Healthy Community Design

Overview

Planners, in collaboration with public health advocates, are returning to our roots by intentionally designing communities to promote public health, safety, and welfare. Community health—once the primary purpose for planning and zoning—became an afterthought in our design of built environments to better accommodate cars than people. Healthy community initiatives nationally, and here in Vermont, are once again bringing public health considerations to the fore, by re-establishing community health as a contemporary, increasingly relevant reason for good community design.

This topic paper supplements and draws from the more comprehensive Vermont Healthy Community Design Resource: Active Living and Healthy Eating, issued by the Vermont Health Department. Health advocate interest in planning and community design stems from growing concern about the rising rates of chronic illness in modern society. Unhealthy eating habits and sedentary lifestyles are significant contributors to rising rates of obesity, diabetes and the persistence of chronic diseases. The Vermont Health Department’s “Fit and Healthy Vermonters” initiative targets obesity prevention by focusing on ways to increase physical activity and improve healthy eating. The vision: All Vermonters will live in communities that enable them to make healthy food choices and lead physically active lives. For local communities this means:

- Comprehensive planning that incorporates and promotes healthy community design.
- Zoning and subdivision regulations that provide for and increase access to physical activity and healthy foods when development occurs.
- Organized, community-sponsored physical activity programs that are accessible to all local residents.
- Collaboration with community organizations – including faith-based, nonprofit and social groups – to promote healthy behavior.

Decisions made by government, businesses, and institutions all have an important impact on shaping the conditions in the built environment. Policies and practices related to transportation and land use, investments in commercial and residential development, and the location of schools and worksites ultimately influence the distances people travel to work, the convenience of purchasing wholesome foods, and the safety and attractiveness of neighborhoods for walking and accessing parks and trails.

Healthy community design in this context means planning and building our communities so that it’s easier for people to live active, healthy lives. The design of our communities...
should accommodate and encourage physical activity and access to healthy food as a regular, routine part of our daily lives to ensure that all Vermonters – regardless of age, ability and income—have access to options that make the healthy choice the easy choice.

Healthy Plans

Planning for healthy communities can take many forms. The Vermont Planning and Development Act (24 V.S.A. Chapter 117) predates current healthy community initiatives, but offers some guidance. State planning goals (§4302) highlight the need to provide bicycle and pedestrian paths, and to maintain public access to outdoor recreation and provide other recreational opportunities. State goals also promote farmland preservation and access to locally grown foods. Municipal plans must include a “utility and facility plan” that identifies existing and proposed public recreational facilities, a “transportation plan” that shows existing and planned bicycle paths and trails, and a “land use plan” that indicates areas planned for recreation, agriculture, public and semi-public uses, and reserved open space (§4382).

An important planning consideration is whether public health issues can be effectively incorporated under existing plan elements, or would be better addressed in a stand-alone chapter on community health. A third option, presented below, is to adopt a healthy community action plan—a “supporting plan” under Chapter 117 – as a stand-alone document that can be incorporated by reference or appended to the municipal plan. Vermont municipalities at the forefront of healthy community planning have amended their plans in each of these ways to integrate community health considerations:

- Brattleboro – incorporated health language under each element of its municipal plan.
- Wolcott– included a separate health chapter in its town plan.
- Morristown – drafted a supporting “wellness plan” that supplements the town plan.
- St. Johnsbury – established its vision for a healthy community and then updated its plan to highlight associated goals, objectives and actions for healthy neighborhoods.

The Vermont Healthy Community Design Resource includes example municipal plan language and a wealth of resources to help you get started. State funding for healthy community planning is available on a competitive basis, as funding permits, through standard sources such as the state’s municipal planning, recreation facility, and recreation trails grant programs, as well as the Vermont Health Department’s “Coordinated Healthy Activity, Motivation and Prevention Programs” (CHAMPPS). CHAMPPs grants fund community health and wellness initiatives, including action plans, programs and projects intended to prevent or manage risk factors for chronic disease, and to promote physical activity and healthy eating.

