

# Welcome and Introductions



# Review of Meeting Goals

- **Meeting Goals:**
  - Increase relationship-building among peer leaders across four BHC sites
  - Increase understanding of the opportunities created by and implications of placing health & equity at the center of local planning and policy work, drawing from Richmond and other place examples
  - Increase understanding of promising strategies and approaches to engage multiple and diverse constituencies in healthy planning work
  - Identify areas for continued learning, sharing and dialogue for advancing the field

# Overview

10:00 – 10:20	Welcome & Introductions
10:20 – 10:30	Review of Meeting Goals and Agenda
10:30 – 11:45	The Richmond Example
11:50 – 12:15	<i>Break &amp; Get Lunch</i>
12:15 - 1:00	Updates from Coachella, Salinas and Santa Ana
1:00 – 2:00	Small Group Peer Discussion
2:00 - 2:20	Large Group Sharing on New Insights, Connections
2:20 – 2:45	Next Steps for Continued Learning, Sharing and Partnership
2:45 – 3:00	Evaluation

# Background



# Richmond General Plan 2030

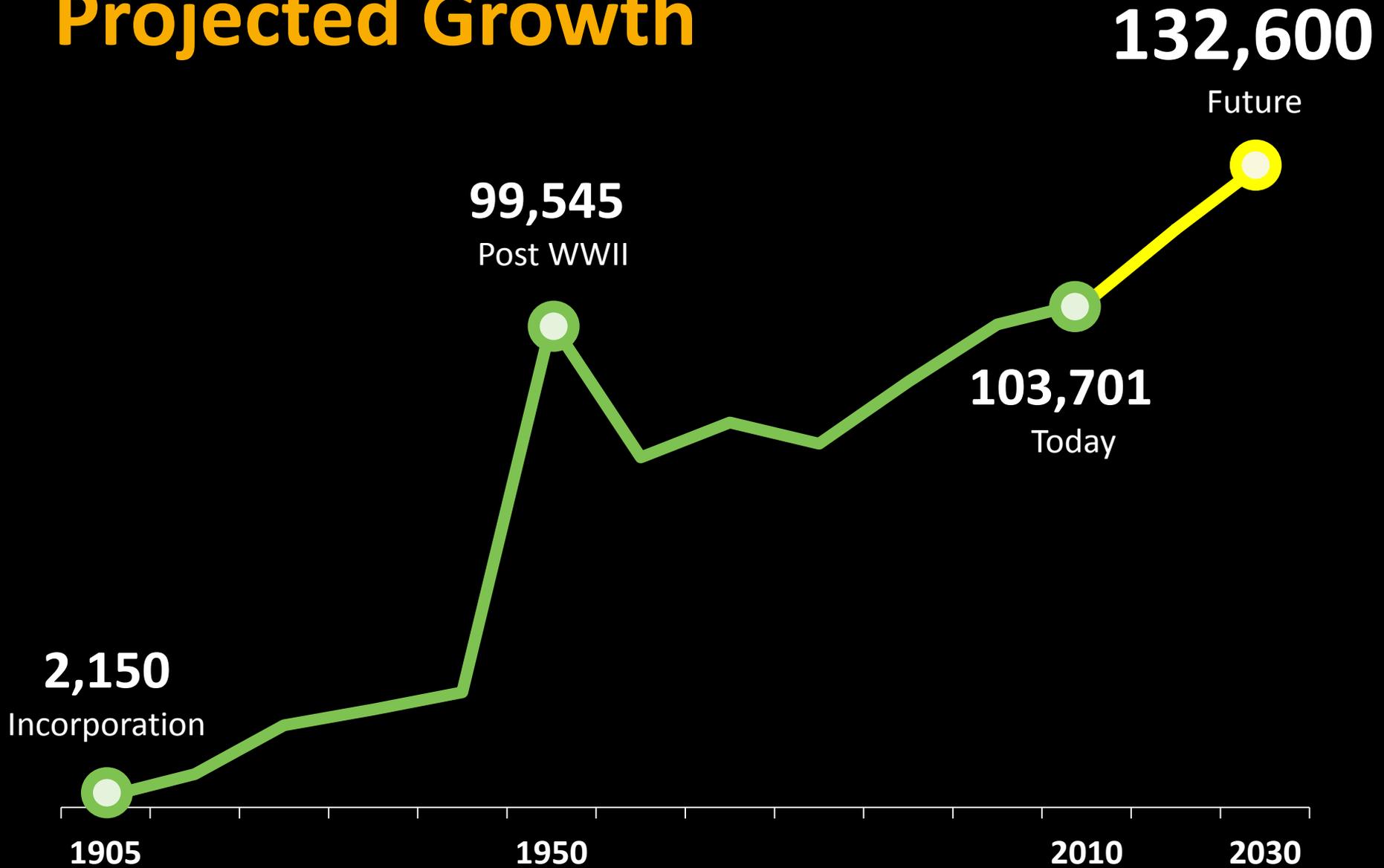


*Shaping the new 100 years*

**RICHMOND GENERAL PLAN 2030**

FINAL PUBLIC REVIEW DRAFT - AUGUST 2011

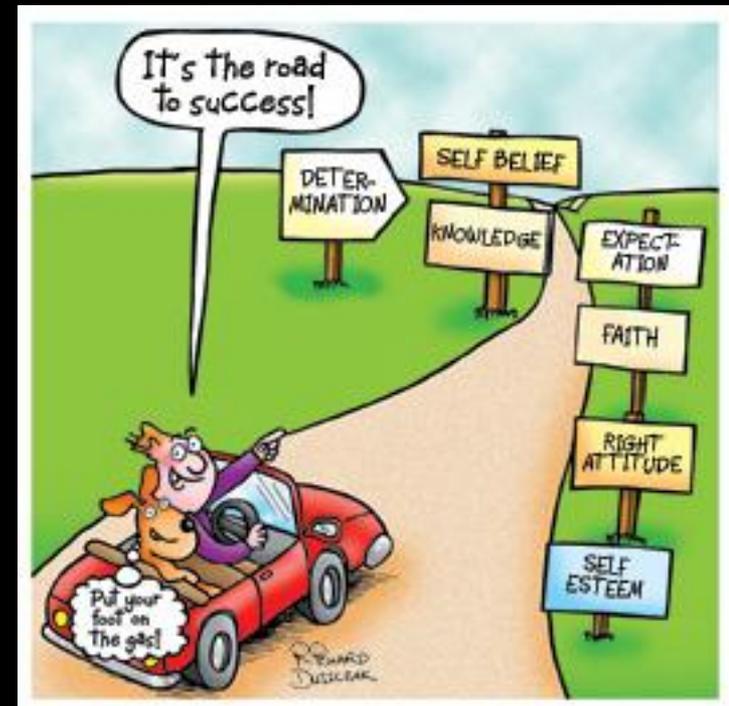
# Projected Growth



Source: ABAG, 2009

# A General Plan is a Vision...

- Constitution for long-term growth & development
- Broad policy framework for decision-making
- Expresses a vision for the future based on community values



