Redesigning Neighborhoods for Better Health: How to Get Involved

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Introduction

The built environment—the way cities and towns are developed—is contributing to epidemic rates of obesity, diabetes, asthma, and other chronic diseases. The United States has neighborhoods built exclusively for automobiles, where walking and biking are not only challenging but frequently dangerous. Some neighborhoods are “food deserts,” where finding fresh fruits and vegetables to buy can be difficult. Many low-income areas have poorly maintained housing located near freeways and other pollution sources, promoting asthma and other respiratory diseases. To help change the way U.S. neighborhoods are built, public health officials across the country are looking for ways to work with planning and other local development agencies.

Addressing the Intersection: How Preventing Violence can Prevent Chronic Disease

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Violence is a public health issue, and increasingly, healthy food and activity leaders across the United States have identified violence and the fear of violence as major roadblocks to the success of chronic disease prevention strategies. The impact of violence in communities is far-reaching: when people do not feel safe in their communities, they are less likely to use local parks and community centers and access services such as public transportation. When parents do not feel safe in their communities, they hesitate to let their children play outside or walk to school. Communities perceived as being unsafe are less likely to benefit from investments such as grocery stores.

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A Shared History

Public health and city planning seem to operate in separate spheres, but this was not always the case. The two fields actually arose together, in response to emerging epidemics in the rapidly growing industrialized cities of the late 19th and early 20th centuries. Early planners first began to zone city blocks to buffer residential neighborhoods from polluting industries, and sanitary sewers were built to prevent cholera epidemics.

But once these strategies eliminated the urban health epidemics of that era, the two disciplines began to diverge. Health professionals began to focus on disease treatment and education, while planning professionals focused on providing housing, jobs, and retail for a rapidly growing and increasingly mobile population. Zoning became more of a way to protect property values, and infrastructure projects generally served to bolster the tax base.

Today, however, public health and planning are beginning to converge once again. With the dramatic rise in chronic disease rates, public health professionals are calling for design and development patterns that facilitate physical activity, healthy food access, and social interaction.

What Can Public Health Offer?

Joining the effort to create healthy communities can be daunting, but public health officials have much to contribute, as shown in the following examples:

- **Sharing information on connections** between health and the built environment can help planners begin to link health outcomes to their work. Fact sheets, studies, and online resources can be a low-cost and minimally time-consuming way to begin. Local health departments (LHDs) can also offer workshops, trainings, lunch meetings, or even a public summit to introduce planners and other city agencies to the issues and begin building relationships with staff from these agencies.

- **Assessing existing health conditions** will provide a clearer picture of the nature and extent of a community’s health issues, ensuring effective and locally relevant policies to promote public health. A community health baseline assessment can explore questions around obesity rates, physical activity opportunities, access to healthy food, transportation options, air quality, mental health, and community safety. More specific assessments, such as walkability and bikeability audits or community food assessments, can also help identify barriers to healthier living within neighborhoods.

- **Providing community-specific health data** can help make the case for health-oriented planning decisions and prioritize the most important health concerns. Health officials may be accustomed to presenting data by population subgroup, such as ethnicity or income level—but to be relevant to built environment decisions, health data must be presented in a way that makes clear the link to “place” (e.g., within a neighborhood or along a highly trafficked corridor). LHDs can prepare maps correlating health outcomes with location: the prevalence of childhood asthma rates with the location of major roads, or rates of obesity with the concentration of fast food outlets versus grocery stores.

- **Engaging residents and elected officials** in any planning process is key to getting critical support and ensuring new policies and projects reflect community needs and priorities. LHDs can help build community support by framing policies and projects to illustrate both public health and economic benefits, partnering with community-based organizations to help convey these messages to the public and elected officials.

Finding Opportunities

Public health officials can contribute their expertise and resources to a variety of planning processes.

