



AMERICAN PLANNING ASSOCIATION
COLORADO CHAPTER
MAKING GREAT COMMUNITIES HAPPEN

CREATING HEALTHY PLACES THROUGH TRANSFORMATIONAL EDUCATION AND DESIGN

JOINT CALL-TO-ACTION TO PROMOTE HEALTHY COMMUNITIES IN COLORADO:

A SYMPOSIUM OF ALLIED ASSOCIATIONS AND ORGANIZATIONS

WEDNESDAY, 4 APRIL 2018 | LAWRENCE STREET CENTER | UNIVERSITY OF COLORADO DENVER

SUMMARY AND OUTCOMES

Around Colorado, more and more professional associations, public officials, and practitioners across an array of disciplines recognize that health and public wellness is much more than disease prevention. How we live and how we get around as Coloradans are also key aspects of human health.

In response to initiatives advanced by the Colorado Health Foundation and the Colorado Chapter of the American Planning Association, the University of Colorado Denver's College of Architecture and Planning held a series of events in early April 2018 to bring together statewide associations and organizations with an interest in working on the health implications of our built environment. At least 16 statewide organizations have now committed to working more collaboratively on health matters – and most had representatives at the April 4th Symposium. This report provides a summary and overview of the Symposium, its call-to-action, and next steps for statewide collaboration.

Welcome and Introductions

Sarah Franklin, with Urban Land Institute Colorado, and Michelle Stephens, AICP, president of the Colorado Chapter of the American Planning Association, welcomed more than 50 people representing more than 20 different associations, agencies, and firms to the event. They presented the agenda for the day and discussed desired outcomes from the meeting.

The Colorado Health Foundation is sponsoring a multi-step, multi-disciplinary project at the College of Architecture and Planning designed to integrate more fully aspects of health and human wellness into the College's curriculum, work program, and outreach efforts into communities. One of the Foundation's requests is for the College to help form a network of professionals and practitioners to facilitate the sharing of information, better collaboration, and shared resources relating to health and the built environment.

At the same time, the Colorado Chapter of the American Planning Association received a grant from its national offices, following up on project the Chapter completed in 2017, to advance collaboration across allied professional associations in the state relating to health and the built environment. The Chapter turned to its partner, the Colorado Center for Sustainable Urbanism – a research and outreach hub at CU Denver – to coordinate the call for collaboration. The

project in Colorado is an outgrowth of a national call-to-action which the American Planning Association has signed on to, in addition to seven other national professional organizations.

The Colorado sections or chapters of all eight national professional associations have confirmed participation in the Colorado-based call-to-action. In addition, eight more organizations in Colorado have also agreed to be involved.

Joint Call-to-Action to Promote Healthy Communities in Colorado: Statewide Partners
(as of April 2018)

1. Alliance for Sustainable Colorado
2. American Institute of Architects | Colorado
3. American Planning Association | Colorado Chapter
4. American Society of Civil Engineers | Colorado Section
5. American Society of Landscape Architects | Colorado
6. College of Architecture and Planning | University of Colorado Denver
7. Colorado Association of Local Public Health Officials
8. Colorado Department of Public Health and Environment
9. The Colorado Health Foundation
10. Colorado Health Institute
11. Colorado Parks and Recreation Association
12. Congress for New Urbanism | Colorado
13. Mile High Connects
14. Regional Institute for Health and Environmental Leadership
15. The Trust for Public Land | Colorado
16. Urban Land Institute | Colorado

Call to Action to Promote Healthy Communities in Colorado
Partner Associations | April 2018



Overview: National Joint Call-to-Action

Dr. Rocky Piro, FAICP, Executive Director of the Colorado Center for Sustainable Urbanism, provided a brief overview of the national *Joint Call-to-Action to Promote Healthy Communities*. The Call was signed off in mid-2017 by eight professional associations with a combined national membership of more than 450,000 people. It calls upon members “to collaborate with one another to create healthier, more equitable communities.”

The Call-to-Action intentionally advances new partnerships and collaboration to solve our growing health challenges; it calls on planners, public health officials, architects, designers, engineers, park experts, and others to work together to share information, craft policy, and develop communication tools. By working together, these allied associations multiply their potential to improve health for all.

The Call-to-Action is designed around four pillars. These pillars were the focus of table discussions later in the symposium.

Pillar 1: Build Relationships
Pillar 2: Establish Health Goals

Pillar 3: Implement Strategies to Improve Health
Pillar 4: Share Expertise

What’s Happening in Colorado?

Members of five of the state-wide associations presented highlights of work already underway to address health and the built environment in Colorado.

Urban Land Institute Colorado: Brian Levitt

The Institute’s *Building Healthy Places Initiative* recognizes that the real estate community can become more engaged in being part of the solution to health challenges. The Initiative advances projects and placemaking that improve the health of people and communities. ULI sponsors research, education, and workshops to advance health and wellness.