Community Health Assessments

One of the first steps in both planning and program development is to collect available baseline data and community information to better understand existing conditions and trends. Community health data are available from the Vermont Department of Health’s District Offices and the department’s website. Data relevant to community health planning include statistics pertaining to physical activity, diet and nutrition, weight and obesity, chronic disease (diabetes, heart and respiratory diseases) and traffic-related injuries. To the extent available, it’s helpful to present data for subpopulations (e.g., by gender, age and income), to better target available resources to meet the needs of different groups. The Vermont Health Department – including its 2008 “Fit and Healthy Vermonter’s Status Report” – is a good source of general baseline information. The department, in association with UVM’s Center for Rural Studies and Vermont’s regional planning commissions, has also established an online database of municipal facilities and programs: “Inventory of Resources Related to Health for Cities and Towns in Vermont.” Though not regularly maintained, this site provides community-based information, and a framework for local inventories and updates.

There are a variety of tools available to conduct broad or more targeted community health assessments – including the Vermont Health Department’s “Community Assessment Tool Kit” and the Centers for Disease Control’s “CHANGE Tool” (Community Health Assessment and Group Evaluation Tool). The
Vermont Healthy Community Design Resource includes a “Healthy Community Design Assessment Tool” for use by health advocates and planning officials to more specifically inventory and assess a community’s existing physical environment, policies and programs, budgets and available resources. The resource guide also offers tips for conducting “rapid community audits” – more informal evaluations that may include:

• An analysis of local land use patterns to see if they promote walking, bicycling and outdoor recreation, and access to local food.
• An update of the town's recreational inventory to catalog existing infrastructure, facilities and programs that support physical activity – including parks, playing fields and trail networks.
• Walking and bicycling audits to determine whether it is safe, easy and inviting to walk and ride between local neighborhoods and community destinations.
• A survey of local producers, food outlets and community gardens to assess community access to fresh, healthy and affordable food.

Community Action Plans

A healthy community action plan or wellness plan is a more targeted, short-term (1 to 5 year) strategic plan that complements and implements municipal plan goals, policies and recommendations. Typically developed in collaboration with community health advocates, an action plan may target certain groups (seniors, children, low income residents), a particular neighborhood or facility (school, workplace), or facilities or actions to increase mobility or local access to food (bicycle or pedestrian plan, farm to school action plan). Recent examples of note include:

• “A Great City for Older Adults: An Action Plan for Burlington,” prepared by AARP for the Burlington Livable Community Project. This includes specific action steps to provide for more housing, mobility, accessibility, and community engagement choices as we age.
• The Town of Hartford’s “Pedestrian and Bicycle Plan,” which includes a detailed inventory and assessment of current conditions, facilities and needs, design guidelines and recommendations for bicycle parking, school pedestrian and bicycle access, street and driveway crossings, and public transportation. It also identifies priority projects.

The projects and programs highlighted in an action plan – though often targeted to certain groups or facilities – generally benefit the entire community and make it a healthier, more active place for everyone.

Community Strategies

Many healthy community design concepts promoted by public health advocates incorporate long-accepted planning strategies and principles, while others have been less often considered in planning. At the local level, these include both regulatory strategies designed to direct the pattern of land use and development, and non-regulatory programs and initiatives to develop needed infrastructure and services. Some key design strategies and programs are described in more detail in the Vermont Healthy Community Design Resource and related implementation manual topic papers, but are introduced here.

Smart Growth

Smart growth is now a generally accepted development strategy that promotes compact, higher density, pedestrian-friendly, mixed use development in villages and urban centers, while preserving productive farm and forest land in surrounding rural areas. This development pattern, established historically and sustained through land use regulations and targeted infrastructure investments, is consistent with Vermont's longstanding goal “to plan development so as to maintain the historic settlement pattern of compact urban and village centers separated by rural countryside” (24 V.S.A. §4302). The intent, from a health perspective, is to develop a built environment that promotes physical activity in our daily lives – that makes it easy to walk or bike from home to school, to work, to the park, the farmer's market, or the corner store. Higher density mixed use development in village and urban centers offers more options for everyone – for housing, services, and getting around – while rural farmland preservation outside of these centers supports increased access to locally produced food.