**Land Use Planning**

Many communities across the country look to a comprehensive or general plan to guide development. This plan is essentially the constitution for a community, setting a 20- to 30-year blueprint of goals and policies for how a community should be developed. It establishes guidelines for what land uses are permitted in different areas of a community, including transportation, housing, parks and recreation, and other uses closely linked to health and quality of life.

In a recent national survey of local planning directors and other planning staff, “only slightly more than a quarter of respondents reported that their jurisdictions’ comprehensive plans explicitly addressed public health. On average, they reported that LHDs had little or no involvement in developing the public health components of these plans. Public health officials can use all of the strategies outlined above to support this process and ensure that the plan explicitly promotes public health. (For examples of plan language promoting everything from mixed-use development to transit and local food access, see “Healthy Planning Policies” at www.phlpnet.org/healthy-planning/products/healthy-planning-policies.)

**Redevelopment**

Public health officials can also work with local redevelopment agency staff on plans and projects to revitalize blighted neighborhoods. With input from public health staff, redevelopment agencies can direct resources to make neighborhoods more walkable, build parks and other gathering spaces, improve transit access, increase public safety, expand healthy

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food access, create and improve affordable housing, and enhance air quality.

Some redevelopment agencies have used data on pedestrian fatalities to guide street design, or data on asthma rates to inform decisions about where to locate schools. In the heavily industrial city of Richmond, CA, public health staff worked closely with community advocates and the redevelopment agency to improve local air quality by documenting the effects of diesel truck traffic in residential neighborhoods and mapping new routes for the polluting vehicles. (Visit www.phlpnet.org/healthy-planning/podcast/richmond-change-air for more on this project and “Healthier Communities through Redevelopment” at www.nplanonline.org for a primer on how public health can influence the process of redevelopment.)

Economic Development

Economic development includes a wide range of activities that help build and sustain a robust economy, from business attraction and real estate development to workforce development and market analysis. Cities use many strategies to build the local economy, with tools and funding sources scattered across multiple city departments. For public health officials, one key reason for partnering with agencies working on economic development is to help bring new food retail, especially grocery stores, into low-income neighborhoods. In Los Angeles, city officials partnered with the Community Redevelopment Agency to develop an incentive package to attract new restaurants, groceries, and produce marts to South LA (visit www.crala.net/internet-site/development/upload/market_opportunities_08.pdf).

Climate Change Planning

Climate change planning efforts now in force at the state and local levels offer another opportunity for public health participation. If communities do not make rapid and significant changes to land use, transportation, agriculture, and other patterns, climate change will have a catastrophic impact on both the global economy and individual health.

The good news is that many of the strategies public health practitioners are already pursuing to combat chronic disease can also help reduce greenhouse gas emissions and help combat global warming. Making it safe and convenient for residents to walk and bicycle for daily errands, for instance, will encourage people to get out of their cars, promoting physical activity while reducing greenhouse gas emissions. Making it easier for communities to hold farmers’ markets and getting more produce into corner stores brings healthy foods to poor and undeserved areas—and it decreases transportation-related pollution by expanding opportunities for local and regional growers. By plugging into climate change planning efforts, public health officials have the opportunity not only to mitigate the future health effects of global climate change but also to advance policies that can help people live healthier lives today. (Visit www.phlpnet.org/climate-change for an action plan detailing recommendations for involving public health in climate change policy.)

For more about how public health officials can participate in a range of local planning efforts to help create healthier communities, see www.phlpnet.org/healthy-planning.

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Until now, very little research on the impact of community violence on healthy eating and activity—and potential solutions—has been done. With funding from Kaiser Permanente, Prevention Institute has written Addressing the Intersection: Preventing Violence and Promoting Healthy Eating and Active Living (visit www.preventioninstitute.org/component/jlibrary/article/id-267/127.html). This report explores the relationship between violence and healthy eating/physical activity and supports practitioners and advocates in their work to prevent chronic disease in communities heavily impacted by violence.

