

Healthy Chula Vista Action Plan

Prioritizing Strategies for Health



December 2015

Made possible by the Centers for Disease Control and Prevention through Community Health Improvement Partners. The views expressed in this report do not necessarily reflect the official policies of the CDC or imply endorsement by the U.S. Government.

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Introduction

The Healthy Chula Vista Action Plan (HCVAP) is a set of 65 strategies developed by the Healthy Chula Vista Initiative, whose primary goal is to provide Chula Vista residents with tools to lead healthy lifestyles. The goal of the HCVAP is to promote opportunities for health by improving the City's physical and social environments, promoting awareness and access to services, and building community partnerships.

The HCVAP strategies are divided into the following seven focus areas:

- Community Engagement
- Land Use
- Transportation
- Healthy Food Access
- Physical Activity
- Health Care & Prevention
- Environmental Quality

Human Impact Partners (HIP) was hired by Community Health Improvement Partners (CHIP) through their Racial and Ethnic Approaches to Community Health (REACH) grant from the CDC to prioritize the proposed HCVAP strategies based on their anticipated impacts on health. To accomplish this, HIP collected data on local health status and inequities, reviewed public health research literature, and collected community and stakeholder input. HIP's overall goal is to prioritize strategies that if implemented, will result in the largest improvements in health and reductions in health inequities in Chula Vista.

City staff will present the results of this prioritization process to the Chula Vista City Council in January 2016. Once approved, the HCVAP will provide guidance on promoting health in the city over the next several years.

This report first presents research methods (community workshops; community survey; stakeholder meeting; collection of demographic, health status, and health inequities data; and literature review), followed by a description of findings for each method. Strategy scoring tables describing how each strategy fulfills criteria are then presented for each of the 65 HCVAP strategies. Lastly, a summary of findings and conclusions is included at the end of the report.

Methods

Community Workshops

Three community workshops were held from November 16-18, 2015 at the following locations in Chula Vista:

Monday, November 16
5:30pm – 8:00pm
Chula Vista Center Mall

Tuesday, November 17
5:30pm – 8:00pm
Otay Ranch Mall (The HUB)

Wednesday, November 18
6:00pm – 8:30pm
Castle Park Middle School

Community workshops were held to get input on health status, health inequities, and the actions proposed in the HCVAP from community residents. The goal for each meeting was to understand community member priorities and to get a sense of which actions are likely to meet community member needs. Moreover, the meeting objectives were to:

- Build awareness of the Healthy Chula Vista Action Plan
- Build awareness about how the seven focus areas of the Action Plan relate to community and individual health and well-being
- Understand the priorities of residents of Chula Vista with regard to the proposed strategies in the Action Plan
- Provide a venue to engage people meaningfully in the local government's work

To invite people to the workshops, City of Chula Vista staff distributed flyers, utilized social media, the city newsletter, and reached out to local community-based organizations and asked them to distribute an email invitation and flyers. HIP followed up with some of these organizations by phone.

HIP and City of Chula Vista staff facilitated the workshops. Some city employees who are also residents of Chula Vista were available to help during smaller group activities, and also participated and shared their input throughout the meeting. Childcare, snacks, and Spanish translation services were provided.

The workshops were designed to actively engage community members to participate throughout the meeting. As participants arrived, they signed in, and answered the following questions on a sticky note:

- 1) What is the biggest asset in your neighborhood? What do you like best about your neighborhood?*
- 2) What is the biggest challenge in your neighborhood? What do you like least about your neighborhood?*

They posted their responses on a large Chula Vista map mounted on the wall. The sticky notes were placed in the neighborhood of the respondent.

City of Chula Vista and CHIP staff welcomed residents and briefly introduced the purpose of the meeting. HIP staff then facilitated an interactive large group exercise on the root causes of health outcomes. Following the exercise, City of Chula Vista staff gave an overview of the HCVAP and how the city arrived at the seven focus areas.

A gallery walk followed the overview, where participants took a closer look at each focus area and its strategies. They were prompted to pick their top two focus areas to discuss. After the top focus areas were chosen, participants discussed their priority strategies within selected focus areas in a large or small group, depending on the number of meeting attendees. Then, each

participant was asked to vote for his or her highest-priority strategy in each of the discussed focus areas. After priorities were discussed and voted on, a larger group discussion was held to talk about impressions of the exercise, additional commentary, and answer any questions. HIP then explained to participants how their input would be used and the next steps for the project, and thanked them for their time and participation.

Eleven Chula Vista residents and city employees participated at the first meeting, and eight residents and city employees at the second meeting. The first and second meetings were held in English and one large group conversation was held. The third meeting had 45 residents with a majority of Spanish speakers; therefore a bilingual meeting was conducted. Due to the larger size, three smaller groups were created for the focus area strategy prioritization discussion—two in Spanish and one in English.

Community Survey

The purpose of the community survey was to offer an additional avenue for community members to provide feedback about their health priorities, health concerns and inequities that they face, and their sense of prioritization of the HCVAP strategies. The 25-question surveys were administered online and at the community workshops. A total of 37 surveys were collected, 30 from community workshops and 7 from online respondents. Not all questions were answered; findings show response rates.

Types of questions included identification of the neighborhoods in Chula Vista where respondents live; and identification of the biggest issue or challenge in their neighborhoods, including safety, car traffic, places to play, alternative transportation, housing, poor air quality and hazardous waste, health care, and healthy food. Additional questions asked respondents to choose *two issues per focus area* that need to be addressed in their neighborhood, followed by open-ended questions on their choices. The concluding question asked participants to share asset(s) in their neighborhood.

Stakeholder Meeting

A group of stakeholders previously assembled for the Healthy Chula Vista Initiative was brought together by city staff on December 10, 2015 to weigh in on the Healthy Chula Vista Action Plan prioritization process. Twenty-four stakeholders attended the meeting. HIP presented on the prioritization process thus far, and small group discussions followed in which participants were asked to share their thoughts on which strategies stood out as priorities and which, if any, caused concern. Each group then shared highlights from their discussions with the large group. At the end of the group discussion, each participant was asked to vote for their highest-priority focus area, as well as one highest-priority strategy in each of the seven focus areas.

Demographic, health status, and health inequities data collection

HIP compiled data describing demographic, health status, and health inequities characteristics of the Chula Vista community. Main sources of this data are United States Census Bureau, County of San Diego Health and Human Service Agency, San Diego Association of Governments Healthy Communities Atlas, and other local, state, and regional public agencies.

Literature review

HIP searched the peer reviewed public health literature to understand the likely impact of each strategy on health outcomes and on the social, economic, and environmental factors that influence health status (determinants of health).

Findings

Community Workshop, Community Survey, and Stakeholder Meeting Findings

This section summarizes findings based on community workshops, the community survey, and the stakeholder meeting. Graphs present quantifiable survey responses, while tables present votes on specific strategies and key themes that came up at community workshops. Summaries of the community workshops and stakeholder meeting are included in the Appendix. Survey results are on file at HIP's office.

Highest priority focus areas at the three **community workshops** are as follows. Only focus areas that were considered high-priority were discussed at workshops.

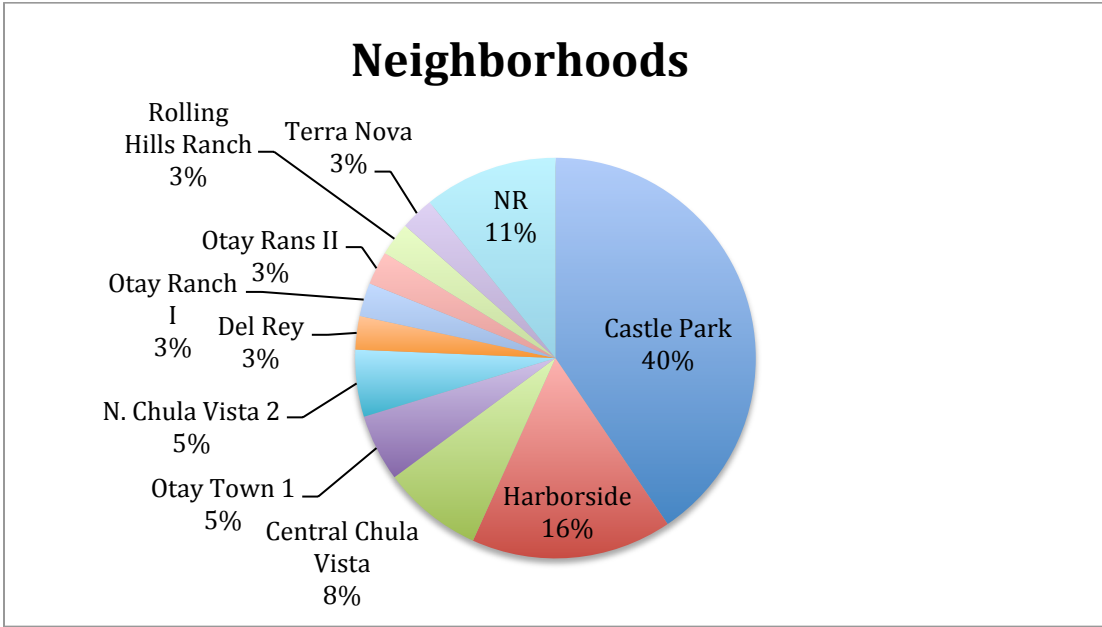
- Transportation – 3 groups discussed
- Healthy Food Access – 3 groups discussed
- Land Use – 2 groups discussed
- Physical Activity – 2 groups discussed
- Community Engagement – 1 group discussed
- Environmental Quality – 1 group discussed
- Health Care and Prevention – 0 groups discussed

The following list shows the most to least prioritized focus areas according to the **community survey**. Survey respondents could choose a first and second priority focus area; numbers below indicate the number of participants who chose each focus area as their first and second priority.

