WASHINGTON APA'S GAME CHANGING INITIATIVE
HEALTH AND PLANNING WORKING GROUP

POLICY ON
HEALTHY COMMUNITY PLANNING

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BiG WA
ideas

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Big Ideas Initiative

The Washington American Planning Association's (APA's) Game Changing Initiative intends to help planners bring about far-reaching and fundamental change around our state's most critical challenges. This Initiative is organized around Ten Big Ideas, which include addressing climate change, rebuilding infrastructure, protecting ecosystems, growing economies, and supporting sustainable agriculture. Planning to improve community health is also one of the Ten Big Ideas.

The Health and Planning Working Group believes planners could benefit from resources to start a conversation with decision-makers, build support, and jump start a planning effort. To this end, the Working Group has developed a Policy Framework to help planners and APA Washington: 1) justify Health Planning work as a best planning practice; 2) advocate for resources to infuse health into planning; 3) provide starter policies to be considered for inclusion at the county or city level; and, 4) support legislative action and funding.

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INTRODUCTION

In the early days of our profession, planning and public health were closely linked. Planning was seen as a way to reduce overcrowding and lessen hazardous and unsanitary conditions in order to improve public health and curb disease outbreaks. Over the years planning and public health drifted apart, however, with public health focusing on preventing communicable and chronic diseases, reducing hazards and improving safety, while planning honed in on land-use and transportation.

Today there is a renewed interest for the two professions to reunite. A wealth of research has emerged intrinsically linking public health and community design (see Reference Section). In the public health sector, professionals are working to prevent such chronic diseases as diabetes, heart disease, asthma and cancer, and promote health and safety using a population-based policy approach. In the planning profession, planners have the responsibility and opportunity to create communities that can enhance quality of life, livelihood, livability and health of all populations and sub-populations. Professionals in both fields are contributing towards the triple bottom line— people, prosperity, and planet—to address social determinants of health[i] and create healthy communities for all.

This Healthy Community Planning Policy Guide describes:
- Rationale and best professional practice for reconnecting public health and planning.
- Policies and actions to help planners partner with local health agencies and interested groups to address local, regional and national public health challenges.

The Nexus Between
HEALTH AND PLANNING

The World Health Organization defines health as a state of complete physical, social and mental well-being[ii] and asserts that every human being has a fundamental right to health. Creating healthy communities for all is one important role jurisdictions and agencies can play to help ensure everyone's right to health.

According to US Department of Health and Human Services, a healthy community continuously creates and improves both its physical and social environments, helping people to support one another in aspects of daily life and develop to their fullest potential. Healthy places are designed to improve the quality of life for all people who live, work, learn and play within their borders—where every person is free to make choices amid a variety of healthy, available, accessible, and affordable options[iv].

"Healthy communities" are healthy and sustainable places built on a balanced foundation of people, prosperity and planet, as depicted in the following figure. The integration of these three foundational elements, when making policies and investments, generates a livable natural and built environment, a viable economy and an equitable social environment.

The way we design and build our communities can affect our physical and mental health[v]. Integrating health into community design and land-use/transportation decisions can positively influence public health outcomes, both through encouraging healthy behaviors and improving environmental qualities, by:
- Increasing physical activity
- Increasing safety and reducing injury
- Increasing access to healthy food
- Improving land, air, and water quality
- Strengthening the social fabric of a community and improving overall quality of life
- Providing fair access to livelihood, parks and nature, transportation and housing choices, education, services and resources

Healthy Community Outcomes

Healthy Community Outcomes
Source: Tacoma-Pierce County Health Department (2013)
Healthy Community Planning Toolbox[vi]
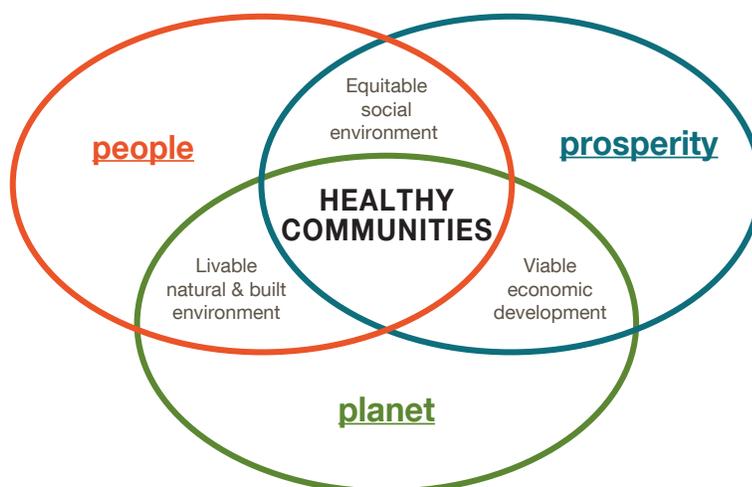
People