*A "roadmap" to future*

# Framework for an “Inclusive City”



# 15 General Plan Elements

## Part I - Economic Environment

- Economic Development
- Education & Human Services

## Part II - Physical Environment

- Land Use & Urban Design
- Circulation
- Housing (Fall 2012)
- Community Facilities & Infrastructure
- Conservation, Natural Resources, & Open Space
- Energy and Climate Change
- Growth Management

## Part III - Social Environment

- Parks & Recreation
- Community Health & Wellness
- Public Safety & Noise

## Part IV - Cultural Environment

- Arts & Culture
- Historic Resources
- National Historical Park

# Community Visioning Process

Meeting & Events	
City Leadership Interviews	30
Focus Group Meetings	8
Plan Van Outings	35
Community Visioning Workshops	18
Community Group & Stakeholder Meetings	30
Board & Commission Meetings	15
GPAC & TAC Meetings	22
<b>Total:</b>	<b>158</b>



Community Workshop



The Plan Van

# General Plan Update (2030)

## Community Health and Wellness Element

### COMMUNITY PLANNING OBJECTIVES





Convenient access to open space can improve physical health and facilitate stress reduction.

### Goals

#### GOAL HW1

#### GOAL HW2

#### GOAL HW3

#### GOAL HW4

Richmond Community and Wellness Element  
Goals → Policies → Actions



### GOAL HW1

Improve Access to Parks, Recreation and Open Space

### IMPLEMENTING ACTIONS

#### Policy HW1.1

#### Policy HW1.2

#### Policy HW1.3

#### Policy HW1.4

#### Policy HW1.5

#### Action HW1.A

##### **Park Master Plan**

Regularly update the comprehensive long-range parks master plan to address changing recreation interests, trends, needs and priorities. The parks master plan should:

- Identify long-term goals for the Parks and Recreation Department and the community;
- Describe current and future needs, interests and community preferences for improving new parks and community facilities, and expanding or initiating new programs and services;
- Present a long-range plan for physical park and community facility improvements;
- Refine performance standards and further develop park design guidelines and criteria;
- Prioritize projects; and
- Outline funding mechanisms and strategies for managing the City's commitments so that new requests and initiatives are considered in light of existing commitments.

The City should seek input from residents of diverse backgrounds during preparation of the Plan (see also Park and Recreation Element, Action PR1.C).

#### Action HW1.B

##### **Parkland Dedication and Fees and Parkland Loss Prevention**

Revise the Subdivision Ordinance to require new development and redevelopment projects to provide park and recreation opportunities to maintain a 3.0 acres per 1,000 population standard in applicable planning areas through a combination of parks as defined in the Parks and Recreation Element. Parkland dedication should be given priority over impact fees.

Include provisions that prevent a net loss of parklands in the City. Require at least a 1:1 replacement if there is any loss of public open space or parkland due to redevelopment (see also elements: Park and Recreation, Action PR1.H; Conservation, Natural Resources and Open Space, Action CN2.C).

# Lessons Learned

## RICHMOND HEALTH AND WELLNESS ELEMENT IMPLEMENTATION TARGETS

## PROCESS

## OUTCOMES



Inputs

Actions

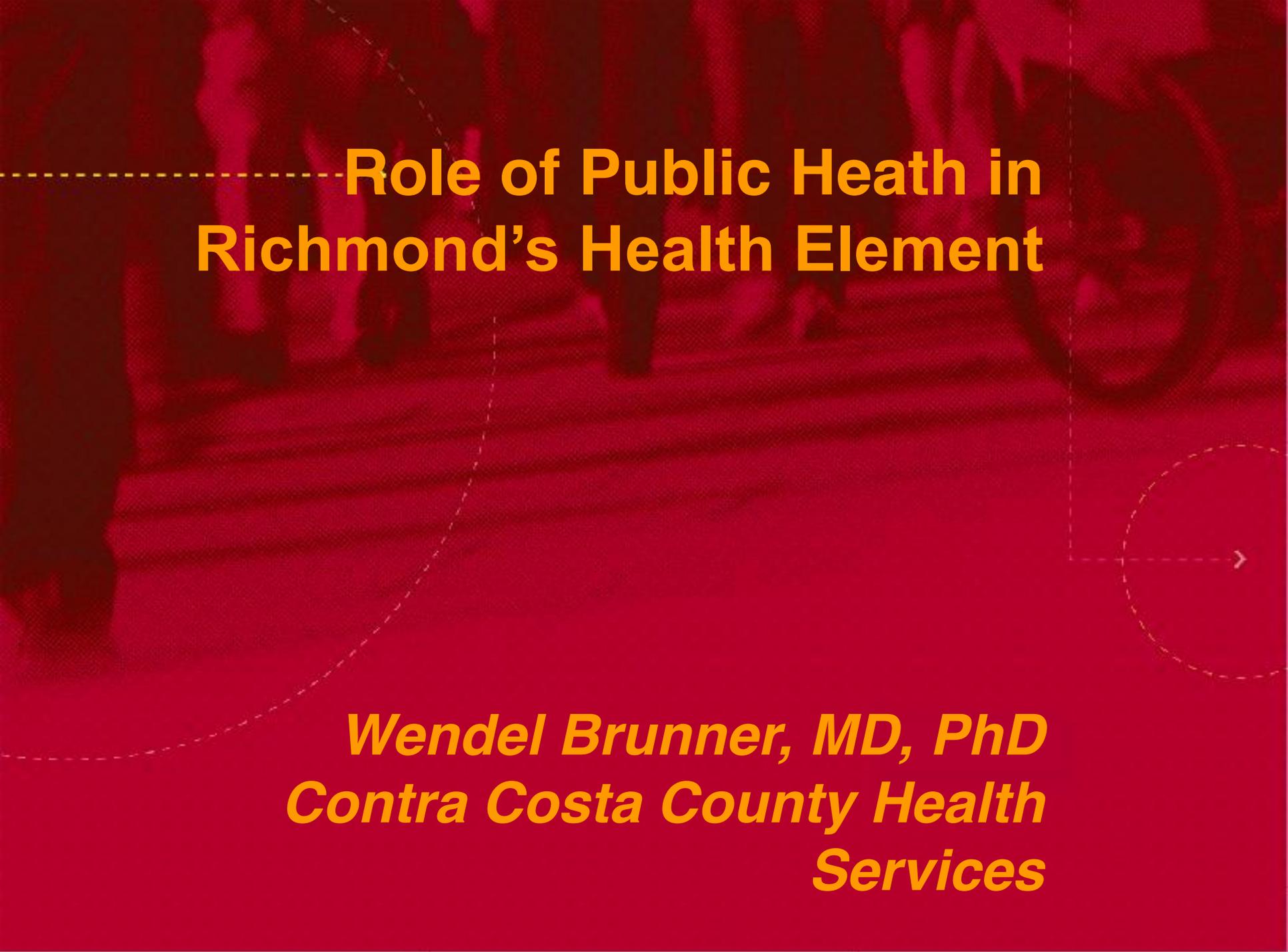
Policy  
Outcomes

Community  
Outcomes

Health  
Outcomes

time

Richmond Community Health and Wellness Element:  
Changes over Time



# **Role of Public Health in Richmond's Health Element**

***Wendel Brunner, MD, PhD  
Contra Costa County Health  
Services***

# Roles of Public Health in the General Plan

- Technical and policy input
- Credibility of public health professionals in framing planning discussion