- Community participation: 37/35
- Healthy Foods: 34/29
- Land Use: 34/27
- Transportation: 33/30
- Physical Activity: 24/22
- Health Care: 24/21
- Environment: 21/18

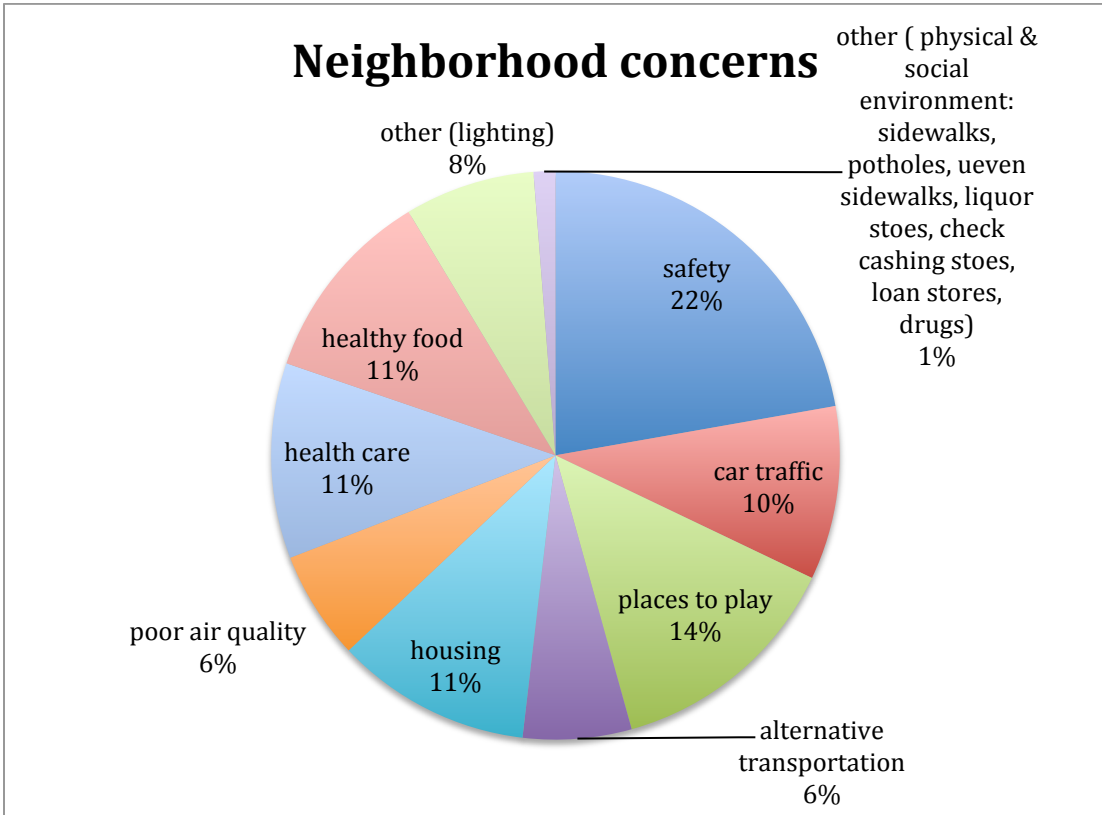
Stakeholder meeting participants identified healthy food as the highest priority focus area, followed by community engagement and physical activity.

The community survey polled where people lived in Chula Vista. Respondents selected the following neighborhoods:



Forty percent (15) of survey respondents live in the Castle Park neighborhood, followed by 15% (6) from Harborside. Eleven percent (4) respondents gave no response to this question. The remainder represented Central Chula Vista, Otay Town I, Del Rey, Otay Ranch I, Otay Ranch II, Rolling Hills Ranch, and Terra Nova.

Survey respondents indicated issues or challenges in their neighborhoods:



Neighborhood concerns among survey respondents are varied, with the top five being safety (22%), places to play (14%), healthy food (11%), housing (11%), and health care (11%).

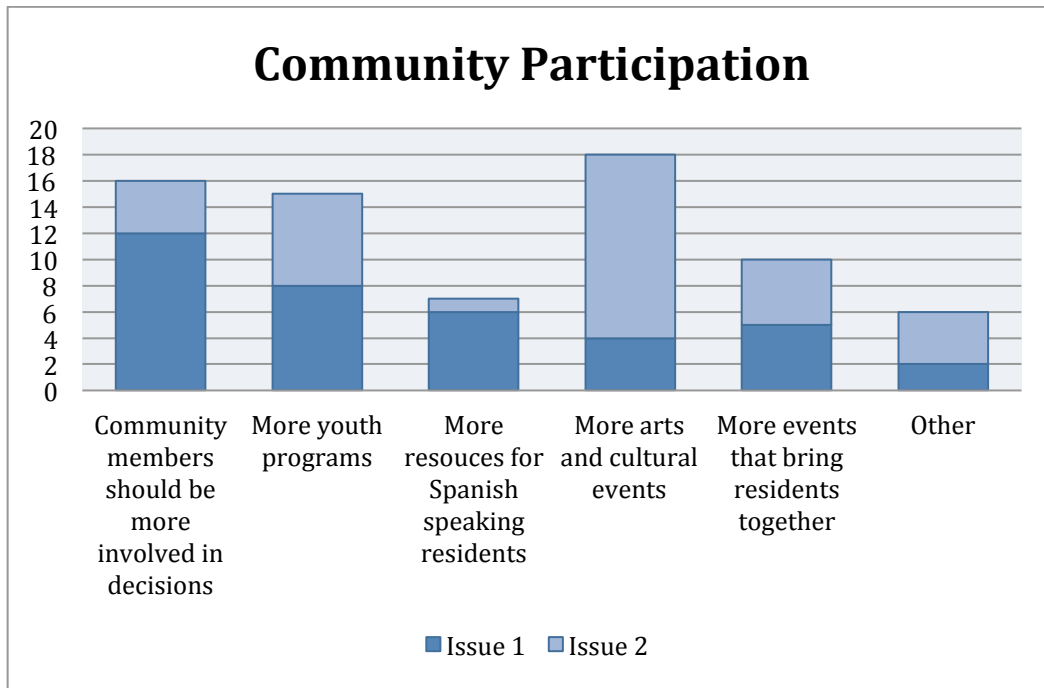
The tables below show the top strategies for each focus area identified at community workshops along with a graph showing survey results related to that focus area.

Community Engagement

Community engagement was selected as a priority focus area in one of the community workshops. Out of 11 participants who discussed this focus area, the following prioritized strategies were identified. (Here and below, each participant could use up to two votes per focus area.)

Engagement	Votes
<u>Inventory Community Assets</u> and establish the <u>Healthy Chula Vista Collaborative</u> stakeholder group with quarterly coordination meetings.	8
Develop and promote existing wellness activities as a means of <u>Civic Engagement Events</u> utilizing Healthy Chula Vista partners.	6
Adopt a City <u>Limited English Proficiency (LEP)</u> plan to remove barriers for non-native English speakers and review the <u>Public Participation Policy</u> to ensure effective civic involvement.	6
<p>Community Comments:</p> <ul style="list-style-type: none"> • “Engagement really helps people take ownership and pride in their community. It’s like an onion; they see other areas where improvements could be used.” • “Who [do] you have as partners? We have those relationships; use us, especially those organizations that serve Latinos/as. I’m happy to be here and help in that area because that’s what’s going to get things up and running.” • “This is connected to health via social well-being, connections.” 	