Increases
• **Community Connections**
• Social Skills/ Networks
• Human Capital
• **Mental Health & Wellbeing**
• **Safety & Security**

Supports
• **Stronger Communities**
• **Crime Prevention**

Reduces
• **Heart Disease**
• **Injury**
• **Diabetes**
• **Risk of Stroke**
• **Obesity/ Overweight**
• **Depression**
• **Stress**
• **Health Disparity**

Planet

Increases
• Water Quality
• **Viable Natural Systems**

Supports
• **Livable & Vibrant Built Environment**

Reduces
• **Greenhouse Gas Emissions**
• **Noise Pollution**
• **Traffic Congestion**
• **Climate Change Impacts**

Prosperity

Increases
• **Economic Activity**
• **Property Values**
• **Employment**

Supports
• Local Business
• **Attracting Workforce**

Reduces
• **Vandalism Costs**

Statement of
ISSUES &TRENDS

Determinants of Health and Chronic Diseases

The Centers for Disease Control and Prevention (CDC) estimates that more than half of our overall health is determined by social and environmental characteristics while less than half are determined by healthcare, health behaviors, and genetics combined[vii]. Social and environmental characteristics have a strong influence on the leading causes of death in the United States today: Heart disease, cancer, cerebrovascular disease (including stroke), chronic lower respiratory diseases (asthma, bronchitis, and emphysema), and unintentional injuries[viii]. Chronic diseases, such as heart disease, cancer, lower respiratory diseases mentioned above, are affecting our communities, State and Nation. Three major public health challenges associated with mortality and morbidity are obesity, poor mental well-being, and poor environmental quality.

Obesity Epidemic

According to Centers for Disease Control and Prevention, obesity is common, serious and costly. In 2012, 26.8% of adults were obese. Today, close to 35% of U.S. adults (34.9%) and 17% of youth are obese.[ix] In our State, the respective rates are 26.7% and 27%.[x] Obesity-related conditions associate with chronic diseases, such as heart disease, asthma, type 2 diabetes and certain types of cancer. The estimated annual medical cost of obesity in the U.S. was $147 billion in 2008 U.S. dollars; the medical costs for people who are obese were $1,429 higher than those of normal weight.[xi] Obesity does not affect everyone on an equal footing. National statistics show that non-Hispanic blacks and Hispanics (particularly with higher income), middle age adults of 40-59 years old, and women of low-income and/ or less educated experience a higher rate of obesity. Childhood obesity has doubled among children and quadruped among adolescents in the past three decades.[xii] [xiii] Racial and age disparities also exist in obesity prevalence among children and adolescents.[xiv]

Poor Mental Well-being

Mental well-being is a "state in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community".[xv] Health conditions characterized by changes in thinking, mood, or behavior (or some combination thereof) associated with distress and/or impaired functioning[xvi] are symptoms of mental illness. Depression is the most common type of mental illness, affecting more than a quarter of the U.S. adult population. [xvii] In 2011-2012, about 4.0% of US adults and 5.1% WA adults had serious mental illness.[xviii] It has been estimated that by the year 2020, depression will be the second leading cause of disability throughout the world, trailing only ischemic heart disease. [xix] Besides social physiological impacts, such as stigmatization and low self-esteem, research evidence links mental health with sleep apnea, obesity and chronic diseases, such as diabetes, cancer, cardiovascular disease, and asthma.[xx]

Poor Quality of the Environment

Environmental health "addresses all the physical, chemical, and biological factors external to a person, and all the related factors impacting behaviors. It encompasses the assessment and control of those environmental factors that can potentially affect health."[xxi] The streets we walk on, the air we breathe, and the food and water we eat and drink contribute to our health. In 2012, 4,743 pedestrians died in traffic accidents, up 6% from 2011. The majority of these accidents occur at night on clear or cloudy days, at non-intersections and the most at risk group are between 16-29 years of age. While traffic safety has improved in general over the years, the proportion of pedestrian deaths has been increased from 11% in 2003 to 14% in 2012[xxii]. Outdoor air pollution was considered the highest rating for cancer, associated with population morbidity and mortality. One hundred and forty-seven million Americans live in areas that do not meet the US EPA's standards for the six criteria pollutants tracked by the EPA[xxiii]. This does not include populations that are overexposed to the additional 191 hazardous air pollutants identified by the EPA. Drinking water systems can be contaminated by microorganisms, disinfection byproducts, and inorganic chemicals. With aging infrastructure, the American Society of Civil Engineers estimates that there is an $84 billion gap between the current and necessary spending levels for drinking water and wastewater infrastructure[xxiv].