# Role of the County Health Department in the General Plan

Technical and policy input

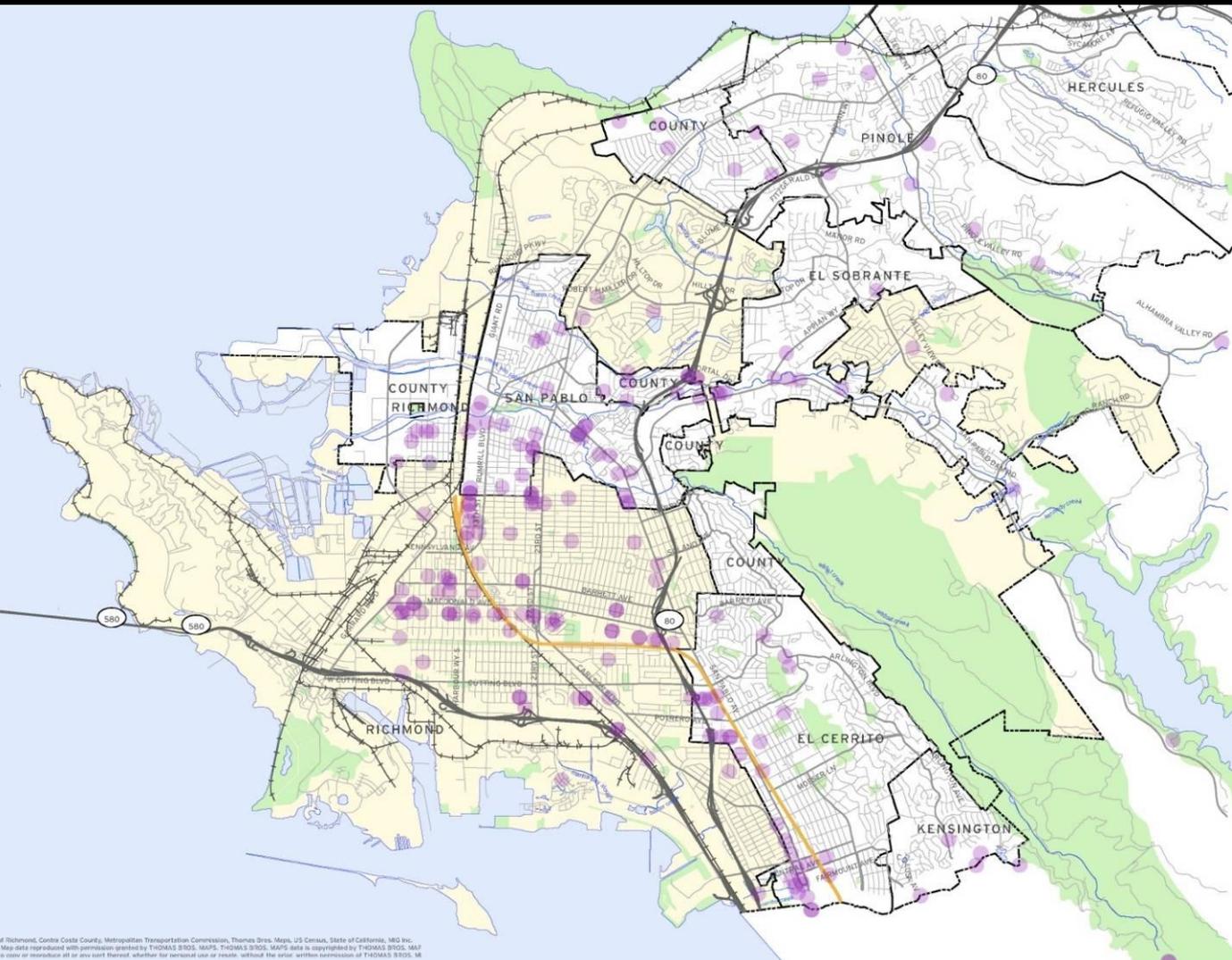
Community Liaison

Leadership in implementation

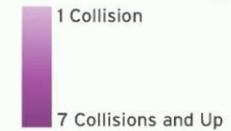
Funding and support for programs

## 4.E.i. Pedestrian Collisions

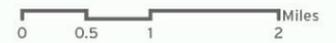
Locations of pedestrian collisions



**Pedestrian Collisions (Jan 2002-July 2005)**



Source: City of Richmond, Statewide Integrated Traffic Records System (SWITRS), California Highway Patrol  
Map Prepared By: MIG, Inc. (April 2007)



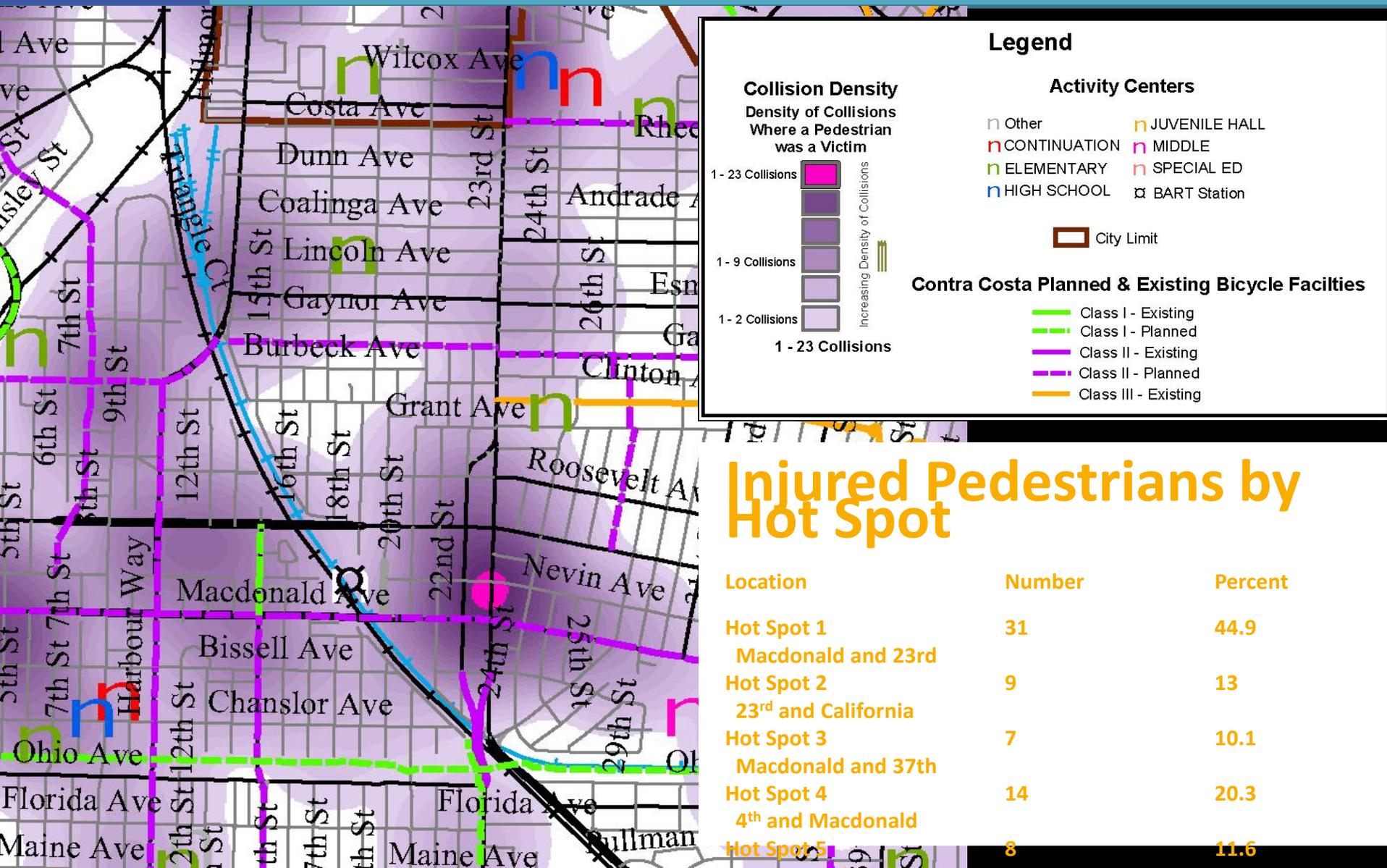
**RICHMOND**  
SHAPING THE NEW 100 YEARS