Survey respondents were asked to rank their top two priorities within **community engagement**:



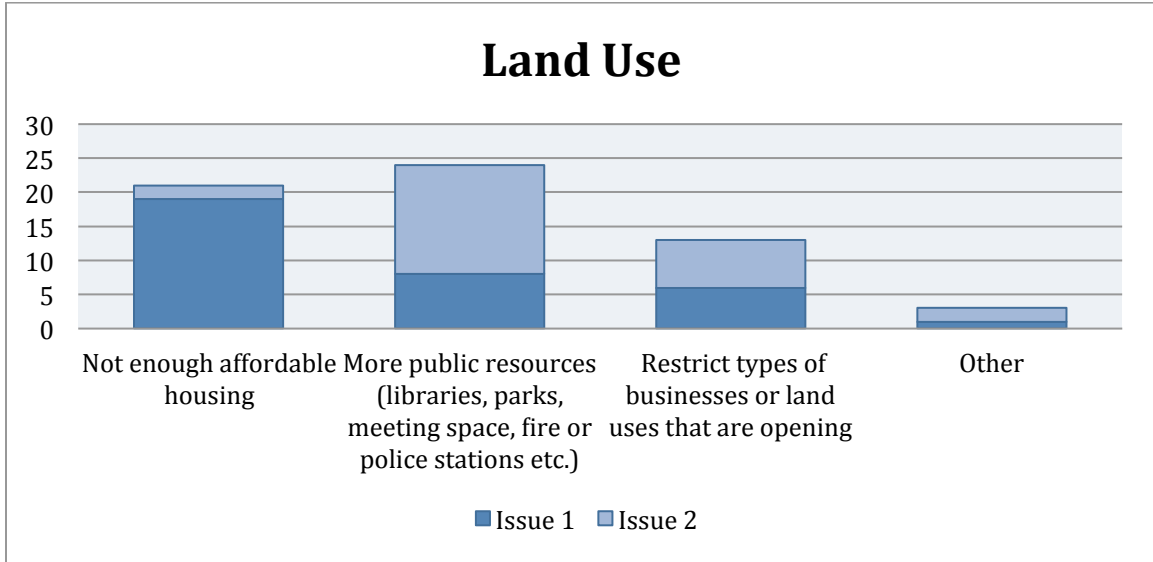
According to survey respondents, more arts and cultural events are needed in Chula Vista, and community members should be more involved in decisions.

Land Use

Land Use was selected as a priority focus area in two of the community workshops. The following prioritized strategies were identified.

Land Use	Votes
Evaluate the Balanced Communities (“Inclusionary”) Policy Guidelines to continue providing access to <u>Affordable Housing</u> throughout the city and support programs that enhance financial self-sufficiency.	15
Evaluate the <u>Design Standards Manual</u> to reflect concepts of Complete Streets and other concepts as adopted.	11
Review and amend as appropriate <u>CVMC Zoning</u> using a holistic approach to health considerations.	11
<p>Community Comments:</p> <ul style="list-style-type: none"> • “Housing is terrible; rent is too high, the buildings are extremely old, they’re tiny (hardly any space), they’re not safe buildings, and there are too many requirements to get a new place (for example: you have to make at least 2-3 times the rent, have a good credit score, have good recommendations, and a bunch of other stuff).” • “Cars have been dominating streets; trying to get other/older parts of town to be safer and increase walkability. This helps people get out!” • “Need more lighting in all the streets and more paved sidewalks; the sidewalks are not always walkable.” 	

Survey respondents ranked their top two issues for **land use** as follows:



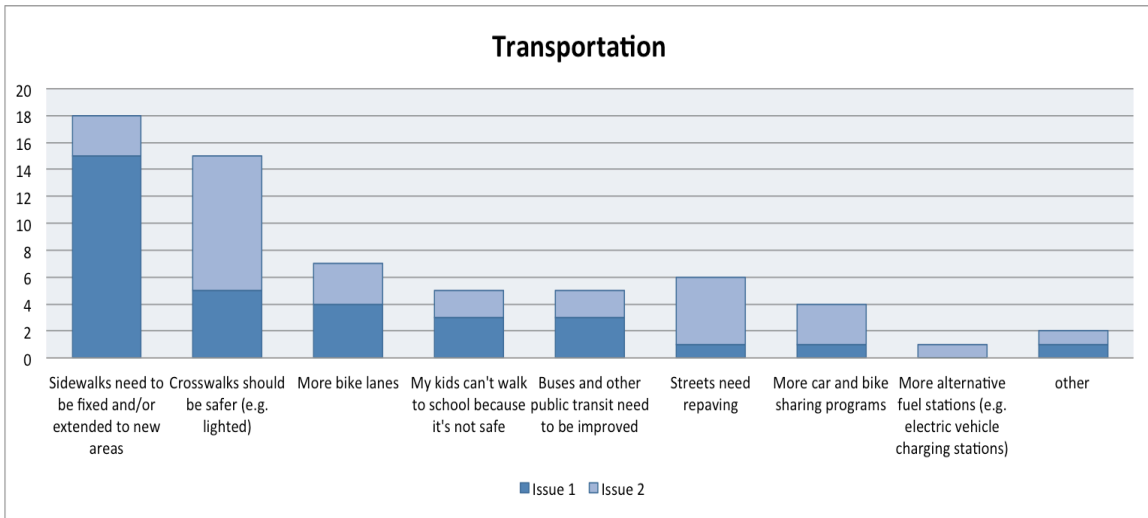
Similar to community workshop comments, the need for more public resources such as libraries, parks, meeting space, and fire or police stations was also found to be of high importance among survey respondents. A lack of affordable housing was identified as a second issue among survey respondents, and also of importance among participants at community workshops.

Transportation

Transportation was selected as a priority focus area once at the second community workshop and by two of the small groups at the third community workshop.

	Votes
Transportation	
Continue to respond and promote schools to participate in <u>Safe Routes to Schools</u> on an as needed basis.	25
Review <u>Public Transit Access</u> with MTS to ensure residents can access community assets.	20
Reevaluate the <u>Pavement Management System</u> to determine priorities and ensure equitable improvements.	18
Community Comments:	
<ul style="list-style-type: none"> • “Include street safety (lighting, sidewalks) in Safe Routes to School program” • “Reliable transportation. Trolley/bus [should be] be on time, as scheduled, and affordable.” • “Ways not driving a car is good: less stress, more exercise, improved air quality, and build community (social life).” 	

Survey respondents ranked their top two issues for **transportation** as follows:



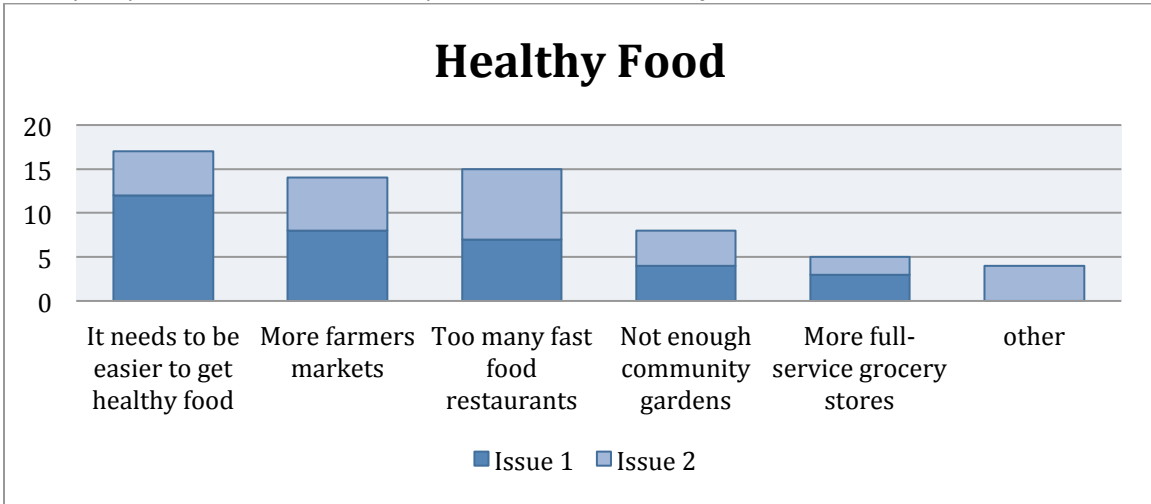
A very large number of respondents identified the issues *Sidewalks need to be fixed and/or extended to new areas* and *Crosswalks should be safer (e.g., lighted)* as top issues in transportation, which mirrors the community workshop feedback.

Access to Healthy Foods

Access to Healthy Foods was selected as a priority focus area once at each of the community workshops, for a total of three times.