Chronic Disease Prevention through Healthy Community Design

Obesity, poor mental health and poor environmental quality have resulted in lost life and quality of life, and astronomical health care expenditures to treat a spectrum of associated chronic diseases. Implementing healthy community design and health planning options offers a cost-effective way to address these challenges.

Obesity Prevention

The US Surgeon General's National Prevention Strategy calls for the design of *healthy and safe community environments*[xxv] as a prevention strategy to bend the curve of this obesity epidemic. Their overarching goal is to increase the number of Americans who are healthy at every stage of life. Healthy and safe community environments which can promote health for all ages include:

- Clean air, water and land.
- Affordable and secure housing.
- Sustainable and economically vital neighborhoods (with efficient transportation choices, quality schools, etc.).
- Supportive structures, amenities and services (with violence-free places to be active, access to affordable healthy foods, streetscapes designed to prevent injury, etc.).

Mental Disease Prevention

In the health care and public health arena, more emphasis and resources have been devoted to screening, diagnosis, and treatment of mental illness than promoting mental well-being. Little has been done to protect the mental health of those free of mental illness. Researchers suggest that there are three domains of mental health[xxvi xxvii xxviii] which can be improved through building healthier places, including physical and social environments:

- Emotional well-being—such as perceived life satisfaction, happiness, peacefulness.
- Psychological well-being—such as self-acceptance, personal self-worth, personal growth including openness to new experiences, optimism, purpose in life, control of one's environment, spirituality, self-direction, and positive relationships.
- Social well-being—social acceptance, beliefs in the potential of people and society as a whole, volunteerism and usefulness to society, sense of community and place.

A former Surgeon General notes that there are social determinants of mental health as there are social determinants of general health that need to be in place to support mental well-being. These include adequate housing, safe neighborhoods, social cohesion, sense of place, equitable jobs with family wages, quality education, and equity in access to quality community services, including health care.

Environmental Improvements

Building healthy places can improve health outcomes through environmental improvements in such areas as:

- Reduce reliance on single occupancy vehicles
- Promote healthy homes, schools and workplaces with clean indoor air, and protection from exposures and pollution
- Bring nature into our buildings, streets, and communities to reduce energy consumption and noise, and improving light and air quality

DECLARATIONS

The Washington Chapter of American Planning Association or jurisdiction affirms that:

• Health is a highly-valued human asset, without which there is a reduced quality of life.

• The way we design places to live, work, learn, shop and recreate bears heavily on the physical, social and mental well-being of those living there.

• Built environments are determinants of health. Built environments provide the foundational context that shapes human lifestyles and behaviors, and impacts the quality of natural environment. This shaping force will ultimately determine our physical, social and mental well-being.

• Smart growth principles and techniques provide a strong foundation to achieve socially, economically, and environmentally healthy communities.[xxix]

• All segments of population should be meaningfully engaged when making planning decisions affecting their health and quality of life.

• All populations should be given adequate, affordable, and fair access to choices and opportunities irrespective of where they live, work, study and play.

POLICY POSITIONS

General Policies

In determining policies, planners should evaluate policy impacts on the total well-being of individuals—physical, social and mental. Planners should encourage meaningful dialogues with diverse community members to identify shared health priorities unique to each community, and explore feasible policies and actions to incorporate health into its community planning and investments.

In planning for healthy communities, planners should consider the following:

- **Physical health.** Physical activity is one of determining factors for our health. Encourage land-use patterns, alternative transportation and compact built forms conducive to physical activity, healthy eating and healthy environments.

- **Social well-being.** Create social environments that meet community needs and wants, including walkable streets and mixed-use destinations in communities for people to meet, to promote a sense of community and place; and to reduce social isolation, depression or homelessness.

- **Mental well-being.** Create healthy natural and built environments to help people reduce stress, depression and health disparities, and mutually support each other in performing all functions of life and developing their maximum mental capacity.

