Healthy Communities

Designing Healthy, Equitable, Resilient, and Economically Vibrant Places

“I thought about it while riding my bicycle.”
—Albert Einstein on the Theory of Relativity

Introduction

The health and well-being of California’s residents are fundamental to their quality of life and economic vitality. Protection of the public health, safety, and welfare of residents is the legal basis for land use regulation. Homes, streets, work places, retail and services, schools, and neighborhoods influence community health in fundamental ways. Educational and employment opportunities may influence and improve health by ensuring access to the ingredients for a healthy life, including nourishing food, clean water, affordable places to live, safe places to walk, bike, and be active, and clean air indoors and out. The World Health Organization (WHO) defines health as “a complete state of physical, mental, and social well-being, and not merely the absence of disease.” Any reference to health in these guidelines refers broadly to health, including mental health. Health outcomes are not evenly distributed across all segments of the community. Research has shown that certain communities, often low-income and people of color disproportionately suffer from poor health. Many factors contribute to these health disparities, including neighborhood and community conditions. Changing demographics across California create an imperative to address these disparities. Planning, programs, and policy to achieve health equity, through ensuring access to opportunities, will benefit the entire community. The policy priorities established in local general plans have tremendous potential to improve community health and make the healthy option the easier option for everyone.

Research shows that while access to health services is important, social, environmental, and economic factors also have a significant impact on health outcomes. The built environment is a key component of those factors and can affect all chronic conditions. Walkable neighborhoods promote physical activity, improving health outcomes. Other links between health and environment continue to emerge; for example, the impact of green space on mental and physical health. Many planning policies, such as Complete Streets, promote healthier outcomes by creating safer places to walk with improved connectivity to destinations. Thinking about health in
the planning process can lead to better health outcomes, and using data to inform policy decisions can help to ensure that changes in
the built environment improve health disparities, instead of worsening them. Cross-sectoral work throughout the planning process
allows communities to prioritize policies and coordinate with other local government agencies and private or non-profit partners to
improve the health of the community. Many of the health-related policies identified in this section also promote economic, equity, and
climate resiliency goals.

This chapter provides concepts integrated from promising practices that communities may voluntarily incorporate into their general
plans and focuses on data analysis and policy development to further healthy planning. Fortunately, many opportunities are already
aligned with existing planning practice and state legislation, such as requirements for incorporating complete streets, addressing
climate change, and considering environmental justice. This chapter provides ideas for data analysis, policy development, and
implementation. Information was gathered from multiple sources, including health organizations across the state, a review of
existing published research literature, a survey of promising practices, and extensive stakeholder engagement. As with all of the
voluntary sections, this chapter provides suggestions and resources for use by jurisdictions as they see fit. Some of the discussion
on topics such as environmental health, nutrition and food systems, housing, and active living and recreation have been moved to
Chapter 4 since SB 1000 was signed into law requiring these issues be addressed for disadvantaged communities.

### Correlations Between Elements

<table>
<thead>
<tr>
<th>Land Use</th>
<th>Circulation</th>
<th>Housing</th>
<th>Conservation</th>
<th>Open Space</th>
<th>Safety</th>
<th>Noise</th>
<th>EJ</th>
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<tbody>
<tr>
<td>RELATED</td>
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**Identified in statute**  **Closely related to statutory requirements**

## Strategies and Approaches

### Incorporating Health Considerations into General Plans

Local jurisdictions that have incorporated health considerations into their general plans have opted for one of three formats 1) a separate
health element; 2) an integrated approach which has health woven throughout all elements; or 3) a hybrid approach that weaves health
throughout the General Plan and uses a health element to frame the importance of health issues. The adoption of a health element is
consistent with Government Code section 65303. There are benefits to having a separate health element because it can be easier for
the public and decision-makers to see health-related policies in one place. At the same time, an integrated approach puts health-related
policies into the elements that address those issues. For example, including active transportation policies in a circulation element
may potentially make implementation more actionable, by incorporating them in to larger transportation plans. Additionally, some
jurisdictions incorporate specific health considerations into the housing element. Since this element is often updated more frequently,
it provides an opportunity for more regular evaluation of policy implementation and progress. Regardless of approach, health-related
policies must meet internal consistency rule set forth in Government Code Section 65300.5. Ultimately, the best format will depend on the
local context, available funding, and community interest, and should complement the overall general plan update and vision.