Access to Healthy Foods	Votes
Support regional efforts for <u>Food Waste Prevention Programs</u> that provide food alternatives for homeless individuals.	25
Evaluate the feasibility of additional <u>Farmers Markets</u> , <u>Food Distribution</u> , and/or other innovate programs to address healthy food insecurity.	19
Study the location and number of <u>Fast Food Offerings</u> and explore <u>No Drive Thru Regulations</u> in areas of the city already concentrated.	15
Community Comments: <ul style="list-style-type: none"> • “Farmers markets that accept EBT.” • “Food access is related to income, and that’s where the less walkable streets are too. They were looking at capping the number of fast food restaurants, and also increasing availability of healthy food.” • “The reason why people don’t buy healthy food is because they can’t afford it.” • “Fast food is related to the income; the more education, the more income, the less likely you are to eat fast food; and once you get to that level, even if the option is there, you tend not to go to those places.” 	

Survey respondents ranked their top two issues for **healthy food** as follows:



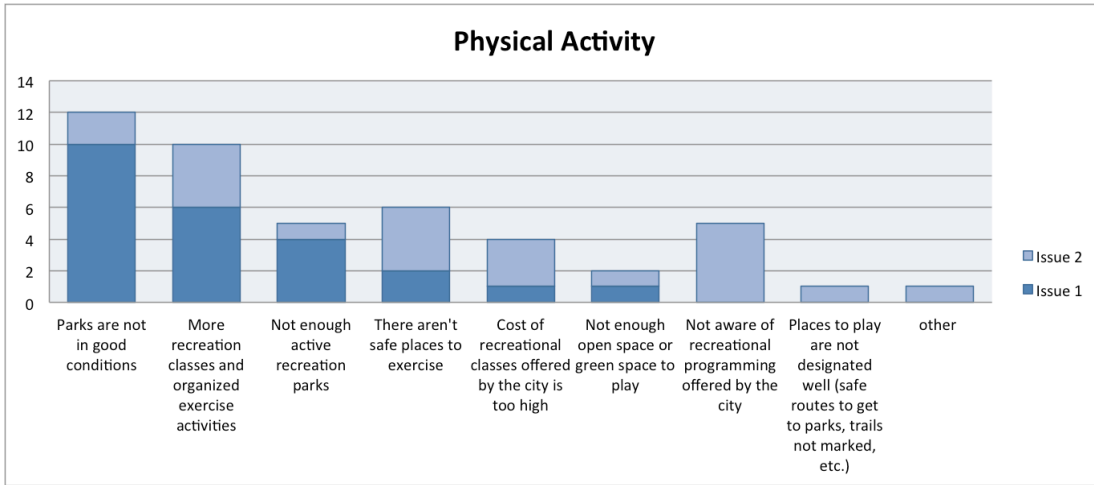
Similarly to findings from the community workshops, survey respondents indicated that *It needs to be easier to get healthy food* and that there are *Too many fast food restaurants* as top food-related issues in their neighborhoods.

Physical Activity

Physical Activity was selected as a priority focus area by two small groups at the third community workshop.

Physical Activity	Votes
Educate through the <u>Safe, Accessible, Fun & Easy (SAFE)</u> campaign to encourage increased awareness of bicycle and pedestrian access.	6
Increase awareness of the <u>Adopt-A-Park/Volunteer Park Rangers</u> program to promote civic responsibility and community engagement.	4
Community Comments: <ul style="list-style-type: none"> • “Too many homeless people in the parks; it’s uncomfortable to take the children there—they shouldn’t grow up seeing homeless people and drug use in a park.” • “It’s not fair if some of us volunteer and put work and effort into our community, and others come and destroy it or don’t do their part in maintain it either. There’s also lack of time that we already face so volunteering isn’t feasible. “ • “Families are more concerned about their needs than physical activity.” 	

Survey respondents ranked their top two issues for **physical activity** as follows:



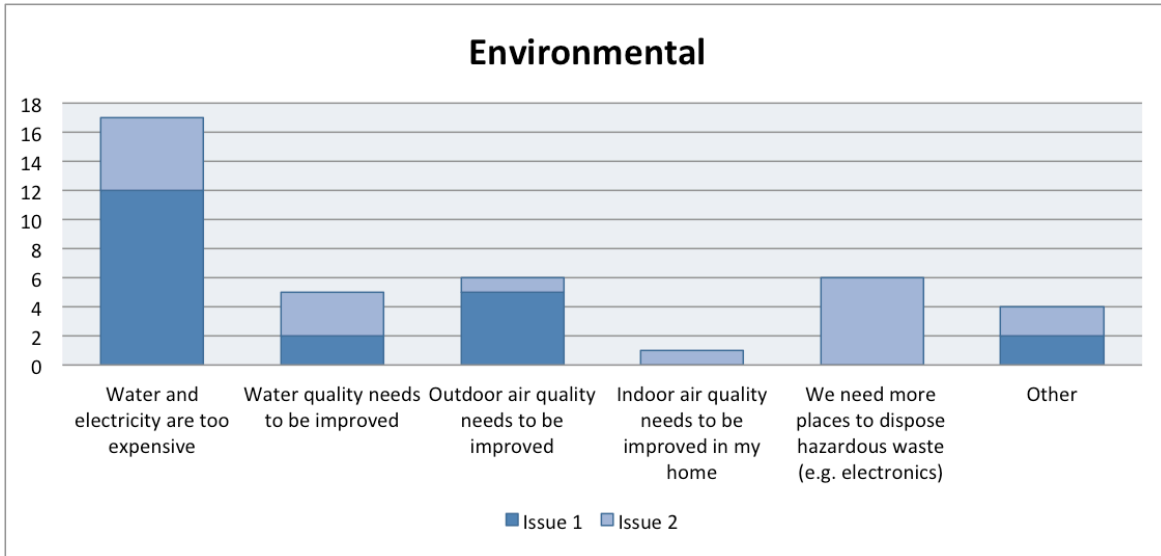
Similarly to community workshop input, the issue *Parks are not in good conditions* was a priority within this focus area. *More recreation classes and organized exercise activities* was the next most highly ranked issue.

Environmental Quality

Environmental Quality was selected as a priority focus area once, at the second community workshop.

Environmental Quality	Votes
Continue to promote the highest level of <u>Water Quality</u> (drinking, runoff, & natural bodies) working with businesses, residents, and water districts.	5
Continue to promote programs that address residential indoor <u>Air Quality</u> and review changeable sources of air pollution for outdoor.	4
<ul style="list-style-type: none"> “Affordable energy and water: some people don’t have the money to pay for it. My family had to get cut back 20% on water use and if you don’t do that, you get fined. Some people can’t afford that—they have 10 people in their home and they can’t cut back on water.” “Climate change: people die, excess heat. The ocean is going out...it’s going up, it’s really accelerating, so not sure if there are plans for this; we are also susceptible to flooding. Higher propensity to wildfires especially in the Eastside.” 	

Survey respondents ranked their top two issues for **environmental quality** as follows:

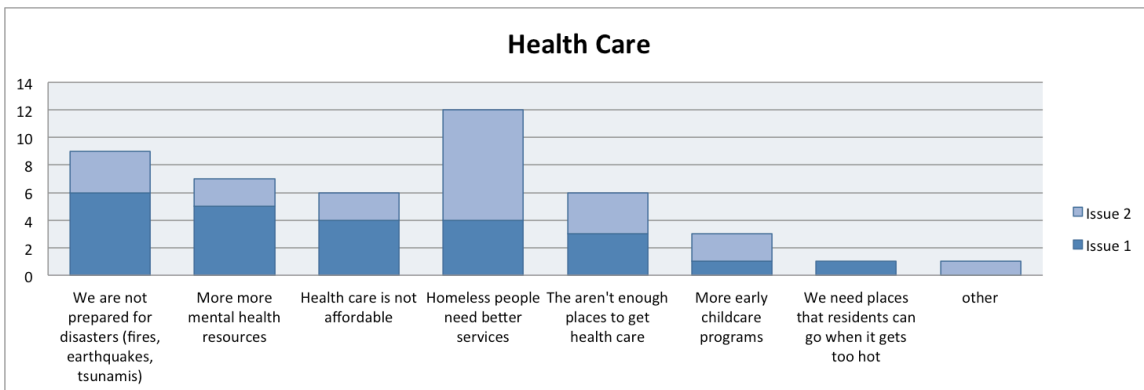


Survey participants identified the issue *Water and electricity are too expensive* as the top priority, which was also mentioned during community workshops.

Health Care

Health care was not selected as a priority focus at any community workshop.