Specific Policies

The following pages list the 7 specific policies regarding health into planning. These are as follows:

1. Infuse health in all planning decisions

2. Integrate health in all planning policies

3. Identify community health needs and healthy build environment outcomes through meaningful engagement of diverse populations

4. Collect, analyze, and interpret evidence-based data to support comprehensive or strategic planning in a transparent manner

5. Partner with other public, private, non-profit, and local organizations to implement planning policies and action strategies

6. Work with federal, state, and local jurisdictions, and national and local agencies to identify policies and programs that encourage alternatives and innovation in preventing chronic diseases, and closing the gap of health disparity

7. Leverage, seek, and dedicate funding to support the implementation of this Policy

1 INFUSE HEALTH IN ALL PLANNING DECISIONS

1.1 Adopt health as a guiding principle in land-use and transportation decisions.

1.2 Incorporate health and consider health implications across diverse population segments throughout the planning process.

1.3 Balance impacts on the environment (planet), economy (prosperity), and society (people) when making planning decisions.

1.4 Constantly evaluate near-term strategies to ensure effective pathway leading towards long-term "healthy community" outcomes.

1.5 Promote policies that are conducive to ensuring fair access to opportunities for all.

1.6 Integrate health into the State Environmental Policy Act process.

1.7 Consider Health Impact Assessment when evaluating development proposals or scenarios.

2 INTEGRATE HEALTH IN ALL PLANNING POLICIES

2.1 Encourage a holistic systems approach to long-range strategic planning to address public health challenges, including such topics as:

- Active Living (physical activity, recreation, active transportation).
- Chronic Disease (obesity, disease prevention, health disparities).
- Environmental Health (brownfields, clean indoor and outdoor air and water, toxic exposures).
- Climate Change (global warming, rising sea water, sustainable building techniques, infectious disease prevention).
- Food and Nutrition (food access, healthy eating).
- Mental well-being (depression, social isolation, homelessness)
- Health Care (aging, clinical services, healthy homes, health and human services).
- Social Health (social equity, health disparity, social cohesion).
- Safety (injury and crime prevention, public safety, emergency preparedness).

2.2 Encourage the integration of health into all comprehensive plan elements, such as:

- Land-use: Support mixed-use; smart growth; infill and compact developments; and transit-oriented development/corridor; and discourage urban sprawl.

- Housing: Support affordable and adequate/decent/healthy housing for all income groups; a wide range of alternative housing choices, including missing middle housing and localized care facilities, for seniors to age in place and millennials to enjoy an active lifestyle; transitional housing with access to support services; innovative regulatory tools; incentives for alternative and affordable housing; and discourage involuntary displacements of underserved populations.

- Transportation: Support complete street and multimodal transportation choices for all ages; safe routes to schools and walking school bus programs; special needs transportation; transportation demand management; shared parking and innovative parking tools; network connectivity; and improve traffic safety at high injury locations.

- Natural Environment: Support protection and restoration of natural resources; green infrastructure; low-impact development; protection of public water sources; planning for climate change; reduction of greenhouse gas emissions; reduction of toxic exposures; identification of standards for measuring changes to the natural environment and natural and wildlife resources; and integration of emergency preparedness into plans and development review process.

- Capital Facilities: Support co-location of community and other essential services at convenient locations; siting of schools in conjunction with safe routes to schools; siting of health care facilities along transit; modernize infrastructure to ensure safe and reliable service; and prioritization, programming and coordination of capital improvement projects within all departments to address the needs of underserved communities/ neighborhoods.

- Community Character: Support livable places with meaning; historic preservation; arts and culture; crime prevention through environmental design; universal design principles; healthy building design; urban streetscape; green streets; linear open space; public arts; pedestrian-oriented and human scale design; and form-based zoning.

- Economic Development: Support main street environment; buy local/direct options; local businesses; local food production; farmers' market, urban agriculture; and job creation in proximity to homes and/or along transit.

- Parks, Open Space and Recreation: Support siting of open space, parks, community gardens and recreation facilities within reasonable walking distance; connected systems of parks, trails and open space; connectivity between on-street and off-street multipurpose trails; inter-generational and culturally diverse recreation programs; and safe and universal design for parks and open space.

3 IDENTIFY COMMUNITY HEALTH NEEDS AND HEALTHY BUILT ENVIRONMENT OUTCOMES THROUGH MEANINGFUL ENGAGEMENT OF DIVERSE POPULATIONS

3.1 Identify community's aspirations and unique health priorities with the full representation of community members, with particular attention given to the needs of the underserved.

3.2 Meaningfully engage a continuous open dialogue with the diverse communities on identified community health issues throughout the planning process.

3.3 Fairly treat and include people of all races, colors, genders, national origins, sexual preferences and incomes.

3.4 Turn community goals and aspirations into measurable healthy community design outcomes with public input and support from conception to implementation.