Jurisdictions will likely prioritize various health considerations differently depending on the local context. For instance, a rural
community could prioritize trail connectivity while an urban area might focus on active transportation, while other communities
may emphasize clean water access, food systems, or access to health care. Whether the general plan is being adopted by a city or county could also impact which health issues emerge as priority areas. Additionally, policies that work in a rural area might not be as relevant for an urban area and vice versa. The discussion below is not exhaustive, but rather a starting point for further deliberation as to some of the associations between health and planning.

**Definitions**

**Health:** A complete state of physical, mental, and social well-being, and not merely the absence of disease.

**Health Equity:** Means every person, regardless of who they are— the color of their skin, their level of education, their gender or sexual identity, whether or not they have a disability, the job that they have, or the neighborhood that they live in— has an equal opportunity to achieve optimal health.

**Health Disparities:** Refer to differences in health and mental health status among distinct segments of the population, including differences that occur by gender, age, race or ethnicity, sexual orientation, gender identity, education or income, disability or functional impairment, or geographic location, or the combination of any of these factors.

Sources listed in order:

http://www.who.int/about/mission/en/


Health Disparities: California Health and Safety Code (code sign) 131019.5

**Health in All Policies**

Health in All Policies (HiAP) is a collaborative, cross-sectoral approach that is being used by jurisdiction across California, the United States, and internationally to address the social and environmental factors that drive health outcomes and health inequities. This includes promoting walking and biking, access to healthy food, healthy housing, violence-free communities, and educational and economic opportunities for all.

There is no one “right” way to implement a HiAP approach, and there is substantial variation in process, structure, scope, and participation in the initiatives. Many HiAP initiatives facilitate health and equity input into general plans. California jurisdictions that use a Health in All Policies approach include:

- The City of Richmond’s HiAP Strategy Ordinance
- Ventura County’s HiAP Resolution
- Los Angeles Healthy Design Ordinance and Workgroup
- Salinas HiAP Advisory Council
Innovative Partnerships and Collaboration

Planning relies on collaborating with different sectors to accomplish the vision set forth in the general plan. Addressing health in the built environment creates an opportunity to form new partnerships. Several organizations can provide unique health expertise and offer a health perspective during the planning process. Additional models of collaboration are referenced in each Chapter.

Both health and planning have distinct professional terminology. In local jurisdictions that have successfully integrated health considerations, cross-sector groups prioritized learning basic planning and health terms, which is important for professional collaboration as well as for community outreach. The long-term nature of the land use plans, e.g., 20 years or more, is new to many groups outside of the planning community. Particularly for large jurisdictions, general plan updates can be costly and are not undertaken frequently. Therefore, it is important to provide clear expectations in the initial phases of engagement, to clarify the timeline, and set expectations about the planning process. In addition, it may be beneficial for jurisdictions that decide to incorporate explicit health considerations into their general plan to start with a city or county resolution prior to the formal update. This may help raise awareness about the connections between the built environment and healthy planning to achieve improved health outcomes. The “Healthy Eating, Active Living Resolution” is an example of such a resolution. To date, 191 cities across California have enacted resolutions to support health and wellness policies.

Sources of Support and Information for Health Considerations

- **Local County and City Departments of Public Health**: Public health experts have in-depth understanding of local health data as well as strong ties with community organizations.

- **Health related non-profits**: Many organizations are working to improve walkability, bikeability, accessibility for the disabled, and overall health in local communities.

- **Equity or Environmental Justice related non-profits**: Many organizations are working to improve conditions in communities unable to access basic resources like safe water, healthy foods, and clean air.

- **Community groups**: Neighborhood or community organizations, local parent groups, youth groups, faith-based organizations, or topically focused interest groups often work on community health issues.