Survey respondents ranked their top two issues for **health care** as follows:



Survey respondents identified the issues *Homeless people need better services* and *We are not prepared for disasters* as top priorities. The health care focus area was not discussed during community workshops, but homelessness was nevertheless brought up as a concern in all of the workshops.

Themes

Overall, among participants in the community workshop and stakeholder meeting and respondents to the community survey, healthy food access was identified as a top priority. Residents cited the plethora of fast food restaurant (particularly in the west side of Chula Vista), the lack of full-service grocery stores, and the high cost of healthy foods as challenges that make it hard to eat healthy food. Stakeholder meeting participants focused on solutions to this

problem, highlighting HCVAP strategies around community gardens, locally grown produce, and nutrition programming at schools.

Another priority issue among community workshop participants was transportation. Residents described that whether they are walking, biking, using public transportation, or personal vehicles, they are concerned about streets being in poor condition with potholes, insufficient lighting and crosswalks; poorly kept sidewalks; several inconveniences in taking public transportation; and congestion of vehicles on the road.

In addition, the problem of homelessness and lack of lighting in specific neighborhoods was echoed throughout the three community workshops. Another important theme conceptualized in all meetings was the issue of equity. Residents noted the inequities in access to resources and assets in the west side of the city as compared to the east. One inequity that was raised frequently was income inequality, and how having a low income impacts access to healthy foods, affordable housing (discussed in Land Use strategies), and affordable energy and water (discussed in Environmental Quality strategies). This is exemplary of the connection between social determinants of health and health outcomes.

Chula Vista residents who participated in the community workshops, survey, and stakeholder meeting provided insightful information about gaps in service and identified places where the city can allocate resources. However, residents were also asked to identify assets in their neighborhoods. Based on responses, there seems to be overall Chula Vista pride especially with regard to the central location of the city, the people, and the city's tranquility and calmness.

As stated above, stakeholder meeting participants focused primarily on the solutions to many of the city's problems. Several updates to strategies and new strategies were identified.

Demographic, Health Status, and Health Inequities Data

Chula Vista is located in southern San Diego County, 7.5 miles south of downtown San Diego and 7.5 miles north of the Mexican border. It is within the South Region of the county, which also includes the cities of National City, Coronado, Imperial Beach, and San Ysidro, as well as surrounding county areas. Chula Vista is the second largest city in the San Diego metropolitan region with a population of 248,048.¹

Demographics

Total population	248,048
Race/Ethnicity	
White (not Hispanic)	20.2%
Hispanic or Latino (of any race)	58.55%
Black (not Hispanic)	4.2%
Asian	13.9%
Native Hawaiian/Pacific Islander	0.3%
Unemployment rate (16+)	12.5%
Language spoken at home	
English only	42.9%
Spanish	46.0%
Asian/Pacific Island language	9.4%
Other language	1.6%
Percent below poverty level	
Population	11.8%
Families	10.2%
Families with Children	14.1%
Percent single parent homes	27.0%
Vehicles available in household	94%

Source: US Census American Community Survey Demographic and Housing Estimates, 2009-2013 American Community Survey 5-Year Estimates.

Community Engagement

According to city staff, historically, voter turnout in Western Chula Vista has been low. In 2015 the City of Chula Vista approved a districting plan. Beginning in 2016 and 2018, those running for councilmember will have to live in their respective districts and will be elected by voters living in the respective districts. This may lead to increased voter turnout, which is one way residents can engage in their communities.

Civic associations and other opportunities for residents to engage in their communities exist in Chula Vista. For example, the Promise Neighborhood in the Castle Park community of Chula Vista focuses on family, education, health, and community. The Southwest Civic Association and the Crossroads group are also based in Western Chula Vista.

Physical Activity

In the South Region of San Diego County, which according to the County of San Diego Health and Human Services geographic boundaries includes Chula Vista, Sweetwater, South Bay,

National City, and Coronado, 19.3% of children ages 5-11 have been physically active 1+ hours per day in past week. This is slightly lower than the county proportion of 22.1%.²

The Healthy Communities Atlas Tool maps youth physical activity levels for census block groups in the region. For areas where data is available, physical activity levels vary a great deal, with slightly higher levels in the eastern portion of the city as compared to the western portion.³

Obesity and overweight

In San Diego County during the 2012-13 school year, 30.7% of fifth graders, 27.2% of seventh graders, and 23.1% of ninth graders were considered obese. Rates were even higher for African-American and Latino youth.⁴

More adults are overweight or obese in the South Region (65.6%) compared to San Diego County (58.5%).⁵

Chronic diseases

Diabetes

Diabetes prevalence is greater in Chula Vista than in the South Region and the county as a whole.⁶ In Chula Vista in 2012, there were 47 diabetes deaths (40.3 per 100,000). This is higher than the rate of 26.8 per 100,000 in the South Region and the rate of 20.7 per 100,000 in San Diego County.⁷

There were 283 diabetes hospitalizations (242.7 per 100,000) in 2012. This is higher than the rate of 186.3 per 100,000 in the South Region and 135.0 per 100,000 in the county.

There were 352 emergency department discharges (301.9 per 100,000) in the same year. This is greater than the rate of 192.0 per 100,000 in the South Region and the rate of 143.4 per 100,000 in the county.

Asthma

In Chula Vista in 2012, there were 116 asthma hospitalizations (99.5 per 100,000). This is higher than the rate of 74.8 per 100,000 in the South Region and the rate of 70.7 per 100,000 in the county.

In the same year there were 786 emergency department discharges for asthma in Chula Vista (674.1 per 100,000). This is higher than the rate of 409.0 per 100,000 in the South Region and the rate of 318.8 per 100,000 in San Diego County.

Traffic Safety

In Chula Vista in 2011, there were 7 reported fatalities and 761 reported injuries due to motor vehicle collisions.⁸ Of those:

- 1 pedestrian was killed and 58 pedestrians were injured.

- 42 bicyclists were injured.
- 3 vehicle drivers were killed and 628 were injured.
- 3 motorcyclists were killed and 31 were injured.

Comparing these values to the 2013 population estimate above, there were 2.8 motor vehicle crash-related deaths per 100,000 population in Chula Vista in 2011. This is lower than the Healthy People 2020 target of 12.4 deaths per 100,000 population.⁹ There were 306.8 nonfatal motor vehicle crash-related injuries per 100,000 population in Chula Vista in 2011. This is lower than the Healthy People 2020 target of 694.3 nonfatal injuries per 100,000 population.

A different analysis found that Chula Vista ranks low for walkability and safety. The 2015 San Diego Regional Walk Scorecard,¹⁰ which measures walkability in the San Diego region, gave Chula Vista a relatively low “status of walking” score, which reflects how many people choose walking to get around and how safe they are when they walk. Chula Vista’s low score was due to “lower rates of walking and higher collision rates.”

Access to Transportation Resources

Light Rail

The Blue Line of the San Diego Metropolitan Transit System begins in downtown San Diego and travels south to San Ysidro, with three stops in Chula Vista (E Street, H Street, and Palomar).¹¹ The light rail line between San Diego and the Mexican border is the busiest line in the system.¹² All light rail stations and vehicles were recently updated to facilitate easier access for wheelchair users.¹³

An additional north-south light rail line is planned but a construction date and exact location have not yet been determined.¹⁴

The San Diego Regional Walk Scorecard¹⁵ found that cities in the South Bay, including Chula Vista, have higher percentages of population and employment in close proximity to high frequency transit service.

Bus

San Diego Metropolitan Transit System also operates a network of local buses in Chula Vista. Bus Rapid Transit (BRT) has been funded and construction of these lines will begin in 2016.¹⁶

Pedestrian Facilities

Some areas of Chula Vista, such as the western portion, have only 21%-65% streets with sidewalks.¹⁷ According to city staff,¹⁸ streets in the southwest portion of the city (west of I-805) are more likely to have missing sidewalks. The city has recognized the lack of sidewalks in this area and has utilized Section 108 federal loan funds to construct sidewalks and ADA curb ramps in a number of areas, and has applied for grant funding from the state to support construction of pedestrian and bicycle resources.

The San Diego Regional Walk Scorecard¹⁹ paints a more positive picture. This analysis determined that Chula Vista was one of two cities with the highest ratio of total miles of

sidewalks to miles of streets, meaning that compared to the region, Chula Vista has good sidewalk coverage.

There are approximately 9,000 streetlights throughout Chula Vista.²⁰ According to city staff,²¹ most areas have streetlights, although they are not at a pedestrian scale for the most part.