College of Architecture and Planning (CU Denver): Rocky Piro

The College is half-way through a three-year grant from the Colorado Health Foundation to develop new direction for integrating health into design, planning, and decision-making. The project, titled *Creating Healthy Places through Transformational Education and Design*, is responsible for a series of studios, courses, lectures, and symposia focused on changing the way in which architectural and planning practices address health and wellness. A new interdisciplinary certificate program is being developed around the topic of “health and design.” Studio coursework has focused on applying health principles in planning and redevelopment of a case study area: the Sun Valley neighborhood in west Denver. The project is also charged with developing a guidebook for integrating health and design. It has already been noted that an additional aspect is the creation of a health and design professionals network, supported by a website and social media.

American Planning Association Colorado Chapter: Libby Tart Schoenfelder

PLAN4Health Colorado is a project sponsored by the Colorado Chapter with funding the American Planning Association received through the Centers for Disease Control. The initial phase of the project, completed in 2017, applied health evaluation tools developed by the CU Denver Center for Sustainable Urbanism as part of its support work for the University's *Creating Healthy Places* project (see immediately above). The Chapter's project engaged three communities in Colorado that are different from Sun Valley; these communities are Brush, Durango, and Westminster. The project resulted in health-based recommendations for each community to consider. In addition, the evaluation tools were further refined to create a new working draft, now called the *Health Assessment Lens*. Once finalized, the Lens will be a do-it-yourself tool for local governments to use in their own evaluation of health factors and considerations when it comes to planning, program development, or project design.

Colorado Association of Local Public Health Officials: Theresa Enseldo

The Association is advancing local public community health assessment and improvement plans in targeted locations throughout Colorado. A key emphasis is that health really needs to be addressed in all policies – beyond those that have traditionally addressed disease prevention. This includes policies for addressing both the natural environment and the built environment.

Colorado Department of Public Health and Environment: Cate Townley

One of the Department's initiatives has been the *Colorado Downtown Streets* program. This effort addresses making streets and thoroughfares safer for all users – walkers, bicyclists, motorists, and transit riders. Concepts such as "complete streets" are advanced, to encourage opportunities for more active living, including walking and bicycling. This is accomplished by incorporating well designed sidewalks and bikeways in street reconstruction.

American Society for Civil Engineers Colorado: Mark Reiner

The Society shared information on their upcoming convention in Denver in October, as well as a symposium to be held in early 2019 under the theme: *The City We Have, The City We Want*.

Table Talk: Four Pillars

The attendees broke into eight table groups to discuss the *Call-to-Action's* Four Pillars. At the end of the discussions, each group reported back. Summary notes of their discussions are provided below.

Pillar 1: Build Relationships

- 1) Pay community members for their time
 - a. Formalizing community leaders/navigators
 - b. Build power/acknowledge power for *all* members

- c. Be wary of “gate keepers” having too much emotional/time stretch by offering their help so often
 - d. Allow all members of the community the ability to understand/navigate their power & voice so that it’s not always the same person over and over
- 2) Community members are the experts
 - a. Let community dictate their needs & respond to assist with those items
 - b. Be comfortable with shifting power
 - c. Be flexible with agenda and outcomes
- 3) Understand barriers to engagement
 - a. Childcare, food, translation
 - b. Meet in the community (don’t expect people to come to you)
 - c. Use accessible language, check your jargon at the door
- 4) Understanding differences among communities
 - a. Religion
 - b. Country of origin
 - c. Generational history (Immigrant, refugee, new arrival, multiple generations?)
- 5) Make friends with the people you’re working with and support them as a friend would do
- 6) Consider who already has a relationship so you’re not “over surveying and underserving”

Pillar 2: Establish Health Goals

1. Metrics

Priority metrics identified by the group include:

- Life expectancy
- Mental health assessment tools (survey)
- Alternative minimum tax (AMT)
- Individual vs. being in community
- Percent of Income

Additional metrics include:

- Access to park
- Bacteria concentrations
- Body mass index (BMI)
- Chlorofluorocarbon (CFC)
- Food desert indices
- Happiness/Loneliness indices
- Heart Rate
- Lenses (Institute of the Built Environment)
- Livability index (American Association of Retired Persons)
- Ozone
- Particulate matter (PM) levels
- Pulse
- Richness of social setting
- Transportation/Healthcare/Food
- Volatile Organic Compounds (VOC)
- Walk score
- Water/services – trust their healthiness

2. Data Systems

Priority systems identified by the group include:

- Health evaluation tools (for example, Health Impact Assessments)
- Wearable tech

Additional systems include:

- Evidence based reporting (Silver Sneakers)
- Geographic Information Systems (GIS)
- Streetwise
- Surveys
- Traffic counts/zero death programs
- Walkability Score (e.g., Walk Denver Tool)
- WELL Building System (WELL) | Leadership in Energy and Environmental Design (LEED) | Living Building Challenge (LBC) | Green Star

3. Current Engagement

- Advocacy/ small- and medium-sized enterprises
- Authentic
- Best practices
 - Best practices/operations
 - Community engagement (active stairways)
 - community engagement/outreach
- Education/tech training
 - Key points/analysis
- Personal health
- Public forums