Resources:
- Monterey County HiAP Framework
- Healthy Riverside County Initiative
- Healthy Rancho Cucamonga


California Health in All Policies Task Force: http://sgc.ca.gov/Initiatives/Health-In-All-Policies.html
Innovating in Riverside - A Healthy Community Planner

In 2011, through a grant by The California Endowment (TCE), the Riverside County Department of Public Health became the first health department in California to hire a full-time urban/regional planner. This “Healthy Communities Planner” position is designed to provide leadership in bringing public health concerns into municipal planning. The planner is key to bridging the gap between public health and urban/regional planners to help ensure that health is considered as the cities and the county plan for the built environment, future development and population growth. The planner is helping to implement the County’s Health Element of the General Plan, actively participates in TCE’s Building Healthy Communities Initiative, and works with the county’s 28 cities to adopt “Health City Resolutions.”

Health Considerations

The health considerations listed in this section were gathered from multiple sources, including health organizations across the state, a review of existing literature and best and promising practices, and an extensive stakeholder engagement process. It is divided by general health consideration; example policies are listed below to address these topics as well as in the Appendix A.

SB 1000, “The Planning for Healthy Communities Act” requires cities and counties with disadvantaged communities to address certain health considerations within an Environmental Justice element or related goals, policies, and objectives. Since there is now a statutory requirement to address some of these health considerations including environmental health, food access, access to safe and sanitary homes, and access to physical activity, a full discussion is in Chapter 4 in the Environmental Justice Section.

Economics and Health

Increasingly, health is recognized as a vital component of human capital. Several measures of health and wellbeing are factored into the World Economic Forum Human Capital Report. Communities that have access to a wide array of resources have more
opportunities to experience healthier outcomes and attain their fullest potential. Disinvestment in communities may have the
opposite result, worsening health and safety outcomes. Land use planning can influence commute patterns and access to jobs,
while development projects may create job opportunities. General plan policies can impact the presence of anchor institutions,
such as universities, schools, medical facilities and/or clinics, and have a stabilizing effect on the local economy. Recently, the
San Francisco Federal Reserve Bank launched a nation-wide Healthy Communities Cross-sector Initiative to facilitate discussion
between community development partners and the health sector, seeking to improve investment in low-income communities and
improve health at the community level. New models, with a more integrated approach, continue to emerge and focus on measureable
and scalable results. Many of the models for economic development recognize the role of transit-oriented and infill development to
leverage resources and increase access to services and amenities to support healthy lifestyles for local community members that
work, live, and play in the surrounding areas.

Concurrently, land use patterns that promote healthier lifestyles can generate economic value. A synthesis of peer-reviewed
literature showed that open space for recreation and walkable communities create positive economic impacts. Recognizing the
power of healthy planning, the Urban Land Institute created a building healthy places initiative and recently published a series
of case studies from developments around the world featuring wellness factors including support of bicycling, built amenities to
support physical activity, and design to increase social interaction.

With changes in health policy, new incentives have emerged for workplace wellness programs, including opportunities to site
businesses near multi-modal transportation in a manner that encourages walking, increases activity through design, and improves
health in conjunction with workplace programs.

A Changing Climate & Resiliency

The natural environment supports human life. Humans, in turn, impact the natural environment. The most prominent example is
climate change caused by greenhouse gases (GHGs). Climate change can have devastating consequences on health due to physical or
mental harm or displacement from increased frequency or severity of disasters like flooding, drought, fire, and landslides. Climate
change may not only increase existing risks but will also pose new threats to human health. The California Department of Public
Health provides recommendations and publications dealing with health and climate change. While climate change will be one of the
biggest threats to public health for decades to come, land use planning can help communities prepare, adapt, and reduce GHGs that
cause climate change. The safety element already requires consideration of natural hazard areas, to avoid or mitigate for potential
hazards including fires, flood zones, earthquakes, and landslides. Explicit consideration of health issues provides an opportunity to
improve resilience of local communities, especially vulnerable populations.