Bicycle Facilities

Chula Vista has a network of bike lanes (on-road lane within vehicle right-of-way, separated by signage and roadway striping) and bike routes (route within vehicle right-of-way identified by signage only without roadway striping), with a few bike paths, which are completely separated from vehicles.²² The Chula Vista Bikeway Master Plan was last updated in 2011 and includes recommendations for many additional bike facilities.²³

Some participants in HCVAP community workshops expressed that bike lanes contain debris left over from street sweeping.

Safe Routes to School program

Chula Vista has the largest kindergarten through sixth grade district in the state of California. In 2007 the city and the Chula Vista Elementary School District were awarded Safe Routes to School (SRTS) grants. The program has now spread to 36 elementary schools and six middle schools.²⁴ The success of the SRTS program in Chula Vista has been attributed to the extensive engagement of the community in the application process, expansion of the program, and ongoing efforts today.²⁵ A recent evaluation of local middle schools' street and sidewalk infrastructure, including its connectivity and coverage, led to recommended school route maps for pedestrians and bicyclists within a 1-mile radius around Chula Vista Middle Schools.²⁶

Vehicle Infrastructure

In general, streets in southwestern portion of Chula Vista are not maintained as well as those in the east.²⁷

Chula Vista used to have a car sharing program, car2go. However, the program was discontinued in Chula Vista as of June 2015.

Publicly available alternative fuel stations offering alternative fuels are located in various locations around the city. Nine stations provide electricity, one provides propane, one provides both biodiesel and ethanol, and two provide compressed natural gas.²⁸

Parks

An often-used standard for park access is the number of acres per 1,000 residents in a city. Many different values have been used in this standard, including 2.8 acres per 1,000 population by the City of San Diego²⁹ and between 6.25 and 10.50 acres of developed open space per 1,000 by the National Recreation and Park Association.³⁰ In Chula Vista there are 560 acres of parkland,³¹ which means that there are 2.26 acres per 1,000 residents of the city.

However, limitations to this standard are that it doesn't account for a variety of recreation activity preferences that may depend on age, cultural, or interest characteristics. For example, different populations may prioritize different uses such as playgrounds, wilderness trails, sports fields, or picnic areas. Other standards exist such as household distance to parks.

According to HCVAP community workshops, some parks in the city are not clean, don't have enough lighting, are populated by homeless people, and don't feel safe.

Parklets

There are currently no parklets in Chula Vista. However, the Chula Vista Library was awarded funding for conversion of a parking lot into a landscaped parklet encouraging pedestrian access to the library.³²

Affordable Housing

An indicator of housing unaffordability is when housing expenditures exceed 30% of household income.³³ In Chula Vista, 43.1% of homeowners and 53.7% of renters spend over 35% of household income on housing.³⁴

As in many places in the state, there is a deficit of rental units both affordable and available to extremely low-income renter households (those with incomes at 30% or less of the area median income). In San Diego County, there are less than 25 units available per 100 extremely low-income households.³⁵

The median home value in Chula Vista is 4.6% less than the California average and 101.9% greater than the national average. The median rental rate in Chula Vista is 2.7% greater than the state average and 39.7% greater than the national average. The cost of living in Chula Vista is 1.9% less than the California average and 33% greater than the national average.³⁶

Food

Supermarket Access

The Reinvestment Fund's (TRF's) PolicyMap has developed a tool to measure limited supermarket access. Their methodology identifies areas where residents travel longer distances to reach supermarkets compared to the average distance traveled by residents of areas that are not low or moderate income. According to their tool, which is included in the Healthy Food Access Portal,³⁷ none of the Chula Vista zip codes (91910, 91911, 91913, 91914, and 91915) have limited supermarket access. Based on the Healthy Communities Atlas mapping tool developed by SANDAG,³⁸ it appears that there is a lower percentage of households within walking distance of a grocery store or farmers' market on the east side of the city compared to the west side. For census block groups in the west side of the city, it appears that between 81% and 100% of households are within walking distance (0.6 miles/1 kilometer) of a grocery store or farmers market. However this data is old and with the recent closing of the Haggen supermarkets, some areas of Chula Vista may now have limited access to a full-service supermarket.

Fruit and Vegetable Consumption

According to the Healthy Food Access Portal,³⁹ of the adult residents in the five Chula Vista zip codes, 81% reported eating fewer than 5 fruits and vegetables per day, and 19% report eating five or more per day.

Fast Food

According to the California Department of Public Health's Network for a Healthy California GIS Map Viewer,⁴⁰ fast food outlets are abundant throughout the city but the largest clusters are along Third Ave and Broadway in Western Chula Vista.

Community Gardens

According to the San Diego Community Garden Network,⁴¹ there are five community gardens in Chula Vista. These include those identified as "community garden," "ed/training," and "school/community."

Food Insecurity

Approximately 14.3% of American households were food insecure at least some time during 2013. There are food-insecure households and residents in Chula Vista, as evidenced by the fact that St. Rose Lima food pantry in Chula Vista, which is just one of several food pantries serving the city, serves 1,084 homeless and low-income clients.⁴² According to Feeding America San Diego,⁴³ one in five children in San Diego County are at risk of hunger.

Health Care

In the South Region, 16.2% of adults have no usual source of healthcare. This matches the proportion in the county. The South Region has a higher percentage of people who are uninsured all or part of the year (34.1%) than the county (26.9%).⁴⁴

Mental Health

In Chula Vista in 2012, 33 people (28.3 per 100,000) were hospitalized due to an anxiety disorder. This is much higher than the rate of 17.3 per 100,000 in the South Region and the rate of 17.5 per 100,000 in San Diego County.⁴⁵

In Chula Vista in 2012, 625 people (536.0 per 100,000) had anxiety disorder-related emergency department discharges. This is much higher than the rate of 329.6 per 100,000 in the South Region and the rate of 258.2 per 100,000 in San Diego County.

In Chula Vista in 2012, there were 9 suicides (7.7 per 100,000), which is similar to the South Region rate of 7.8 per 100,000 and lower than the rate in San Diego County (13.0 per 100,000).

According to a Stakeholder Meeting participant who works at Sharp Chula Vista Hospital, there are 80 mental health cases in that hospital's emergency department per month.

According to Stakeholder Meeting participants, language and cultural barriers limit Chula Vista residents' knowledge of existing mental health resources. Participants also emphasized that mental health needs are high in Chula Vista.

Air Quality

A Healthy Communities Atlas map⁴⁶ showing household proximity to high traffic roads, rail yards and ports indicates that some block groups in Chula Vista have 60-100% of households within 500 feet of high traffic roads. These areas with the highest proximity are primarily surrounding Interstates I-5 and I-805, but there are also areas along the northern border of the city (Highway 54) and in northeast and portions of the city that contain above 10% households within 500 feet of these sources of air pollution.

Interstates I-5 and I-805 are truck routes,⁴⁷ which means that they accommodate highly polluting diesel-powered trucks.

According to city staff,⁴⁸ low-income populations are most likely to live near busy roadways in Chula Vista.

Secondhand smoke

California law prohibits smoking in nearly every workplace, including restaurants.⁴⁹ Chula Vista has an ordinance banning smoking at all outdoor eating establishments as well.⁵⁰

Literature Review

Health impacts of community engagement and empowerment

Socioeconomic factors such as inadequate and unsafe housing, work environments, and neighborhoods; low educational attainment; social exclusion; poverty; racism; and other structural inequities lead to poor health outcomes.⁵¹ Community empowerment has the potential to reduce the severity of impact of these social, political, economic, and environmental determinants that create poor health outcomes and inequities. As the final report of the World Health Organization Committee on the Social Determinants of Health states, "Any serious effort to reduce health inequities will involve changing the distribution of power within society and global regions, empowering individuals and groups to represent strongly and effectively their needs and interests and, in doing so, to challenge and change the unfair and steeply graded distribution of social resources (the conditions for health) to which all, as citizens, have claims and rights."⁵²

Youth engagement, such as working with other youth and with policymakers to impact issues of importance, can lead to a variety of lifelong benefits such as reduced risky behavior, increased success in school, and greater engagement in their communities and civic participation later in life. In addition, civic engagement provides young people with opportunities to gain work experience, acquire new skills, and to learn responsibility and accountability.⁵³

Health impacts of physical activity

Pedestrian, bicycle, and public transit infrastructure encourages active transportation. Walking and bicycling for transportation, physical activity, and leisure is a form of physical activity,

which can prevent obesity, diabetes, and heart disease, improve mental health and physiological wellbeing, and promote longevity.⁵⁴ In pedestrian-oriented neighborhoods people walk an average of 70 minutes longer per week.^{55 56} On the other hand, a high measure of vehicle miles traveled (VMT) is associated with less physical activity and a high prevalence of obesity.^{57 58}