# 23RD STREET

# Richmond Pedestrian Project

## Pedestrian Collision Data 2002 to 2005



## Injured Pedestrians by Hot Spot

Location	Number	Percent
Hot Spot 1 Macdonald and 23rd	31	44.9
Hot Spot 2 23rd and California	9	13
Hot Spot 3 Macdonald and 37th	7	10.1
Hot Spot 4 4th and Macdonald	14	20.3
Hot Spot 5	8	11.6

# Integrate Funding from Other Programs

Injury

Asthma

Nutrition

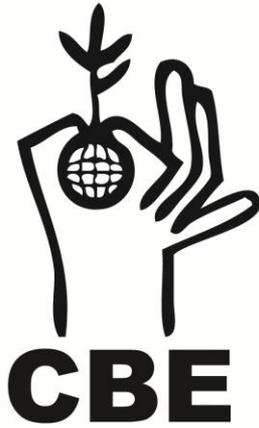
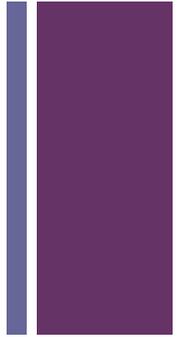
Obesity



**“Yummy! Let’s have these delicious fruits and veggies in our schools everyday”**

*Source: HEAL Photovoice*

# + REDI Partners

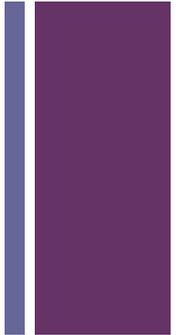


# + REDI GP Policies

- Economic Development Element
  - local hire policy
- Land Use Element
  - anti-displacement policy
- Circulation Element
  - more and better mass transit
- Energy and Climate Element
  - promote green industrial growth
- Health and Wellness Element
  - update air quality monitoring



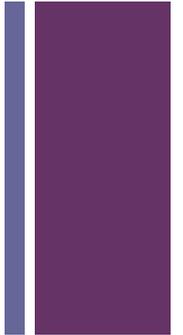
# + Leadership Institutes



planning charettes



# + Inside/Outside Strategy

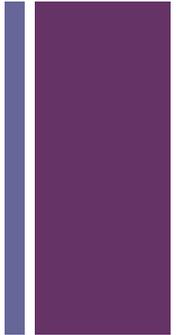


rally outside city hall



meeting with city officials

# + Policy Forums



# + Civic Engagement



APEN Planning Commission testimony

# + Mobilization = People Power





For a  
Better  
Richmond,  
  
Pass the  
General  
Plan!

REDI  
Richmond Economic Development Initiative  
www.redi.org

CBE  
www.cbe.org

CBE  
www.cbe.org

CBE  
www.cbe.org

# + Lessons Learned

- Resident engagement throughout campaign during
- Build relationships with local government
- Ally relationships vital
- How to engage the opposition



# + Next Steps

- GP policy implementation and monitoring
- Housing element campaign



# Timeline of RHEP, Healthy Richmond, and CHWE



**2005:** Richmond's Community Health and Wellness Element (CHWE) is first conceived. Once completed, the CHWE will become the first standalone element in a CA jurisdiction's General Plan that addresses the relationship between public health and the jurisdiction's social, economic, and physical environments.

**2008:** City launches CHWE implementation planning and pilots in Iron Triangle and Belding Woods neighborhoods. Focus areas identified: 1) Citywide policy and systems implementation; 2) Neighborhood improvement strategies; 3) Data collection, indicators developments, and measurement of success; and 4) Community engagement.

**July 2009:** City began planning with project partners to identify needs and opportunities for collaboration. Partners included Contra Costa Health Services, MIG, and PolicyLink.

**Oct 2009:** First community workshops are held in pilot neighborhoods to get input on potential improvement projects, programs, and services that would address health outcomes.

**April/May 2011:** The City releases report summarizing recommendations for selection of indicators and implementation of data and info tracking systems.

**April 24, 2012:** Richmond City Council adopts the 2030 General Plan and the Health and Wellness Element.

## City of Richmond Community Health & Wellness Element Implementation (2005-ongoing)

## Building Healthy Communities Initiative: Healthy Richmond Project (2010-2020)

## Richmond Health Equity Partnership (Feb 2012-Jan 2014)

**Spring 2009:** CE selects Richmond as BHC project site; convenes the community-wide steering committee to manage planning process.

**Feb 2011:** USC/Community Housing Development Corp. is chosen to serve as Hub Host.

**Oct 2011:** Hub Steering Committee is convened; comprised of 25-members including community residents, CBOs, faith-based orgs, health systems, and public agencies and institutions.