Some health effects of climate change are already occurring due to increasing temperature. Temperature records continue to be
broken with increasing temperatures on record. Temperatures in urban areas can exacerbate already warm conditions due to
materials, such as asphalt absorbing heat and then releasing it, causing urban heat islands. Increased exposure to heat puts children,
elderly, and people with pre-existing health conditions at more serious risk to suffer from heat stroke and heat-related complications.
Studies show increased mortality during times of high heat. In fact, according to the Center for Disease Control, between 1979 and
2003, more people prematurely died from extreme heat-related illness than the total combined deaths from other natural disasters
including tornadoes, floods, earthquakes, hurricanes, and lightning.
Land use planning to reduce urban heat island effects is essential to creating more resilient communities. Increased urban greening and cool surfaces, which have a high-albedo effect, reflecting higher portions of radiation and thus absorbing less, can decrease temperatures and lessen the effects of extreme heat. Green roofs can also have health benefits by reducing exposure to heat with the added benefit of better air quality. Healthy tree canopies can also provide shade from heat, help with carbon capture, and improve air quality. Land use planning can also help to ensure the availability of water resources for cooling purposes.

With climate change, there is a growing recognition of the need to preserve limited resources such as water, fertile ground for agriculture, energy, and clean air. All of these actions are vital for human health.

Land use policies to promote efficient circulation, conservation, and recapture of water are needed for water conservation and drought mitigation. Additionally, it is important to control for pools of stagnant water. As water pools, without natural systems such as certain fish populations, there is an increased risk for mosquito reproduction. With higher mosquito populations, strong pesticides that can affect health are required to spray to contain mosquito populations. Scientists predict that vector borne diseases will change in the future as a result of climate change. More tropical diseases not previously experienced in California, such as dengue and yellow fever, may emerge. In 2013, the particular mosquito that carries dengue was found in California. Land use policies to conserve water and prevent large-scale stagnant pools will be key in combating and containing such health risks.

Climate change also has the potential to harm agricultural yields. Ensuring adequate food supplies to feed the population and avoid famines will require preservation of agricultural land. Land use policies that identify and avoid development on prime agricultural land are important to protect California’s food supply.

Energy conservation programs have potential health co-benefits. When developments are planned to use less energy they can reduce energy bills and allow families to use the savings towards other expenses. Additionally, energy efficiency measures may align with opportunities to improve indoor air quality, which can reduce costs of respiratory illness such as asthma.

Policies that continue to improve air quality—such as creating more public transportation options, zero emission vehicles, and bike and walk options for commuting—are all important to maintain air quality and promote public health for all segments of the community and particularly the most vulnerable.

Social Connection & Safety

The physical environment can have a significant impact on health and wellbeing, but the social structures and how community members engage within the physical space can be equally important. Feeling connected to neighbors, feeling safe in one’s home, and having a robust supportive social network affects physical and mental health. A neighborhood can be well designed and offer amenities, but if the local residents perceive the area to be unsafe, or there is a great amount of community violence or trauma, it will not be utilized to its full capacity. Design principles can be implemented with this in mind. Crime prevention through environmental
design (CPTED) examines environmental conditions that have unintended consequences on behavior. This field of research combines evaluations of place and human interaction. CPTED uses design elements to control access, provide more opportunities for passive observation of what is occurring in the area, and encourage civic engagement to maintain properties. An important aspect of implementing CPTED includes a wide, multi-sector-planning approach including law enforcement, for example—community engagement process to define the problems, opportunities, and solutions. Form Based Codes are another planning tool that focuses on design at a scale that incorporates more granular level changes, such as building facades and street level design. This also has potential to design elements to foster more social cohesion. Civic participation and social cohesion can be supported through the design of community spaces that provide engagement, access to learning opportunities, quality interaction of residents, multi-generational connections, public services such as libraries, and cultural and art facilities. Joint use agreements, also known as shared use agreements, with schools allow for another opportunity to collaborate with school districts, maximize resource utilization, and foster more activated spaces that otherwise would be empty during non-work hours.