Health impacts of traffic safety

Variables associated with pedestrian collisions include pedestrian volume,⁵⁹ vehicle volume,⁶⁰ vehicle type,⁶¹ vehicle speed,⁶² intersection design, pedestrian facilities, lighting, and weather.⁶³ Street design infrastructure proven to enhance cyclist safety includes clearly-marked, bike-specific bike lanes, paths, and routes⁶⁴ (separated by barriers from vehicle traffic when possible),⁶⁵ street lighting,⁶⁶ paved surfaces, low-angled grades⁶⁷ bicycle signage, shared lane markings and bicycle-specific signals.⁶⁸ In addition, these features enhance pedestrian safety by separating bicycles from sidewalks. Complete streets policies and practices support these types of infrastructure.⁶⁹

Health impacts of choosing modes of transportation besides vehicles

Social cohesion: Walking, bicycling, and public transit encourages casual contact from unplanned social interactions.⁷⁰ For the elderly and the disabled, limited access to public transit creates barriers to participation in community and civic life, potentially leading to isolation and feelings of depression and alienation.⁷¹

Impact on budget: A household with two adults that uses public transit saves an average of \$6,251 per year compared to an equivalent household that owns two cars.⁷² The savings associated with taking public transit can be used for other necessities including healthcare, food, housing and clothing, and thereby lead to improved health.

Access to resources: Transportation resources such as public transit and pedestrian and bicycle infrastructure allow people to access places and resources they need to live healthy lives, including workplaces, schools, medical care, healthy food, childcare, parks, gyms, and recreational activities.

Multimodal planning: Multimodal planning refers to transportation planning that considers and connects multiple travel modes, such as bicycling, walking, public transit, and car sharing. Transport options are effectively integrated so there is a high degree of accessibility even for non-drivers.⁷³ The presence of efficient, accessible, and connected forms of transportation besides driving will encourage use of these resources and thus increase physical activity and improve many health outcomes. In addition, use of these alternative forms of transportation will reduce air pollutants that cause negative respiratory health impacts and climate change.

Air quality: See air quality section below.

Physical activity: See physical activity section above.

Health Impacts of Safe Routes to School

In 2005, Congress created the Safe Routes to School (SRTS) program to improve safety and increase the number of children walking and biking to and from school. The program includes educational campaigns and road improvements at or near schools. Research indicates that SRTS has increased rates of walking and biking and improved safety. A study⁷⁴ found that SRTS and actively commuting to and from school in general can:

- Improve physical activity levels, mental health, and academic performance;
- Increase the number of students who walk or bike to and from school;
- Improve safety of walking and biking to and from school, such as reduce child pedestrian injuries; and
- Lower healthcare and transportation costs for school districts and families.

Health Impacts of bike sharing

A 2013 meta-analysis⁷⁵ of bike share studies found that a key motivation for using bike share programs is convenience. As that analysis points out, some researchers have determined benefits of bike share to be flexible mobility, emission reductions, individual financial savings, reduced congestion and fuel use, health benefits associated with exercise, and increases in public transit use. However, other researchers have found little evidence for a reduction in car use, which would negate the emissions reductions, and reduced congestion and fuel use impacts. Another study⁷⁶ found that when taking into account traffic safety risks, overall health benefits for bike sharers differ by age, with older riders gaining more benefits than younger ones.

Health impacts of car sharing

Car sharing reduces vehicle miles traveled and carbon emissions. According to a Zipcar analysis,⁷⁷ on average, people drive 40% fewer miles after joining a car share program. A Transportation Research Board study found that each car-sharing vehicle takes approximately 15 private cars off the road.⁷⁸ Use of a car share program can also increase walking, bicycling and public transit use. A survey of users of car share programs in the US and Canada found that 75% of respondents walk to access a shared car, 19% use public transit, and 9% ride a bike.⁷⁹ Car sharing can save households income that can be saved for other resources: a study by Frost & Sullivan estimates that car sharing can reduce total transit costs for its members by 70%.⁸⁰

Health impacts of alternative fuel use

Use of alternative fuels reduces emissions of pollutants associated with gasoline and diesel that are harmful to health. For example, a natural gas vehicle can produce 80% fewer tailpipe emissions than a gasoline vehicle, and a propane vehicle can produce 60% fewer emissions than its gasoline counterpart.⁸¹ Electric vehicles produce no tailpipe emissions, however, there are often emissions from the process of generating electricity. Reducing emissions associated with gasoline and diesel vehicles improves air quality and reduces health impacts like respiratory and cardiovascular disease, cancer, and premature mortality.

Health impacts of street paving

A study that examined paving streets in a residential area in Acayucan, in the Mexican state of Veracruz, which had previously unpaved streets showed increases in quality of life indicators such as household investment in durable goods, motor vehicle ownership, property values, investment in home improvement, and use of credit.⁸² Residents also had a higher degree of satisfaction with their government after streets were paved. This study may only be partially relevant to a US city due to differing sociopolitical and economic climates, however no relevant studies were found for US cities.

Health impacts of air quality

The presence of air pollutants in the air that we breathe has a direct impact on respiratory and cardiovascular disease⁸³ and elevates risks of cancer and premature mortality.⁸⁴

Indoor air quality: Because people spend the majority of time indoors, indoor air quality is critical. Poor air quality can cause and exacerbate infections, lung cancer, and chronic lung diseases such as asthma. Examples sources of indoor air pollution include asbestos, bacteria and viruses, building and paint products, carbon monoxide, carpets, cleaning supplies and household chemicals, cockroaches, dust mites and dust, floods and water damage, formaldehyde, lead, mold and dampness, pet dander, radon, residential wood burning, secondhand smoke, and volatile organic compounds.⁸⁵

Smoking and secondhand smoke: Secondhand smoke causes more than 41,000 deaths per year. It can cause or exacerbate lung cancer, respiratory infections, and asthma.⁸⁶

Health impacts of water quality

Clean water is necessary for public health. Water from rain and melting snow can pick up toxic chemicals, dirt, trash, and disease-carrying organisms when it runs off roads into rivers and other water bodies. This can lead to contamination of drinking water and water bodies that people swim in. Health impacts of contaminated drinking water can include gastrointestinal illness, reproductive problems, and neurological disorders.⁸⁷

The United States has one of the safest public drinking water supplies of the world,⁸⁸ and Chula Vista has no known issues of contamination.

Street sweeping: Deposits containing heavy metals and other pollutants from motor vehicle emissions, industry, soils, and plants accumulate on road surfaces.^{89 90} Storm runoff then carries these deposits into storm drains and they go on to pollute water bodies and in some cases groundwater and drinking water. This can adversely affect public health from direct human contact with contaminated water and from drinking water.⁹¹

In dry weather, these contaminated roadway deposits can also be dispersed into the air,⁹² causing human exposure through inhalation.

Health impacts of waste and toxics

There are many wastes and toxics present in the environment: for example, household waste, vehicle emissions, and industrial waste and emissions. Many of these wastes contain chemicals that are hazardous to health. When people are exposed to waste and toxics through inhalation, ingestion, and skin contact, they can experience a variety of immediate or long-term health hazards causing risks ranging from mild irritation to premature mortality.⁹³

Health impacts of climate change

Global climate change is a serious threat to the health and wellbeing of the planet and all its existing life forms, including humans. Greenhouse gases, by contributing to climate change, may increase heat-related illness (i.e., illnesses such as heat stroke that result when a body's temperature control system is overloaded) and death, health effects related to extreme weather events, health effects related to air pollution, water-borne and food-borne diseases, and vector-borne and rodent-borne disease.^{94,95}

Climate change is likely to reinforce and amplify socioeconomic disparities, leaving low-income, minority, and politically marginalized groups with fewer economic opportunities and more environmental and health burdens.⁹⁶ Inequities in the ways different communities will be impacted by climate change can result from certain populations having greater existing health burdens and vulnerabilities. In addition, some communities have a lesser ability anticipate, cope with, resist and recover from the impact of extreme weather events and associated changes such as air pollution and infectious diseases.

Transportation is a primary source of excess greenhouse gas emissions (CO₂ in particular), which are the major contributors to global climate change. In the U.S., transportation energy use is concentrated on highways, totaling 81.5% of total transportation energy use in 2013. Also in 2013, 58% of the total transportation energy use was from light-duty vehicles (cars, light trucks, and motorcycles).⁹⁷ Passenger vehicles are the largest single source of greenhouse gas emissions in California, accounting for 30 percent of the total.⁹⁸

Industry is another major contributor to climate change: industrial greenhouse gas emissions accounted for 21% of total US greenhouse gas emissions in 2013, making it the third largest contributor in the US after electricity and transportation sectors.⁹⁹

Health impacts of environmental injustice

Environmental justice is the fair treatment and meaningful involvement of all people regardless of race, color, national origin, or income with respect to the development, implementation, and enforcement of environmental laws, regulations, and policies.¹⁰⁰ People of color, low-income communities, and Native American populations have historically been disproportionately exposed to harmful environmental conditions that lead to host of serious and life-threatening health conditions such as cancer and respiratory conditions.