**May 2012:** HiAP subcommittee is convened; led by City of Richmond and Prof. Jason Corburn.

**Oct 10, 2012:** FSCS resolution approved by WCCUSD Board.

**June 2012:** Health Equity Data, Training, and Report Card subcommittee is convened; led by CHS.

**Sept 2012:** FSCS subcommittee is convened; led by WCCUSD.

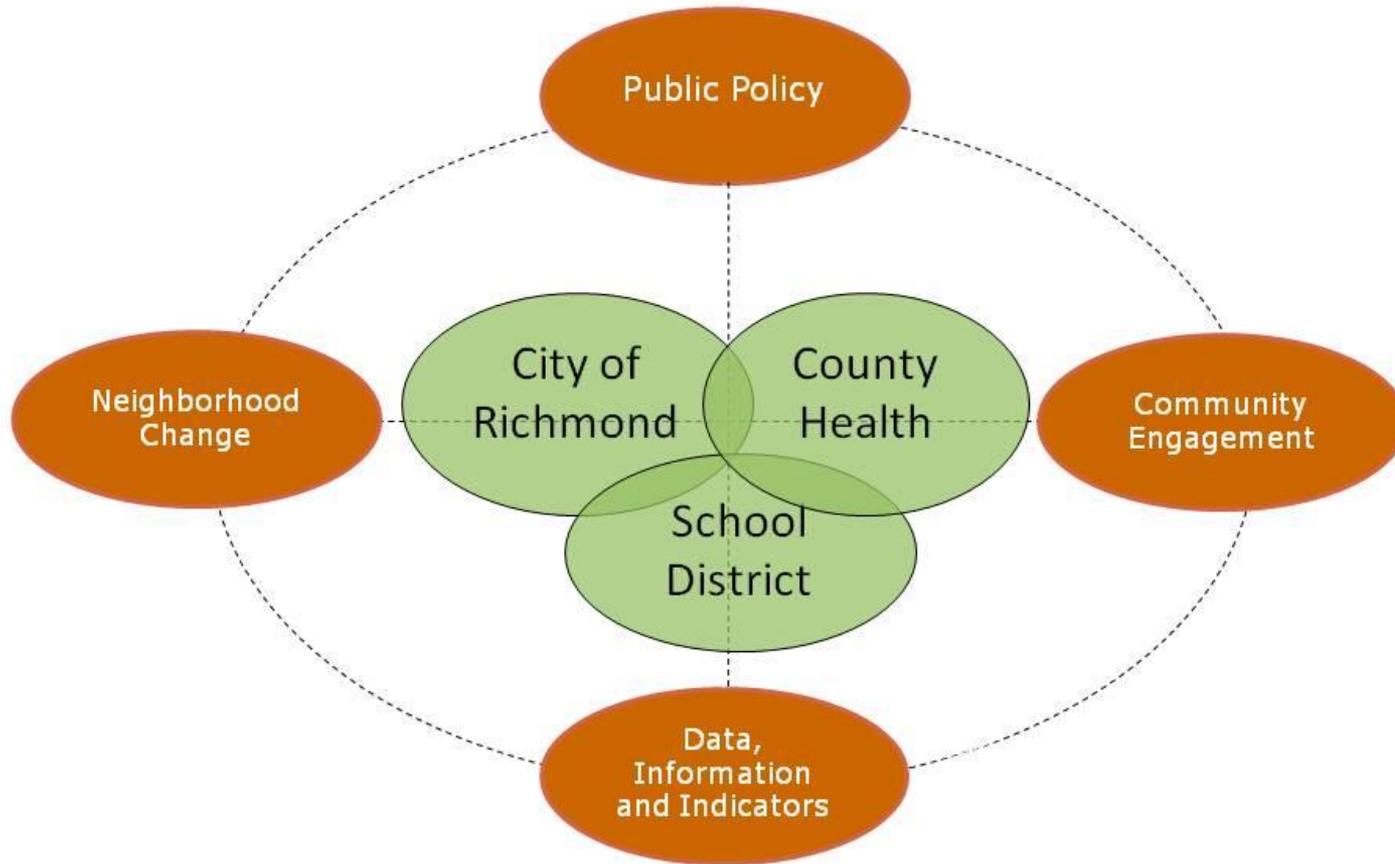
**July 2009-Nov 2010:** Planning phase. Steering Committee interviews hundreds of local stakeholders to explore health equity issues related to CE's 2010 outcomes; creates Logic Model focusing on 4 priorities:

- Families have improved access to a health home that support healthy behaviors.
- Children and their families are safe from violence.
- School and neighborhood environments support improved health and healthy behaviors.
- Community health improvements are linked to economic development.

**Feb 2012:** CE approves RHEP work plan. Objective: Develop collaborative partnership between City of Richmond, Contra Costa Health Services, West Contra Costa Unified School District to advance health equity for children and families in Richmond through the development of the Health in All Policies (HiAP) strategy, Full-Service Community Schools (FSCS) strategy, and the Health Equity Report Card to create a model for replication in other cities and areas of West Contra Costa County.

# HWE Implementation

## Framework for a Sustainable Implementation

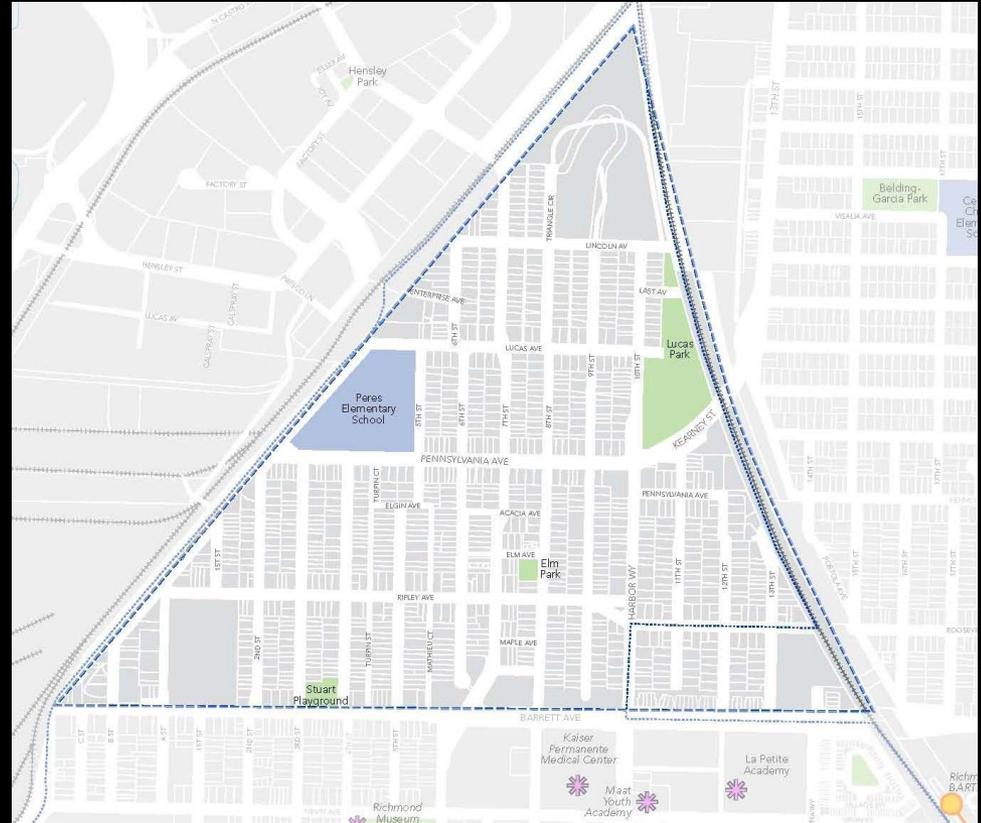


# HWE Implementation



# Health and Wellness Implementation

- **School Based Approach**
  - Neighborhoods chosen by school catchment areas
  - Elementary Schools
  - Places facing health disparities