A safe community with active streets includes protection from criminal activity, as well as from avoidable collisions. Many design elements such as narrower streets; appropriate lighting, improved signage, and slower speed limits can help reduce collisions. Traffic calming measures, complete streets, and improvement of physical infrastructure are important components of injury prevention. In fact, jurisdictions across the US and beyond have adopted Vision Zero efforts to aim for zero collision-related deaths through street design, engineering, and addressing driver related issues. As referenced in the circulation element, the California Complete Streets Act of 2008 (AB 1358) requires local jurisdictions, upon any substantial revision of the circulation element, to plan for a “balanced, multimodal transportation network that meets the needs of all users of streets, roads, and highways for safe and convenient travel in a manner that is suitable to the rural, suburban, or urban context of the general plan.” The circulation element provides an excellent opportunity to incorporate design for safety and multimodal use. The National Association of City Transportation Officials (NACTO) Street Design guidelines, formally endorsed by Caltrans in 2014, offer examples and a blueprint to guide complete street policy implementation, particularly around priority sites such as schools and daycare centers.

**Health & Human Services**

Hospitals and clinics are increasingly recognizing that where patients live, learn, work, go to school, and play affects their health and wellbeing. Through new paradigms and innovation, they are considering what community services are necessary to support health for individuals in their community. Non-profit hospitals conduct community health needs assessments as part of their community tax requirements and can reinvest into the community based on the assessment. Additionally, these reports prioritize key health needs for the catchment area and can provide useful information during the planning process. Increased access to health care, opportunities for physical activity, and healthy foods are key priorities that may be addressed in the general plan to improve community health. In addition, general plan policies may improve access to health services through integrated public transportation and provisions for access to broadband, allowing for telemedicine capacity.

General plan policies authorizing or promoting supportive housing can facilitate the integration of healthcare services into multifamily housing developments, especially for the elderly and disabled. A number of housing developments in major metropolitan areas include health clinics, and community spaces, and tenant services for special needs populations. Supportive services have multiple benefits, for both tenants and property management. Integrated service delivery plays a critical role with populations
at risk of homelessness or institutionalization. Healthcare providers have started to bring farmer’s markets and gardens on clinic and hospital premises to facilitate access to healthy food for their staff and patients.

Clinic locations, particularly federally qualified health centers, serve as important meeting points and service centers in case of a disaster. Having established systems in place to ensure access to routine services allow for a more robust and resilient system during times of emergency.

**Health Data and Mapping**

**Data, Mapping, and Tools**

Defining existing conditions is part of the general plan update. Incorporating health data creates an opportunity to conduct a more comprehensive existing condition analysis, while also providing baseline data to track progress, particularly for the social, economic, and environmental factors that can impact health. The housing element section includes analysis of community characteristics related to population characteristics, economic conditions and well-being, housing needs, and special populations. These issues all have health implications. As more and more local jurisdictions have started to incorporate explicit health considerations, geospatial data can be used to analyze health outcomes at a geographic level and to inform how health considerations might be incorporated or targeted. Additional tools such as walk audits, charrettes, community-based visual cataloging, and new crowd sourcing platforms can be an effective means of getting communities involved for more local and qualitative data. There are also resources to help find and utilize data for planning purposes, such as "Neighborhoods by Numbers: An Introduction to Finding and Using Small Area Data".lxix

Data is informing policy in innovative ways. Just as a physician would look at vital signs of a patient, cities and counties have started to look at vital signs or community dashboards that are reflective of the population’s health, social, economic, and environmental conditions. An important step in the process of incorporating equity considerations is to assess baseline conditions and acknowledge existing disparities. This type of analytic measurement can be particularly informative when examining areas that are disproportionately burdened by poor health outcomes to help target needed resources towards
more vulnerable populations. It can also provide a baseline for analytic discussion on location of services, where to prioritize new or update current infrastructure, and provide a means for tracking outcomes of development and infrastructure investments over time. A more in-depth discussion on supporting and engaging vulnerable populations is located in Chapter 4 and Chapter 5.