3.5 Use measurable health or healthy community design outcomes to drive planning.

4 COLLECT, ANALYZE AND INTERPRET EVIDENCE-BASED DATA TO SUPPORT COMPREHENSIVE OR STRATEGIC PLANNING IN A TRANSPARENT MANNER

4.1 Work with the local and state health departments and other agencies to use meaningful data to help identify opportunities and threats, including, but not limited to, social and health equity issues.

4.2 Encourage the collection and tracking of data to manage healthy built environment performance outcomes, and monitor policy directions and regulatory needs.

4.3 Continuously use goals and policies in staff reports and presentations to manage how health issues are being or could be addressed.

4.4 Regularly reassess goals and policies based on performance outcomes with the public.

5 PARTNER WITH OTHER PUBLIC, PRIVATE, NON-PROFIT AND LOCAL ORGANIZATIONS TO IMPLEMENT PLANNING POLICIES AND ACTION STRATEGIES

5.1 Work with agencies and local groups, in the form of an advisory or a steering committee, during the comprehensive plan process to create a community-wide healthy community vision, goals, policies, and strategies. Partner agencies may include: Food and policy council/coalition, Board of Health, local and state Health Departments, Department of Agriculture, local food cooperatives, academia, regional and local governments, school boards, planning agencies, housing authority/department, citizen advisory groups (including Planning Commissions), bicycle/pedestrian advisory groups, public safety agency/department, economic development agency/department, infrastructure agency/department, community-based organizations and coalitions.

5.2 Enter into inter-local agreements and memoranda of understanding to strengthen and maintain partnerships for implementation.

5.3 Encourage innovative public-private partnerships in support of affordable housing, open space, community gardens and trails.

6 WORK WITH FEDERAL, STATE AND LOCAL JURISDICTIONS, AND NATIONAL AND LOCAL AGENCIES TO IDENTIFY POLICIES AND PROGRAMS THAT ENCOURAGE ALTERNATIVES AND INNOVATION IN PREVENTING CHRONIC DISEASES, AND CLOSING THE GAP OF HEALTH DISPARITY

6.1 Support legislative measures and advocacy to address public health and planning.

6.2 Partner with APA's Planning and Community Health Research Center, Centers of Disease Control and Prevention, National Association of County and City Health Officials, and American Public Health Association to identify innovative policies or programs to infuse health into planning.

7 LEVERAGE, SEEK AND DEDICATE FUNDING TO SUPPORT THE IMPLEMENTATION OF THIS POLICY

7.1 Allocate funds for training activities and resource development to raise public awareness, and additional research or tool development.

7.2 Research and monitor public health funding sources to help implement healthy communities.

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Toolbox Resource Available through CDC Website

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APA's *Healthy Community Design Toolkit* - Leveraging Positive Change
This toolkit is prepared by professional planners (APA) with an interest in public health for use by public health professionals interested in planning. It identifies key "Leverage Points" in local community design, planning and development to help make communities healthier.

CDC's *Healthy Community Design Checklist Toolkit*
This toolkit can help planners, public health professionals, and the general public include health in the community planning process.

CDC's *Transportation Health Impact Assessment Toolkit*
This toolkit provides a framework for public health departments, city planners, project managers, and other stakeholders to conduct HIAs on proposed transportation projects, plans, and policies.

CDC's *Parks and Trails Health Impact Assessment Toolkit*
This toolkit can assist in the development of HIAs with park and trail components. It provides a framework for public health departments, city planners, project managers, and other stakeholders to work together.

Design for Health's *Health Impact Assessment Tools and Resources*
The tools are meant to be an easy way to focus attention on human health in the planning process.

Tacoma-Pierce County Health Department's *Healthy Community Planning Toolbox*
This toolbox is designed to help planners create healthy communities by integrating health in planning documents. The toolbox contains two sets of tools for planners to select, modify and apply planning process tools and policy intervention tools. This toolbox also links to PSRC's Planning for Whole Communities Toolkit which contains resource guides with local implementation tools.

Mariposa *Healthy Living Initiative Toolkit*
The toolkit provides a framework that practitioners can use to integrate health into the design, development, and construction of projects.

Endnotes

[i] The social determinants of health are the circumstances in which people are born, grow up, live, work, and age, as well as the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics. (Social Determinants of Health Key Concepts , World Health Organization)<www.cdc.gov/socialdeterminants/>

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Samples of built environment performance outcome measures can be found in <www.tpchd.org/files/library/9f8937e58af92c5d.pdf>.