**Iron Triangle**

# Community Engagement and Implementation



# Implementation: Built Environment Improvements



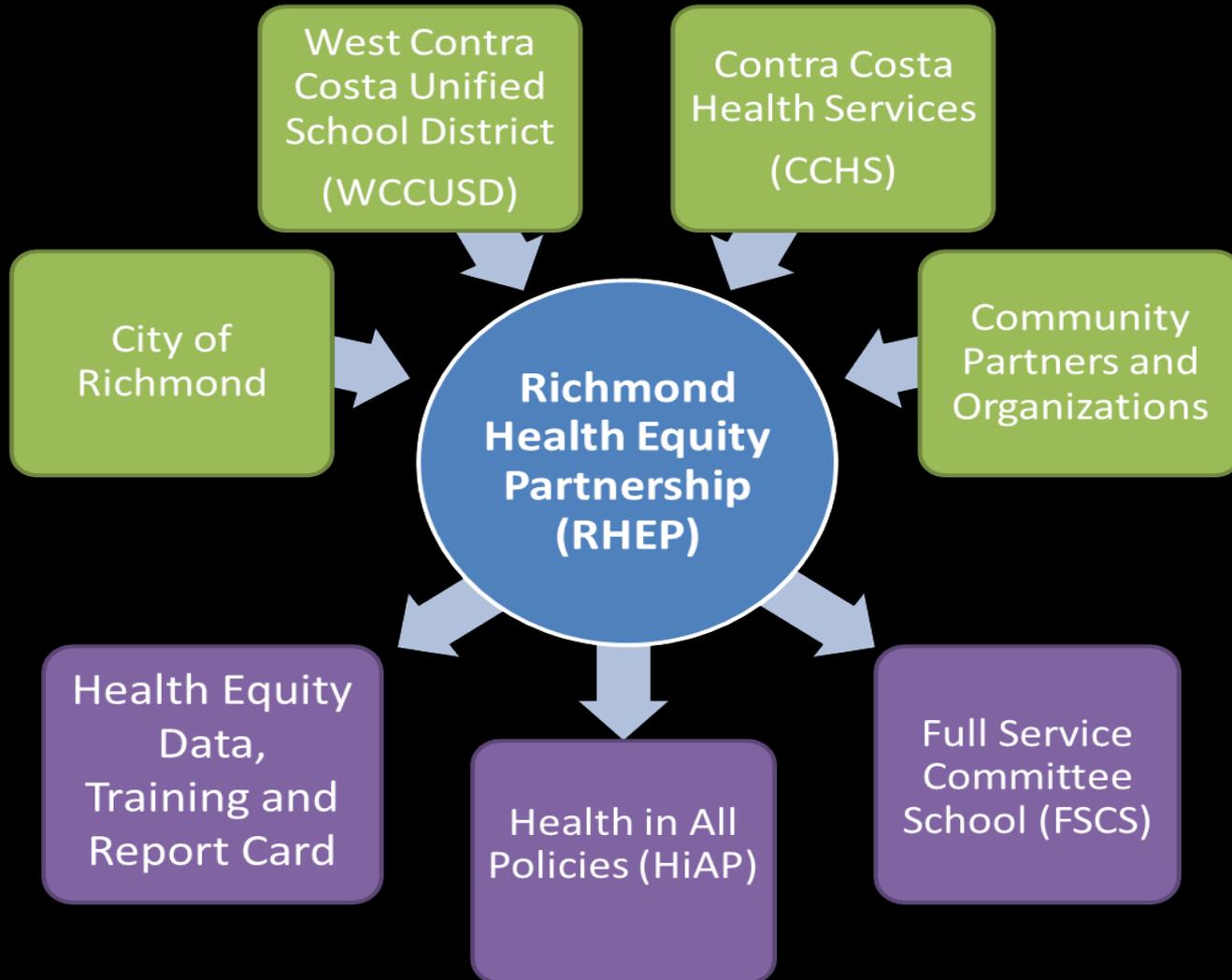
# HWE Implementation: Some findings

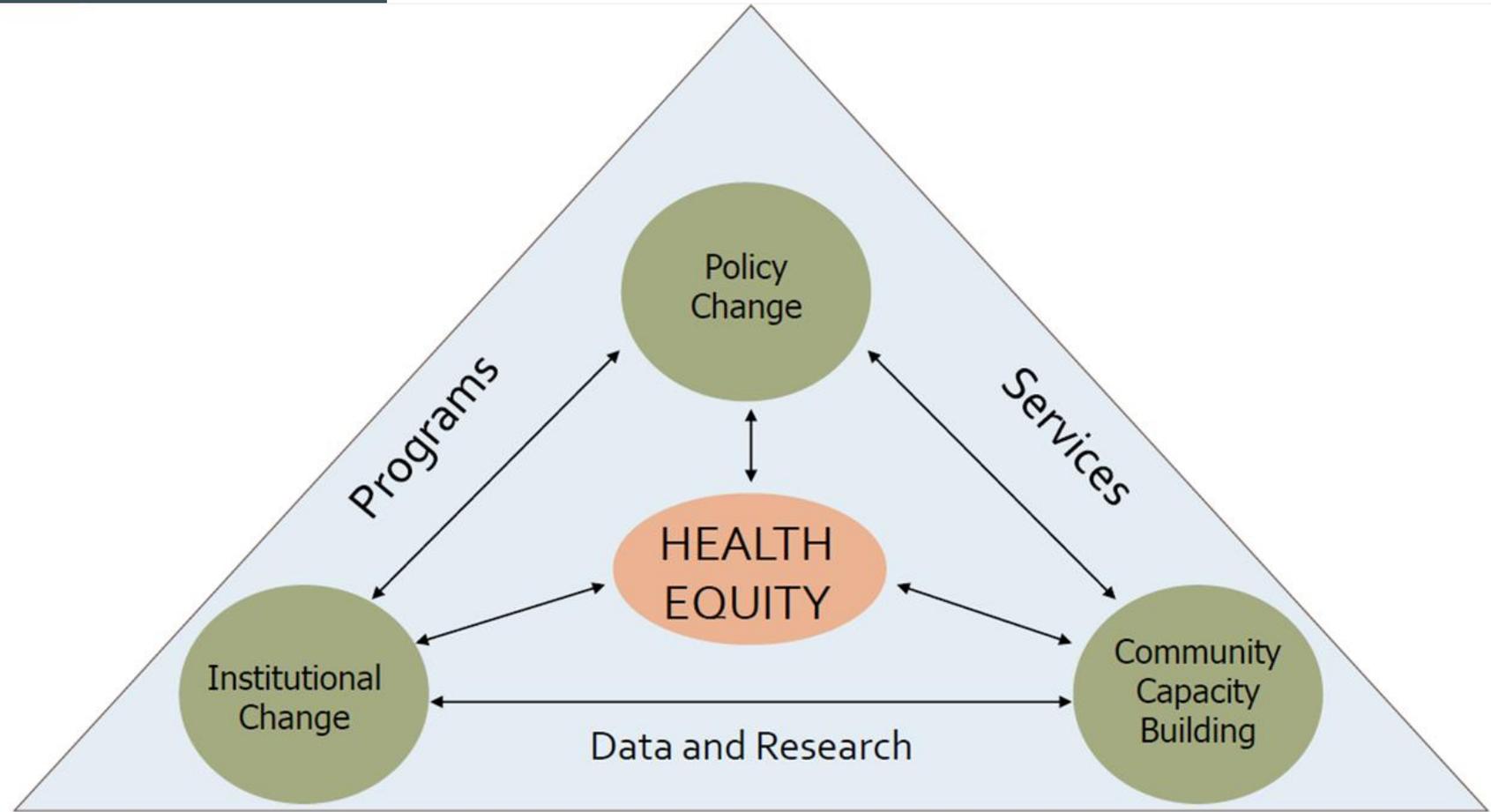
- ✓ **New knowledge & leadership in City & County**
- ✓ ***Bonding & bridging* capacity necessary**
- ✓ **New commitment to on-going learning**
- ✓ **Integrated process for place-based, policy & monitoring work**
- ✓ **Identified gaps: School district, health care providers, Promotoras, explicit attention to structural racism**
- **Limited engagement w/broad range of CBOs**
- **Unclear integration with other (county) health promotion activities**
- **Institutionalizing work – what happens when key staff leave?**
- **Limited progress on measuring success: how do we know if getting more healthy & equitable?**