**Additional Health-Related Data Resources**

Many health, social, environmental, and economic indicators are available at the census tract level. Health departments also have access to local geospatial data on health outcomes and health determinants, occasionally at a more granular scale. Some health departments may already have reports prepared for their accreditation process that can be applicable to creating a baseline analysis for planning. It is helpful to consider variation within the data and to identify and address differences in health outcomes and the underlying reasons. Data needs and analysis will vary based on population characteristics and whether the area is rural or urban. Local outreach and experts involved in the update are able to help determine what data to prioritize in the analysis. Some additional health data resources include:

- **Community Health Needs Assessment**: This free web-based platform was created to assist community hospitals doing their needs assessment and provides census level data for health, economic, social, environmental, and behavioral data.

- **California Environmental Health Tracking Program**: This program is hosted by the CDPH. The data is more focused on environmental health impacts such as air quality, health, climate change related outcomes, water quality, and cancer prevalence.

- **Envirostor**: the Department of Toxic Substances Control hosts this program. It is a database that provides data in a GIS form to identify contaminated sites as well as facilities that deal with hazardous waste. This resource is important for remediation and siting.

- **CalEnviroscreen**: The Office of Environmental Health Hazard Assessment (OEHHA) in the California Environmental Protection Agency created this online mapping tool. It is a tool that can help identify communities that are burdened with high levels of pollution and/or are highly vulnerable to its effects. The tool also contains socioeconomic data.

- **Healthy Communities Data and Indicators Project (HCI)**: the California Department of Public Health (CDPH) hosts HCI. This indicator list provides evidence for links to health outcomes, data sources, and offers the ability to create maps.

- **California Health Interview Survey (CHIS)**: The largest state health survey in the nation, CHIS is a random phone interview administered by the UCLA Center for Health Policy in conjunction with the State Department of Public Health and the Department of Health Care Services. CHIS recently added new functions, available at the neighborhood level in certain jurisdictions, on health behaviors and conditions of relevance to planning for healthy communities.

- **Transportation Injury Mapping System (TIMS)**: TIMS was created and is maintained by University of California, Berkeley. It hosts data on injury and collision data.

- **Travel Surveys**: Both the California Household Travel Survey and the National Household Travel Survey contain important information on travel-related behavior.
- **California Protected Areas Data Portal**: This database provides a detailed GIS inventory of all parks and open space owned by agencies and nonprofits in California and serves as a resource to assess access and proximity.

- **Cal Brace Data**: The California Department of Public Health provides climate change and health profile data for counties. Data ranges from covering issues such as food insecurity to vector born illnesses and heat impacts.

- **The California Health Disadvantage Index**: This statewide tool is supported by the Public Health Alliance of Southern California and includes data. The data includes many social, economic, and environmental factors that impact health.

  *The City of Los Angeles created an interactive geospatial map of built environment and health conditions to inform the update of their general plan. A report was produced to inform community outreach, meetings, and policy formation.*

Sample of OPR Recommended Data for Consideration in Analysis of this Element

The health data resources listed above have some of the recommended data below. Other more granular data might be available through the local department of public health, the local air district, the metropolitan planning organization, water district, or business association.