Building on the findings and recommendations in the report, the Convergence Partnership, a national collaborative of funders whose goal of policy and environmental change will help reinvent communities of healthy people living in healthy places, supports an innovative pilot effort to address the intersection. Six pilots across the country are working to strengthen existing collaborations and develop new non-traditional partners with the goal of implementing policy and environmental changes that support safe and healthy neighborhoods. Representatives from multiple sectors and disciplines, including public health, healthy eating and active living advocates, groups focused on preventing violence, local government, law enforcement, and youth, have joined forces to foster healthier, safer, and more equitable communities.

Pilot initiatives are working right now on cross-cutting policy and environmental change strategies to simultaneously prevent violence and improve health in their neighborhoods:

- As part of the “Healthy Zone” initiative in Louisville, KY, the local health department (LHD) is working closely with youth and local businesses to encourage neighborhood residents to walk to their local grocery stores and access spaces for recreation and activity. The team is working to support safety with an “eyes on the street” approach, decreasing visual obstructions to the street by limiting alcohol advertisements in Shawnee neighborhood stores, increasing lighting, and decreasing graffiti and neighborhood blight.

- In Philadelphia, diverse partners are revitalizing Hunting Park, an 87-acre neighborhood park, to provide safe spaces for youth and seniors. The LHD, healthy food advocates, youth, and representatives from local government are developing a community garden and farmers’ market in the park. Their goal is to increase healthy food access for the neighborhood while simultaneously improving the physical appearance of the park, increasing community use of the space, and influencing the perception of safety in and around the park. The garden and farmers’ market will also be venues in which to actively engage a variety of age groups in park stewardship and will help to strengthen community bonds.

- The Alameda County (CA) Public Health Department, local community-based organizations, and residents of the Hoover Corridor in Oakland, CA, are working to transform a dangerous intersection and park into a safe and vibrant space for residents. To encourage neighborhood residents to walk to and from the park and surrounding neighborhood assets, the community team is creating a “Safe Routes to School” program at the site and working toward making the park safer.

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These pilots have achieved promising results in large part because of their focus on and success in creating strong collaborations. Beginning in the planning stages, these teams developed an understanding of each partner’s intentions and motivations, perspectives on the issue at hand, communication styles, and varying interests, values, and missions. For some of the teams, this in-depth analysis was guided by Prevention Institute’s Collaboration Multiplier. Collaboration Multiplier is a framework and tool for community stakeholders and decision makers to engage in a process to learn more about each other and identify ways of working together. Additional information on the Collaboration Multiplier and other frameworks for effective collaboration can be found at www.preventioninstitute.org/tools/partnership-tools.html.

Public health leaders are well positioned to take on multiple roles in this cross-sectional work to foster health, safety, and equity across communities:

- **Bold spokespeople** communicating the urgency of preventing violence and explaining how it is an issue that affects everyone and impacts chronic disease.
- **Catalysts** sparking multi-sectoral collaboration and helping to develop critical mass.
- **Coordinators** using their knowledge, relationships, and leadership capacity, without assuming the lead, in coalitions to prevent violence.
- **Integrators** linking multiple strategies across fields of prevention; braiding resources, policies, and strategies to achieve better joint outcomes; and building community momentum to accomplish these results.

A first step in advancing this work is assessing the breadth of partners needed to make an impact. Potential cross-cutting strategies for diverse partnerships to implement include creating safe spaces that support active living through joint use or safe routes to school and promoting community development and advancing efforts that provide employment through initiatives such as grants, loans, technical assistance, and other incentives to attract healthy food retail or ensuring public transportation is safe, affordable, and accessible. By intentionally addressing intersecting health issues, LHDs can deepen ties within the community and connect with organizations that are working with youth, job development, violence prevention, housing authorities, and school districts—further growing the network of advocates supporting health and safety and advancing equity in communities.

For more information on approaches to address the intersection, visit www.preventioninstitute.org/focus-areas/preventing-violence-and-reducing-injury/connecting-safety-to-chronic-disease.html.