# HWE Implementation: Some additional findings

- ✓ **New staff hired in City; driving agenda**
- ✓ **City Mgr. - coordinated integration of health equity**
- ✓ **New linking & leveraging b/t County & City**
- ✓ **Experimenting with new health promotion practices (i.e. HIA, HiAP, data tracking/neighborhood profiles; policies)**
- ✓ **Elementary School pilot sites – catalyze new community/parent engagement; rebuilt trust b/t community & city**
- **Could have linked/learned from & with Bay Area, State, Federal health equity efforts**
- **Limited exploration of how existing regulatory processes (CEQA, zoning, etc.) could be used to promote greater health equity**

# Richmond Health Equity Partnership (RHEP)

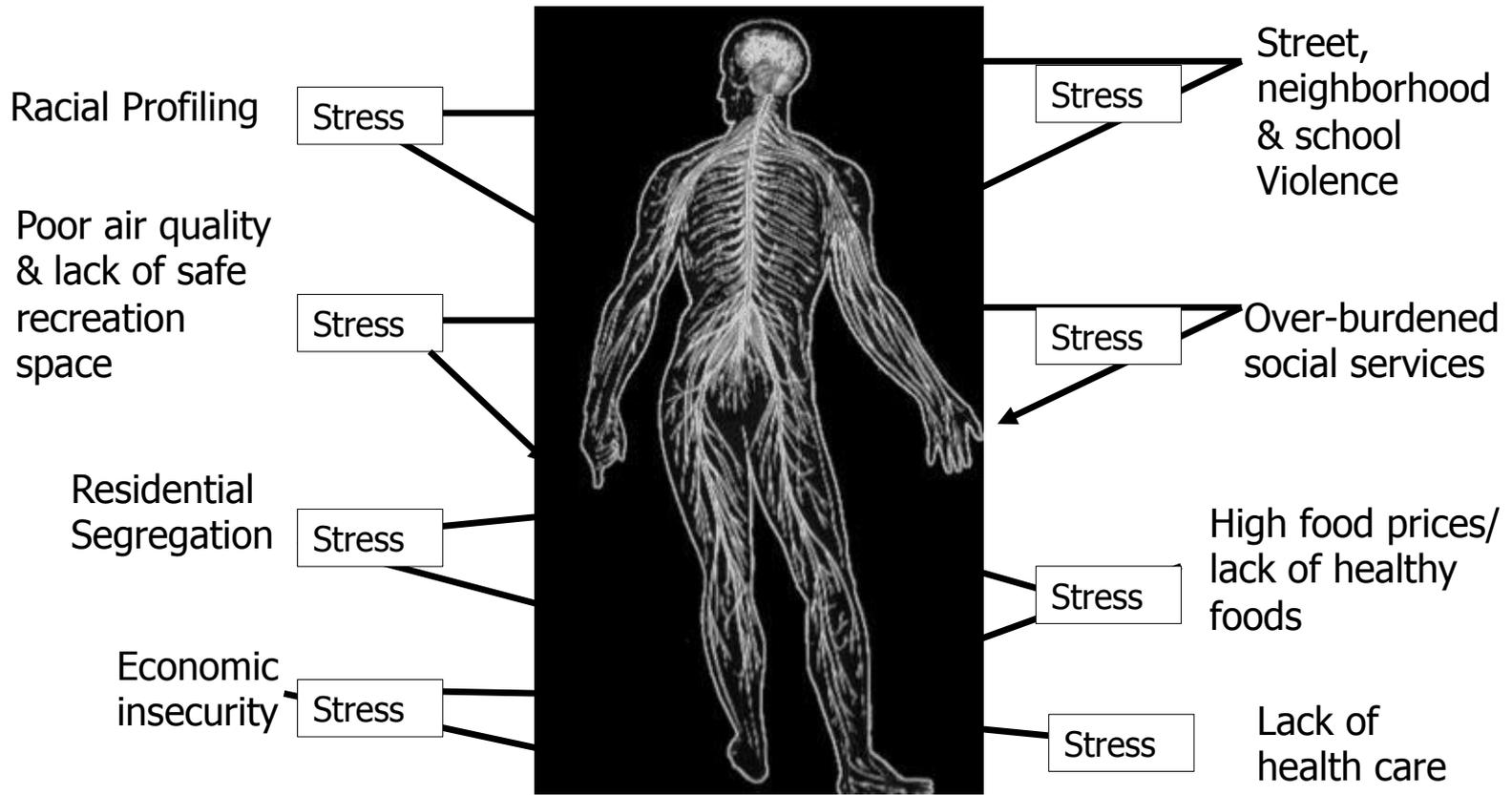




# Model of Change

# Cumulative Stressors on some Richmond residents

Chronic stress has known physical and mental health impacts, from clogging arteries and heart disease, to overweight & diabetes to chromosome damage and premature aging.