<table>
<thead>
<tr>
<th>Intent of Analysis</th>
<th>Recommended Data</th>
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<tbody>
<tr>
<td>Life expectancy can be a good proxy for general health and well-being in the community. Many low-income areas suffer from early mortality and morbidity.</td>
<td>Life Expectancy at Birth</td>
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<tr>
<td>Asthma can be worsened by environmental triggers such as poor air quality, poor housing quality, and climate change, examining baseline conditions can help inform siting decisions.</td>
<td>Asthma (Prevalence, ED visits, hospitalizations)</td>
</tr>
<tr>
<td>Obesity is caused by many factors, but lack of access to healthy foods and physical activity are significant contributors. Examining baseline status can help with policy decisions around active transportation, recreation priorities, and food system policies.</td>
<td>Obesity (child and adult) prevalence</td>
</tr>
<tr>
<td>These diseases, also caused by many factors, are often associated with obesity. Examining baseline status can help with policy decisions around active transportation, recreation priorities, and food system policies.</td>
<td>Secondary diseases from obesity (high blood pressure, high cholesterol, heart disease, type 2 diabetes prevalence)</td>
</tr>
<tr>
<td>Many vehicle crashes involving pedestrians and bicycles could be improved through infrastructure, design, and signage. Examining a baseline can inform policy and planning for transit routes, active transportation, and safety.</td>
<td>Unintentional pedestrian and bicycle injury</td>
</tr>
<tr>
<td>Walk trips is a behavior that benefits health and is influenced by the environment. Examining a baseline number can help inform active transportation and for climate change and resiliency policy.</td>
<td>Walk trips per capita</td>
</tr>
<tr>
<td>Children walking, biking, or rolling to school is a behavior that can improve health and is influenced by the environmental conditions such as distance to school and safety. Examining the baseline condition can inform policy priorities around active transportation, active design, school siting, and housing siting.</td>
<td>Percent of children who walk, bike, roll to school</td>
</tr>
<tr>
<td>Commuting decisions are influenced by connectivity, cost and ease of use. Active transportation can have positive health benefits since people are able to achieve higher physical activity. Examining the baseline can inform policy priorities around active transportation, mixed use developments, job locations, and housing locations.</td>
<td>Percent of commuters who use active transportation</td>
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<tr>
<td>Eating more fruits and vegetables is a behavior that can be supported through more access to healthy, affordable options. Examining a baseline condition can inform policy around food systems and location of services.</td>
<td>Consumption of daily fruits and vegetables</td>
</tr>
<tr>
<td>Having access to adequate, affordable, and healthy food is important to health. Examining a baseline condition of those suffering from food insecurity can inform policy around food systems and location of services.</td>
<td>Self-reported food insecurity</td>
</tr>
<tr>
<td>Understanding the poverty conditions can help focus resources and policy development to areas that need additional support. This is important for various issues such as ability to afford healthy food.</td>
<td>Poverty data for population below 200% of the Federal Poverty Level</td>
</tr>
<tr>
<td>Income is an important predictor of health outcomes. Access to job opportunities as well as job/housing/work force fit can inform transit lines, housing location, and where jobs are incentivized to locate.</td>
<td>Employment Density (example: Trade Transportation, utility, leisure, hospitality, goods producing, government, education, real estate, finance, health services)</td>
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<tr>
<td>Mapping baseline food retail and access conditions can identify areas that might not have adequate access and inform policy priorities and decisions for siting.</td>
<td>Food retail, community garden, and farmer market location</td>
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<tr>
<td>Creating an inventory of available vacant public and private lands can help identify lands for conversion into community gardens, urban farming, or small parks.</td>
<td>Number of unused or under-utilized property per tax assessor records</td>
</tr>
<tr>
<td>This can help identify vulnerable populations, in conjunction with the poverty data above.</td>
<td>Uninsured population data</td>
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<tr>
<td>Intent of Analysis</td>
<td>Recommended Data</td>
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<tr>
<td>Mapping baseline walk and bike conditions can help create a more connected network for improved use.</td>
<td>Walk and bike maps</td>
</tr>
<tr>
<td>Mapping baseline transit conditions can help identify areas that could benefit from improved transportation options</td>
<td>Public transit facilities</td>
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<tr>
<td>Safety in the neighborhood can impact social stress and influence whether people will be active. Establishing a baseline condition can help inform safety policies such as crime prevention through environmental design</td>
<td>Percent of people that feel safe in their neighborhoods</td>
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<tr>
<td>Neighborhood parks contribute important health and community well being benefits, when they are located nearby. Examining the proximity of people to parks can identify areas for future park investment, especially where there is no park within walking distance, or within 1/2 mile.</td>
<td>Inventory of parks and protected open space</td>
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<td>This can be assessed to track and analyze risk of displacement</td>
<td>Housing cost burden</td>
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<tr>
<td>Air quality has direct effects on people with respiratory disease. Mapping baseline conditions can help inform policies around transportation, connectivity, siting, and industry.</td>
<td>Air quality (ozone, pm 2.5)</td>
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<tr>
<td>Extreme heat days and heat island effects can cause illness and even death in extreme circumstances. Monitoring heat days and areas with worse heat effects can help inform policies around transit, greening, materials, and programs to mitigate its effects.</td>
<td>Extreme heat days, heat islands effects</td>
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<tr>
<td>Urban tree can have multiple benefits for air quality, shade for easier time spent outdoors for commuting and recreation, and even new research on the benefits of mental health and mood. Establishing a baseline can help inform policy for transit, roadway, recreation, and bike and pedestrian planning.</td>
<td>Urban tree canopy</td>
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<tr>
<td>Health facilities provide daily services and often serve the community in disaster. Establishing a baseline of where services are located can help improve transit decisions, siting, and emergency preparedness planning.</td>
<td>Location of health facilities</td>
</tr>
<tr>
<td>Mapping where schools and child facilities are can provide an important baseline. This can inform policies to leverage joint use agreements, ensure they are accessible and free from newly sited environmental hazards.</td>
<td>Location of schools, child care facilities</td>
</tr>
<tr>
<td>How much people drive is a proxy to understand how active community members are. New research suggests that the amount of time spent in a vehicle may have potential effects on mental and physical health.</td>
<td>Vehicle Miles Traveled (VMT)</td>
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<tr>
<td>How much the local community is civically engaged can be a measure of how activated the community is</td>
<td>Voting rates</td>
</tr>
</tbody>
</table>
# OPR Recommended Policies

