# A ROADMAP FOR **HEALTHIER GENERAL PLANS**

Getting healthy policies into a community's general plan can seem daunting. Planning is often a timeconsuming and occasionally complicated process. But health-promoting policies go a long way toward creating more livable neighborhoods – increasing opportunities for residents to buy fresh foods, ensuring they can walk and bike to meet daily needs, reducing crime and pollution, encouraging social connections, and more.

City planners, health department staff, communitybased advocates, experts and consultants, philanthropic organizations, and elected officials all have roles to play to ensure the general plan reflects both healthy community goals and best practices. In fact, the involvement of these stakeholders is critical throughout the process – from educating residents and decisionmakers alike about the impact of planning decisions on public health to actively participating in drafting policy language that creates more sustainable communities.

Visions and values may differ from one community to the next, but much of the structure and process for updating a general plan is common throughout California (indeed, land use planning processes usually follow the same general path nationwide). This roadmap, which draws from lessons learned and best practices from real-life planning process, highlights **roles** and **strategies** for key players to consider along the way.

> This roadmap draws from research by Heather Kuiper, DrPH, using three California cities as case studies: Santa Clara, Mountain View, and San Jose.

## Step by Step: Who Does What?

#### STEPS DDDDDDDDDDDDD

The process of updating a community's general plan offers a critical opportunity to shape local development patterns for decades into the future, creating healthier and more sustainable neighborhoods for all residents. But planners often face competing needs and priorities: other issues that may take center stage include job growth, business interests, and local leaders' own personal platforms and passions.

Health advocates must be vigilant to ensure that public health goals are not only introduced at the start but carried through a process of planning and negotiation that can span years.

This map outlines the major stages of a general plan update, identifying ways for city planners, health department staff, community-based advocates, experts, consultants, and funders to champion health throughout the process.

## Just What Is a "General Plan"?

Learn more about the policy blueprint for local land use and development in PHLP's toolkit, *General Plans and Zoning: A Toolkit* on Land Use and Health, and How to Create and Implement Healthy General Plans, available at www.phlpnet.org/healthy-planning/ participating-planning-process.

### **COMMUNITY VISIONING**

Objective: Lay the foundation for the general plan update by establishing a vision statement and goals that reflect community health priorities

#### COMMUNITY-BASED ADVOCATES

#### **HEALTH DEPT STAFF**

- Educate community members and decision-makers on the links between planning decisions and health
- Help residents identify health issues that can be addressed in a general plan
- Organize residents to participate in community meetings, providing training on message development and public speaking
- Organize workshops and presentations for key decision-makers on land use policy and health
- Package and disseminate data documenting/ supporting local health concerns

#### PLANNERS

- Learn about the relationship between the built environment and health
- Host and attend community meetings and workshops on creating healthy land use policies
- Conduct meaningful, multipronged outreach to keep residents informed about community meetings and other opportunities to provide input

#### EXPERTS/ CONSULTANTS

- Speak at workshops and meetings to engage and educate residents, planners, elected officials, and other stakeholders about the links between health and neighborhood design
- Provide compelling visual information that connects quality of life, healthy communities, and planning decisions

#### FUNDERS

 Support public events, advertising, inclusion of diverse voices, and other community engagement efforts

"We had a community visioning process the first year where people told us what they wanted in the update. It was exciting to see that there were health elements in the comments that we got. That worked out well, health tied in well, and it was what the community wanted, so it seemed a natural fit." – Planner

#### FORMATION OF REVIEW COMMITTEE

Objective: Ensure a diverse team of community representatives to provide input and oversight

#### COMMUNITY-BASED ADVOCATES

 Identify and recruit advocates (e.g., neighborhood, health, housing, schools, etc.) with the experience, sophistication and commitment to serve for an extended period of time

#### PLANNERS

 Tap health stakeholders with both technical and community expertise

#### HEALTH DEPT STAFF

- Meet with PLANNERS to shape the function and composition of the review committee
- Serve on the review committee to ensure direct, long-term representation of health concerns
- Bring in EXPERTS/ CONSULTANTS and other speakers for study sessions to establish common knowledge base on key issues

#### EXPERTS/ CONSULTANTS

"A successful review committee starts with a good base in terms of folks who get the big picture, and a lot of neighborhood representatives who've been through the bruising battles and understand smart growth." – City Council Member

#### **ANALYSIS OF EXISTING CONDITIONS**

**Objective: Document** baseline health and built environment data in a way that informs policy development and can be measured and evaluated over time

#### **HEALTH DEPT STAFF**

- Provide/interpret relevant health data (e.g., maps correlating health outcomes with neighborhood conditions)
- Coordinate datadriven briefings for councils or commissions, reporting on the city/county's current health status and relevant policy options (and/or educate electeds and staff one-on-one)

#### **FUNDERS**

Fund HEALTH DEPT -STAFF, EXPERTS/ CONSULTANTS **COMMUNITY-BASED ADVOCATES** Invest in overall community health assessments, walkability and bikeability audits, community food assessments, and/ or other analyses to inform policy priorities