Smart Growth Strategies

These techniques can be used to support smart growth in Vermont (numbers refer to related Implementation Manual topic papers):

• Downtown, village center or growth center designation (#7)
• Physical master plan
• Mixed use zoning, smart codes or form-based codes (#6 & #30)
• Transit-oriented development (#23)
• Infill development, brownfield redevelopment and adaptive reuse of historic buildings (#3 & #9)
• Traditional neighborhood design, planned unit or residential (clustered) development (#22)
• Agricultural zoning districts (#19)
Safe Routes to School

Safe Routes to School (SRTS) is a national program to encourage children to walk and bicycle to school. Goals include:

- Improving bicycle, traffic and pedestrian safety
- Increasing the number of children who walk and bike to school, thereby improving childhood health
- Reducing fuel consumption and pollution
- Enhancing community accessibility and involvement by fostering partnerships

VTrans oversees Vermont’s Safe Routes to School Program, which provides community support for infrastructure improvements, safety education, and enforcement of safety laws. For more information go to: www.SafeRoutesVT.org

Complete Streets

Vermont recently enacted complete streets legislation to promote street rights-of-way that are designed and built, or retrofitted, to accommodate people of all ages and abilities – including pedestrians, cyclists, transit riders, seniors, dog walkers and baby buggies – as well as motorists. From a community health perspective this makes streets safer – by reducing traffic-related injuries and fatalities – and more accessible and inviting for a pleasant stroll downtown. Good design can also re-integrate a street into the fabric and character of the community, transforming it into a vibrant public space.

Complete Street Strategies

These techniques can be used to support complete streets in Vermont (numbers refer to related Implementation Manual topic papers):

- Complete street design policies and standards (#25)
- Walking, bicycling and road safety audits (#2)
- Transit and pedestrian-oriented design standards (#2 & #23)
- Streetscape design standards (#25)
- Traffic-calming techniques (#29)
- On-street parking, public and shared off-street parking, “park-and-walk” facilities (#20)
- School safety programs
- Wayfinding programs
- Bicycle parking and storage facilities (#2)
- Transportation enhancements and infrastructure improvements (#8).

Active Living

Creating an “active community environment” (an initiative of the Centers for Disease Control and Prevention) or a “livable community” (as more broadly defined by the AARP) involves developing community infrastructure, facilities and programs that support physical activity and provide opportunities for social interaction. In addition to interconnected sidewalk, bicycle and transit facilities that get people from place to place, these may include parks and green space, playgrounds, trail networks, school facilities, and health, recreation and cultural programs that are accessible to all members of the community. This also involves “institutionalizing” active living principles in municipal planning, policy and facility development. Community governing and planning processes should recognize and address the multiple impacts of development and transportation on local residents’ ability to be physically active and socially involved in their community.

Active Living Strategies

These techniques can be used to support active living in Vermont (numbers refer to related Implementation Manual topic papers):

- Community recreation centers (#5)
- Community health, exercise and recreation programs

Active Living Environments

Even the Institute for Transportation Engineers (ITE) – long associated with auto-oriented engineering design standards – now promotes “active living,” defined as community design that integrates physical activity into daily routines. Under their definition, an active living environment:

- Is walkable
- Supports, encourages and promotes physical activity
- Is designed to support compact development, mixed use, accessibility and public transit
- Locates activities of daily living within walking distance along an interconnected network of streets, sidewalks and paths, thereby increasing incentives to walk rather than drive
- Has sidewalks, on-street bicycle facilities, multi-use paths and trails, parks, open space and recreational facilities
- Promotes policies that encourage mixed use development and connected grid of streets, allowing homes, work, schools, and stores to be close together and accessible to pedestrians and bicyclists
- Makes being physically active 30 minutes a day, three to five times a week, easy, convenient, and pleasurable.

The ITE has developed recommended practices for walkable street design, and is a founding member of the Active Living Network, a national coalition that promotes active-friendly communities (www.activelivingresources.org).
The U.S. Department of Agriculture reports that an average of 13.6% of Vermonters were food insecure from 2007 to 2009 – up from 10.2% in the previous two year period. Vermont ranks 20th in the nation for the prevalence of food insecurity, and third highest in New England after Maine and Rhode Island.

VT Farm to Plate Strategic Plan (2011 (Appendix D). http://www.vsjf.org/project-details/5/farm-to-plate-initiative

- Public parks and playgrounds (#8)
- Trail network development (#2)
- Public use of school recreation facilities
- Workplace exercise programs
- Partnerships with local health clubs
- Land and easement acquisitions (purchase of development rights and trail easements) (#18)

Healthy Food

Many Vermonters do not have ready access to healthy, affordable food. The U.S. Department of Agriculture has mapped at least nine “food deserts” in the state – defined as low income census tracts where a substantial share of residents has limited access to a supermarket or grocery store. These include tracts in the state’s most urban county (Chittenden County), as well as its most rural counties (Franklin, Essex and Orleans). Vermont’s food deserts expand under other definitions (e.g., distance to a food store), given that many of us must drive several miles to buy groceries. For shut-ins, lower income residents and people without cars or access to public transit, getting enough healthy food can be a daily challenge – resulting in food insecurity (the inability to access enough affordable, healthy food to meet basic needs) and real hunger.