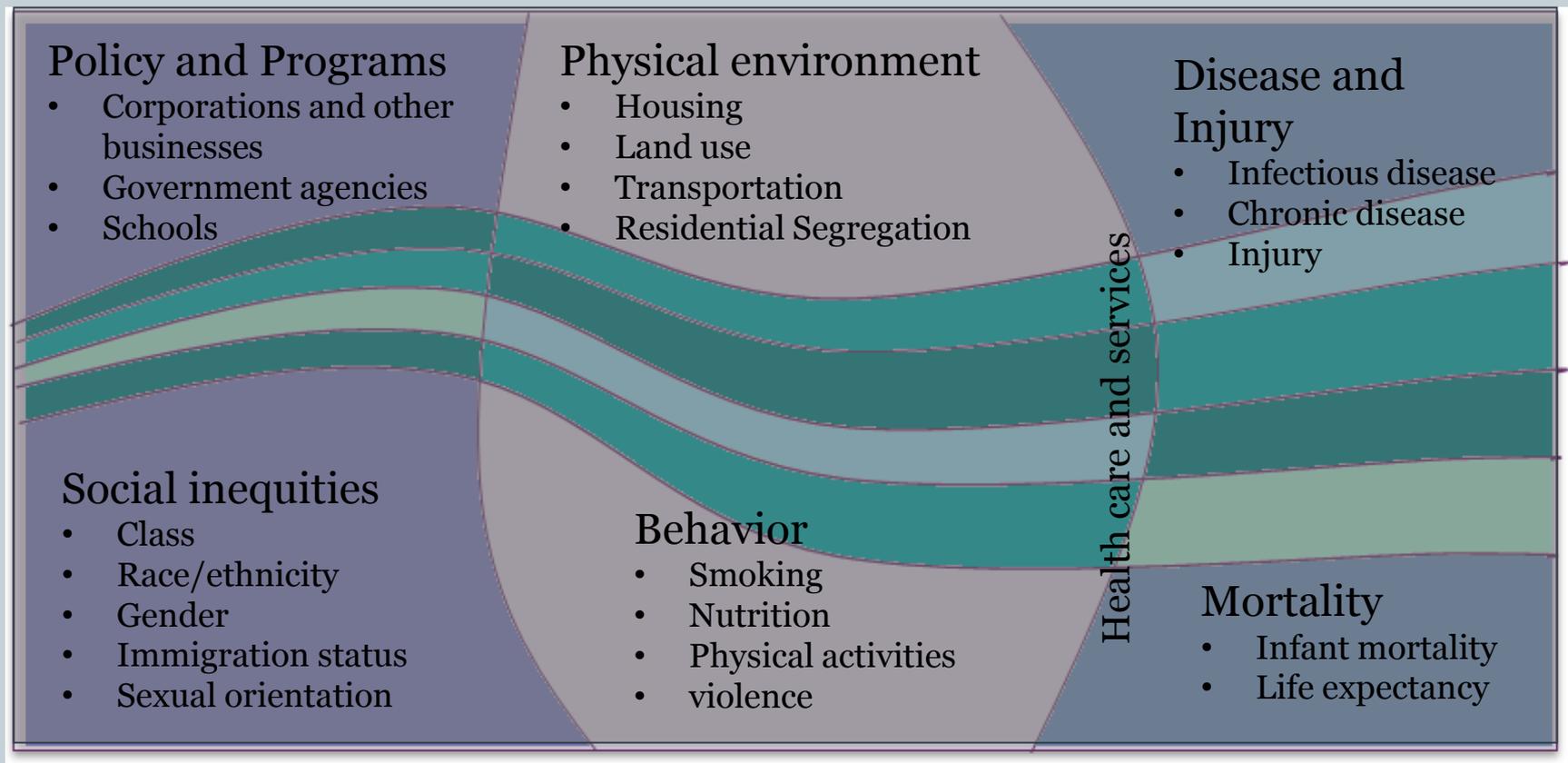
# Where to Intervene: Upstream v. Downstream



Upstream

Midstream

Downstream

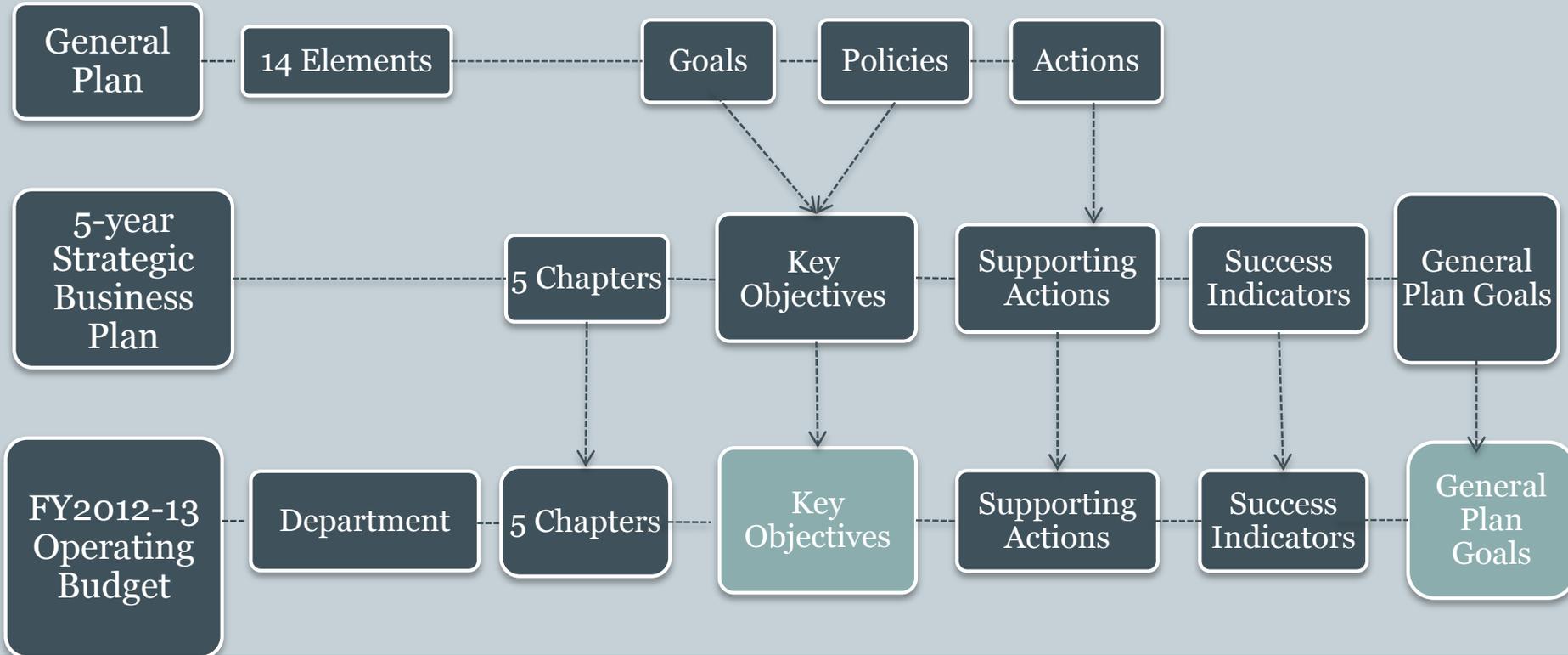


Government, Schools, CBOs --> Parks & Housing -----> Hospitals & Clinics

# Aligning existing City plans with HiAP

47

- There is no formula or right way to implement HiAP



# WCCUSD Board of Education FSCS Resolution

48



**West Contra  
Costa Unified**  
SCHOOL DISTRICT

# Discussion

