and evaluate information on existing methodologies to analyze human health issues in environmental impact assessments of projects (2000-2001).
	4.2. Prepare and disseminate documents on experiences in the use of different methodologies, where human health issues are specifically addressed in environmental impact assessments of projects (2001-2002).
	4.3. Analyze the use and adjust methodological documents prepared and widely disseminated in the country, in order to analyze human health issues in environmental impact assessments of projects (2002-2003).

## PROGRAMMATIC AREA 4: HUMAN RESOURCES DEVELOPMENT

### Specific objective

To ensure that institutions and companies (public and private) have the necessary human resources, both informed and adequately prepared, to facilitate the inclusion of human health impact analysis in environmental impact assessments.

<b>EXPECTED RESULTS</b>	<b>BASIC ACTIVITIES</b>
<p>1. Countries and some subregions will have designed mechanisms to meet educational and training needs for human resources with regard to human health impact assessment in environmental impact assessment processes. Term: 2007</p>	<p>1.1. Define countries' human resource needs (subregions and the Region) for the assessment of human health impacts in environmental impact assessment processes (2000-2002).</p>
	<p>1.2. Identify and evaluate existing institutional, human, and financial resources for education and training of human resources in the assessment of the human health impact of proposed activities (2000-2002).</p>
	<p>1.3. Establish mechanisms or a network of specialized collaborating centers in education and training programs for human resources on the assessment of health impacts in the environmental impact assessment processes (2002-2004).</p>
	<p>1.4 Review, adapt, and complement the mechanisms and Collaborating Centers in some countries and subregions for education and training of human resources in the assessment of human health impacts in the environmental impact assessment processes (2004-2005).</p>
	<p>2. Centers and training units will have manuals, guidelines, and other technical documents, such as educational materials for human health impact assessment, due to environmental parameters, for applications in human resources education and training. Term: 2006</p>
<p>2.2. Disseminate and facilitate access to available technical documents that make it possible to identify, predict, and assess the significance of the impact of the affected environmental parameters on human health (2000-2003).</p>	
<p>2.3. Adopt, adapt, prepare, and publish technical documents for use by consultants in the analysis of human health impacts in environmental impact assessments (2003-2005).</p>	
<p>2.4. Establish and periodically update a website devoted to human health issues in environmental impact assessments, for use by health workers and other interested professionals (2002-2010).</p>	
<p>2.5 Evaluate and complement the technical documents prepared and published on the identification, prediction, and assessment of the significance of the impact of affected environmental parameters on human health (2005).</p>	

## PROGRAMMATIC AREA 5: PUBLIC AWARENESS AND PARTICIPATION

### Specific objective

To ensure that the affected populations and interested groups become conscientious and responsible actors in the decision-making processes of proposed activities, especially in the analysis of health impacts.

<b>EXPECTED RESULTS</b>	<b>BASIC ACTIVITIES</b>
1. The affected populations and interested groups will be informed about opportunities to participate in the analysis and decision-making processes of proposed activities. Term: 2004	1.1. Disseminate and make available information on current legislation, regulations, and administrative procedures for the participation of populations and interested groups faced with proposed activities affecting their health (2000). 1.2. Report on relevant proposed activities that potentially affect the health of a population, either positively or negatively (ongoing ). 1.3. Establish mechanisms to promote public awareness and participation in the environmental and health impact assessments of proposed activities (2000-2001). 1.4 Evaluate established mechanisms for promoting public awareness and participation in the environmental and health impact assessments of proposed activities (2001-2002)
2. The affected populations and interested groups will be informed of the positive and negative impacts that proposed activities hold for their health. Term: ongoing	2.1. Disseminate and make readily available technical information on the positive or negative impacts of proposed activities for human health (ongoing). 2.2. Make all pertinent scientific information on health issues available to affected populations/groups in a clear, complete, and timely manner (ongoing ). 2.3. Provide training to individuals and interested groups on health, environmental, and development issues (ongoing).
3. The media will have and disseminate available scientific and technical information on the positive and negative impact that proposed activities hold for human health. Term: 2004	3.1. Make the current scientific and technical information on human health impacts associated with changes in environmental factors available and readily accessible to the mass media (ongoing). 3.2. Prepare and distribute special educational materials to the media regarding issues of major interest (2000-2002). 3.3. Offer courses and special workshops to train journalists and other social communicators on health, environmental, and development issues (ongoing). 3.4 Review and adapt special educational materials for the mass media on issues of major interest (2002-2003).

**11. TIMETABLE FOR THE REGIONAL PLAN ON EHIA (2000-2010)**

Regional Plan on EHIA			Year											
P.A.	E. R.	B. A.	0	1	2	3	4	5	6	7	8	9	10	
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		3.4												
Term of basic activity														
Term of expected result														

P.A. = Programmatic Area  
 E.R. = Expected Result  
 B.A. = Basic Activity