In addition to state and federal assistance programs, there are a growing number of community-based programs designed to both increase community access to fresh, locally produced food, and to support and expand available markets for local farmers. As planners this means going beyond traditional land use planning that focuses largely on farmland preservation to more comprehensively look at other food system components. Planners can help identify and address local food deserts and food insecurities, opportunities to support local farmers, and the need for more food processing and distribution facilities and retail outlets.

Healthy Food Strategies

These techniques can be used to support the availability of healthy food in Vermont (numbers refer to related Implementation Manual topic papers):

- Farm inventories and directories (#18)
- Farmland access programs (Landlink Vermont)
- Community supported agriculture (CSAs)
- Local food councils;
- Community food assessments
- Community and school gardens;
- Farm to school programs (VT FEED)
- Community-sponsored or supported farmers markets
- Local food cooperatives
- Institutional buying programs favoring local food producers
- Gleaning programs, food shelves and community kitchens
- Healthy eating programs and cooking classes
- Urban farming policies and ordinances
- Zoning to preserve farmland (e.g., agricultural districts) and support diversified farming businesses, including agri-tourism and food hub development (#19)
- Zoning to allow for corner groceries and country stores and seeking community development financing to support establishment of grocery stores where none exist (#30).

Health Impact Assessments

Planners are generally familiar with the use of impact assessments to evaluate the effects of proposed development on the environment, local traffic, or a community’s fiscal bottom line. Impact assessments can also be used to evaluate the effects of a proposed project, policy or program on community health. A Health Impact Assessment (HIA) is a rapidly emerging practice used by public health practitioners – and increasingly by planners – to objectively evaluate both the positive and negative effects of a proposal on community health.

Use of a HIA as a standard practice in the review of larger projects – such as the siting of a school, grocery store or housing development – provides the means to consider and continually evaluate community health outcomes.
Health Impact Assessments: An Emerging Planning Tool

A variety of Health Impact Assessment tools are available – ranging from simple checklists to more comprehensive analyses and studies, but most HIAs involve the following steps:

- Screening – determining those policies or projects where HIAs would be useful,
- Scoping – identifying health effects and groups to be considered,
- Assessment – assessing the health risks and benefits to affected groups,
- Recommendations – providing alternatives to promote positive or mitigate negative health effects,
- Reporting – presenting the results of the analyses to decision makers, and
- Evaluation – evaluating the affect of the HIA on the decision process and outcome.

The American Planning Association, in association with the National Association of County and City Health Officials and the Centers for Disease Control and Prevention, has developed “Planning for Healthy Places with Health Impact Assessments” – an on-line training course on how to conduct health impact assessments (http://professional.captus.com/Planning/hia2/toc.aspx).

in both the planning and development review process. The “Healthy Community Design Community Assessment Tool” provided in the Health Department’s Vermont Healthy Community Design Resource can be adapted for use as a Health Impact Assessment tool, as applied to proposed development projects.

Considerations

There are many considerations in planning for healthy communities – including the type of community, the range of factors that contribute to or affect community health, and the availability of partners and resources.

Rural towns with limited infrastructure may focus on farmland, food supply and food security issues, while more urban communities may look to developing safe walking and bicycling routes – but all communities can come up with strategies that address a full range of locally identified community health needs. In addition to active living and access to nutritious, local food, these may include health considerations tied to local water and air quality, housing and living conditions, the availability of medical and social services, income and poverty levels, and health equity issues.

Community health, though long a founding principle of local planning and land use regulation, in its contemporary context is a relatively new field for planners. It’s especially important that those with critical expertise are included and actively involved in the planning process, including:

- public health advocates and health care providers
- local schools and worksites
- Vermont Health Department district office staff
- hospital community teams
- community health partnerships and development organizations, and
- other agencies or groups that serve local interests

There’s much we have in common in how we think about and look at our communities; there’s also much we can learn from each other through stronger collaboration. A broad group of allies and partners – and leadership from local public health champions – is critical for effective community health assessment, outreach and action.

1. http://crs.uvm.edu/townhealthresources/
3. USDA Food Desert Locator (http://www.ers.usda.gov/data/fooddesert/)