4. Strategies

- Air: fans/filtration, ultraviolet filtration, building materials, volatile organic compounds (VOC) materials, no smoking, healthy entrance
- Congress of New Urbanism (CNU) Charter
- Community level
- Healthy choice = easy choice
- Infrastructure updates
- Partnerships | public private partnerships? | joint ventures?
- Preventative care/clinics (e.g., Catalyst HTI in Denver)
- Slow City
- Smart City/tech

Pillar 3: Implement Strategies to Improve Health

Resources to promote public health

- Design professionals
- Facilitator/consultant
- Owners
- Policy makers/governments
- Public/community groups

How to apply resources to projects

- Inviting all stakeholder groups
- What is network available?

Lots of documents/plans exist

- Not connected
- Policy vs. optional
- What is most relevant to given project?
- City and county departments HAVE to collaborate to succeed
- 5280 Loop
- Bike/pedestrian downtown Denver
- Health development tool
 - from San Francisco, tweaked for Denver (see also: San Diego, Seattle)
 - master planning
- Rural vs. urban

How to engage local agencies & people/organizations

- Make info accessible
- Lots of barriers

Universal vs. tailored

Pillar 4: Share Experience

What exists now for info sharing?

- Building healthy places – online
- Other committees w/info
- Colorado Health Foundation – their website?
- Engineering Infrastructure Info needs to focus on equity
- Trust for Public Land parkscore mapping (10 min walk)
- Parkscore.org, Metro Nature Alliance
- Climate Smart Denver (annual update of data)
- Built Strategic Collaborative Group
- Rover Wood Johnson Foundation

Could there be a common place for this info?

- Matrix/schema for integrating threads into building healthy communities
- Curate info/filter info

Communication Hub

- For info
- For expertise: example – Biomimicry Site-Learn about nature
 - Committee of exchange knowledge from this group
- Ensure there are social media opportunities to the public (interface)
 - Slack
 - Google groups
- Who could give funding to administer?
 - Have connections of expertise, shared events (calendar)
 - Each association can put info in calendar

Additional Comments from Symposium Participants

- Authentic engagement
 - Varying levels of action
 - Social connectedness
- Community identity
 - Social forces
 - Vetting of champions
 - Desired outcomes
- Empowerment & communication
 - “Megaphone”
 - Education tools
 - Policy levels – support through bureaucratic process
- Feedback mechanisms
 - Give & take – results
 - Data collection
- When to lead, when to step back
 - Events
 - Capacity to act (structures within)

Implement Strategies to Improve Health + Wellness

- Any strategy must be holistic
- Leverage the “importance of health” as critical to each person
 - Incredible opportunity to re-frame the conversation
 - Paradigm shift – aspirational vs. reactionary
- Promote better coordination between agencies, businesses, and organization that impact public health
- Find areas within budgets to funnel directly to health-focused initiatives
- Promote data gathering of existing databases to increase quantity and quality of information sharing that can arm key constituents for better insights and decision making

- Grassroots vs. top-down?
 - Does one have greater value?
 - Balanced approach?
- Everyone cares about health, it's the factors that affect health which is debated
 - Work to define those factors
 - Change/re-frame those factors
- Affordable housing initiatives are health issues
- Having conversation about health is already having an impact
 - Next step: continue to push through partners to evolve the conversation into health & affordable housing
 - Next step: health is a foundational piece to planning, make health critical, appeal to health as core
 - Next step: solutions should be bottom-up with guidance by professional/practitioners
 - Topics: displacement
 - Topics: boil down abstract topics to the personal

Additional Notes

- Investigate how to apply/integrate existing resources across every stakeholder group
- How design professionals can share resources effectively
 - Understand/explain benefits but listen to specific needs of owners/communities
 - Especially communities, to make sure projects are successful and utilized
- Navigate policies, requirements, and recommendations
- Community engagement
 - Community
 - Leverage skills to come up with policies/projects/guidelines – something as simple as a request for proposals (RFP)
 - Communicate – understand what we are doing, interdisciplinary learning
- Additional Points to Consider
 - Community funds, businesses, non-traditional business, churches, labor force not working traditional hours, mothers, unstable/might-move populations, schools
 - Acknowledge community as experts
 - Provide services (child-care, language)
 - Introductions + meeting people, learning real world problems
 - Connect w/ community leaders
 - Send info on initiatives that their constituents would be interested in, personal calls, info sharing
 - Future: empower students and communities to engage themselves
 - Community navigators – paying community leaders
 - Pay people for their time and services

Next Steps

The Symposium organizers agreed to work through the comments and feedback from the participants and develop a *Call-to-Action* action plan for review and consideration by all partner associations and symposium attendees. The action plan is to give shape and form to the actual launching of the *Joint Call-to-Action to Promote Healthy Communities in Colorado*.

A follow-up summit on the action plan will be scheduled in June 2018. Invitations will be sent out to all partner associations and attendees at the April 4th Symposium.