These policies are an example of recommended policies adopted by varying jurisdictions, to be modified and used as appropriate. A full list of recommended policies can be found [here](#).

<table>
<thead>
<tr>
<th>Policy</th>
<th>Example</th>
<th>Relation to other elements</th>
</tr>
</thead>
<tbody>
<tr>
<td>[City, County] shall promote uses that address daily needs within the [city, county] City and close to neighborhoods, reducing the need for residents to travel long distances to access jobs, goods and services.</td>
<td>City of Arvin</td>
<td>Circulation, land use, housing, economic development, equitable and resilient communities, climate change</td>
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<td>[City, County] shall encourage development that reduces VMT, decreases distances between jobs and housing, reduces traffic impacts, and improves housing affordability.</td>
<td>County of Sonoma</td>
<td>Economic development, equitable and resilient communities</td>
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<td>[City, County] shall plan for the public health implications of climate change, including disease and temperature effects.</td>
<td>County of Marin</td>
<td>Climate change, EJ, equitable and resilient communities, land use</td>
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<td>[City, County] shall encourage the development of complete neighborhoods that provide for the basic needs of daily life and for the health, safety, and mental well-being of residents.</td>
<td>County of Riverside</td>
<td>Circulation, land use, equitable and resilient communities</td>
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<td>[City, County] shall implement policies and programs that encourage bicycling and walking as alternatives to driving and as a means of increasing levels of physical activity. Encourage bicycle and pedestrian safety through education and incentive programs.</td>
<td>City of El Monte</td>
<td>Circulation, land use, housing, economic development, climate change, EJ, equitable and resilient communities</td>
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<td>[City, County] shall invest in community planning efforts that aim to reverse trends of community deterioration and blight which lead toward the decline of personal and property safety within the [city, county] community districts.</td>
<td>County of Kings</td>
<td>Economic development, equitable and resilient communities, land use</td>
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<td>The attraction and retention of high quality grocery stores and other healthy food purveyors should be pursued as an economic development strategy for the [city, county]. Healthy food outlets include full-service grocery stores, regularly-held farmer’s markets, fruit and vegetable markets, and convenience stores or corner stores that sell a significant proportion of healthy food.</td>
<td>The City of South Gate</td>
<td>Economic development, EJ, equitable and resilient communities, land use</td>
</tr>
</tbody>
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