## EXPERTS/ CONSULTANTS

#### COMMUNITY-BASED **ADVOCATES**

"We needed the epidemiology. It was easy to go to meetings and say, 'If you live in cities where you can walk around, you can lose weight.' But when you can show numbers. it's a better story." - Advocate

#### POLICY DRAFTING

**Objective:** Provide, refine, and secure comprehensive and implementationoriented health policy language

## EXPERTS/ CONSULTANTS

- Provide model/best practice policy ideas to support health goals Work with **PLANNERS**.
- HEALTH DEPT STAFF, and COMMUNITY-**BASED ADVOCATES** to tailor model language to suit local context

#### PLANNERS

- Release updated drafts using tracked changes so that stakeholders can monitor revisions Write policies that explicitly link to implementation steps (e.g., "adopt zoning definitions that protect and promote farmers' markets to increase access to healthy food") and/or provide benchmarks and standards ("75 percent of households will live within 1/2 mile of a farmers' market, produce market, grocery store, or other healthy food retail option" Write policies that prioritize underserved
- communities and those with disproportionately worse health outcomes

**HEALTH DEPT STAFF** COMMUNITY-BASED ADVOCATES

#### "The general plan document is shaped heavily by staff.... Having good relationships with planning staff was absolutely helpful." - Advocate

"You can't just say 'biking is good'; you have to explain why, the health and financial benefits. So in my letters I make those points." - Advocate

"We can work for years advocating on the general plan, but when it goes to vote, everything can be reversed – that's when people who have relationships with the council will come out and get their ear." - Advocate

#### IMPLEMENTATION

**Objective: Translate** health vision into on-the-ground change

#### PLANNERS

• Work with **EXPERTS**/ **CONSULTANTS** to ensure that community planning documents (e.g., zoning codes, roadway/ transportation plans) are updated to conform to new general plan goals and policies

#### **EXPERTS**/ CONSULTANTS

#### **COMMUNITY-BASED ADVOCATES**

#### **HEALTH DEPT STAFF**

- Partner with FUNDERS to initiate and sustain programs and implementing policies (e.g., zoning codes, design guidelines, area/specific plans) in support of goals outlined in the general plan
- Continue to educate elected officials and other decision-makers about the goals of the plan and the steps needed to achieve its vision

**FUNDERS** 

"Planning is only 40 percent of the battle. Implementation is the majority of the effort required." - Planner



**PLAN** 

**ADOPTION** 

**Objective: Ensure the** 

language that meets

city associations.

them about the

supporting strong

goals in a way that

supports adversarial

importance of

health policies

Frame health

powerbrokers'

culture; look

for appealing

"co-benefits"

perspective and

labor) and educate

city council adopts plan

healthy community goal

- Write comment letters that include both strengths and opportunities for improvement acknowledge good language, and identify where community health needs are reflected and addressed.
- Meet with planners and share comments with them before making comments public

#### **FUNDERS**

Support health-based policy analysis (e.g., health impact assessment) that can strengthen draft plan review and commenting

• Ask planners what type of comments would be most helpful (some may appreciate policy language; others may prefer comments that

identify issues but let planners figure out how to draft the actual policy)

**DRAFT REVIEW** 

**Objective: Ensure that** 

plan language reflects

community vision and

priority health issues

## Advocacy Strategies

While every general plan update is unique in some ways – reflecting a community's own values, character, and vision – some advocacy tactics apply regardless of locale. Here are some general guidelines to help navigate the process successfully.

Establish authenticity as a legitimate, measured, representative voice. Advocates can be viewed as special interest lobbyists; it is important to demonstrate that you work closely with residents and that your position represents theirs.

**Cultivate relationships** to increase your impact and to make promoting health logistically and politically feasible. Build relationships with coalitions, elected officials and other power brokers, foundations, the local health department, and champions from any quarter. Relationships not only help ensure health policies are developed and adopted; they also sustain implementation over time.



**Educate and coordinate** stakeholders around a common understanding of key health issues and priorities. Bring visionary speakers to community events and one-on-one meetings; offer lively presentations with lots of visuals such as maps and pictures.

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© 2011 Public Heal Law & Policy **Use health data**, knowing what to get, where to get it, and how to interpret it. A variety of local and state agencies have data linking health with the built environment. The value of data in a policymaking context corresponds to the degree it is understood by a variety of stakeholders. Simple, digestible information is usually better! Craft health messages carefully, framing arguments to connect with local issues, vision, and approach. Messages should be lean, highlighting benefits and beneficiaries (especially elderly, kids, businesses, and the poor). A good approach involves simple, clear messages from many trusted partners.

Practice diplomacy by showing respect for the need to balance many interests, as well as respect for staff constraints. Ask, listen, provide positive feedback, offer your own time and resources, and "go slow before you go fast."

**Recognize that public officials operate on a political spectrum** and generally want to locate themselves in the middle of that spectrum. Structure the range of policy options so the "right" choice is the moderate choice.



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**Provide constant vigilance** over the process. Track meetings and decision-making junctures to avoid missing key moments of influence, and to have sufficient time to mobilize community input.