Environmental injustices are present in San Diego County. For example, in Barrio Logan, where people of color make up 97% of the population and families in poverty make up 35% of the

population, there are 40 times more pounds of toxic substances in the community than there are in La Jolla. Only 14% of La Jolla's population is people of color only 3% of families live in poverty.¹⁰¹

Health impacts of parks

Air quality: Trees and vegetation are a big part of many parks. Trees can absorb gaseous pollutants such as ozone, nitrogen dioxide, and sulfur dioxide from the air, and they also intercept particulate matter. Reducing these pollutants in the air lowers risks of asthma and other respiratory conditions, decreased lung function, heart attack, and premature death. Trees also transpire water and provide shade, which lower air temperatures and prevents heat-related illness as well as reducing ozone levels.¹⁰²

Medical benefits: Medical benefits associated with contact with nature include lower blood pressure and cholesterol levels, enhanced survival after a heart attack, more rapid recovery from surgery, fewer minor medical complaints, and lower self-reported stress.^{103 104 105}

For students and children, exposure to nature and green space has been shown to improve attention. College students with more natural views from their dorm windows score higher on attention tests.¹⁰⁶ Research indicates that for children with attention deficit disorder, activities in green settings lead to less severe symptoms.¹⁰⁷

Physical Activity and Obesity: A study of public parks in Los Angeles suggests that neighborhood parks promote exercise, especially for people living within a mile of a park. The study found that proximity to parks predicted use more than size of parks.¹⁰⁸ Another study found that children in neighborhoods with more green space (as determined by satellite) have lower odds of an increasing body mass index.¹⁰⁹

Factors determining park use: People use parks for a variety of reasons, and parks systems should provide a variety of functions to accommodate a diversity of users. People from different age, ethnic, cultural, and socioeconomic groups may have different traditions in physical activity and attitudes toward natural settings.¹¹⁰ Examples of various factors that draw people to parks are exercise and team sports, dog-walking, having a picnic, and contact with nature.

Perceptions of crime and a lack of safety deter people from visiting parks. This is particularly true in neighborhoods that have gang violence, where parks are sometimes convening grounds for gang activity.¹¹¹

Parklets: A parklet is a small public sidewalk extension, usually using two parking spaces, that incorporates non-permanent materials. Features such as seating, trees, flowers, shrubs, umbrellas, bike parking, or lighting can provide comfort and character to a parklet. They are intended to provide a public space for people to sit, relax, and socialize, and they can aesthetically enhance an overall streetscape. Parklets can improve the character and beauty of a neighborhood, enhance community building, and increase foot traffic and business.¹¹² Though no studies have been done on the health implications of parklets to our knowledge, these improvements are likely to impact health primarily through improved social cohesion.

Health impacts of affordable housing

According to the U.S. Department of Housing and Urban Development (HUD), to be affordable, housing costs should be no more than 30% of one's monthly income.¹¹³ High housing costs relative to the income of an individual or household can threaten food and financial security, lead to overcrowded living conditions and acceptance of lower-cost, substandard housing, and can also force people to move to where housing costs are lower or possibly become homeless. Spending a high proportion of income on rent or a mortgage means fewer resources for heating, transportation, health care, childcare, and food.

Residential stability has been identified as one of the most important predictors of community health^{114 115 116} Moving can result in job loss, difficult school transitions, and the loss of health protective social networks.

Substandard housing, which is often available at lower cost, can increase exposure to numerous health hazards, such as waste and sewage, physical hazards, mold spores, poorly maintained paint (often containing lead), cockroach antigens, old carpeting, inadequate heating and ventilation, exposed heating sources and wiring, and broken windows. These all can lead to negative health outcomes, such as poor respiratory health.

Overcrowding can seriously impair quality of life. Sharing housing can mean crowded conditions with higher risks for mortality, infectious disease, and poor child development.^{117 118 119} For children, overcrowding has also been shown to lead to an increased risk of ear infection. Exposure to one or more environmental risks – for example, overcrowding or noise – has been shown to increase urinary cortisol and epinephrine, biomarkers of chronic stress.^{120 121} Overcrowding and poor-quality housing also have a direct relationship to poor mental health, developmental delay, and heart disease.¹²²

Health impacts of natural disasters

Natural disasters that may occur in Southern California include earthquakes, tsunamis, floods, wildfires, and landslides. While each of these disasters is unique, health impacts of any of them can include disease outbreaks, injuries, mental health impacts, and deaths. Many health concerns appear much later than the actual disaster. Damage to healthcare facilities, roads, drinking water supply, waste management, toxic substance control, and other infrastructure can have long-reaching health consequences.¹²³

As we have observed in history, existing public health concerns and disparities often become exacerbated in natural disasters. For example, before Hurricane Katrina hit New Orleans in 2005, a quarter of the population lived below poverty levels and 20% were uninsured. The hurricane resulted in an overwhelming load on an already maxed out health care system, and almost all of the deaths occurred in populations already disadvantaged.¹²⁴

Health impacts of food security and nutrition

The food that we consume plays a critical role in our health outcomes, and is directly related to prevalence of obesity and other food-related diseases in families and neighborhoods.¹²⁵ Consumption of safe and healthy foods can serve as a method of preventive healthcare, since

adequate nutrition is essential for maintaining good health.¹²⁶ This is of critical importance for young people who are building the habits that will likely shape their behavior throughout their lives. It is important that schools educate students about the fundamentals of good nutrition and that they provide healthy and safe foods for students to access at school.¹²⁷

Equitable access to nutritious food is paramount for promoting the health and well being of a community. This means that communities, and particularly those of a lower-income level, must have access to proximate full-service supermarkets. Research shows that smaller retail food stores commonly sell their products at an approximately 10% higher cost than supermarkets,¹²⁸ typically offering food that is less fresh and more heavily processed. Therefore, when access is not a priority—when supermarkets are not located within low-income neighborhoods and when healthy and safe foods are priced out of reach for lower-income individuals—people’s choices are limited. When healthy food access is not highly prioritized, low-income people consume the food that is more realistically available, which is often less expensive, highly processed food from neighboring corner stores or fast food restaurants.¹²⁹ According to the US Department of Health and Human Services, diet-related disease is one of the top sources of preventable deaths among Americans,¹³⁰ and disproportionate rates of obesity fall most heavily on populations with the highest poverty rates.¹³¹ Therefore, education about and access to food that is healthy and safe will benefit low-income communities in terms of their nutritional health and life outcomes.

Food insecurity: The USDA defines food insecurity as “a household-level economic and social condition of limited or uncertain access to adequate food.”¹³² Hungry people are 2.9 times more likely to be in poor health and have a higher likelihood of chronic conditions. They are also more likely to be obese (though this may seem paradoxical, heavily processed foods are cheaper but have high calorie and lower nutritional content), have underweight babies, suffer from poor mental health, and commit suicide.¹³³ Hunger is particularly devastating to children, because proper nutrition is critical to a child’s development. Hunger and poverty often go hand in hand, and seniors, African Americans, and Latinos are at greater risk of hunger. African Americans are more than twice as likely to suffer from food insecurity as their non-Hispanic white counterparts.¹³⁴

Community gardens: Another resource for accessing healthy foods is community gardens. Community gardens are typically open to residents who share in the maintenance and products of the garden, including healthy and affordable fresh fruits and vegetables. Gardens offer physical and mental health benefits by providing opportunities to eat healthy fresh fruits and vegetables, engage in physical activity, strengthen social connections, improve communities by beautifying vacant lots and public parks, and decrease violence.¹³⁵

Urban agriculture: Urban agriculture practices such as gardening, beekeeping, and keeping chickens at private residences can improve nutrition and lead to other health benefits. A paper by members of the North American Initiative of the Community Food Security Coalition¹³⁶ illustrates that the more experience people have growing their own food, the more likely they are to eat that food. In addition, urban agriculture encourages physical activity.

Farmer’s Markets and Local Food Distribution: Farmer’s markets that accept food stamps and WIC coupons can be a great source of healthy, fresh, and local food. Farmer’s markets can strengthen communities and support the local economy.¹³⁷ Community cohesion is beneficial to mental health and wellbeing, and a strong local economy is essential for personal and

household financial stability, availability of free time to relax, and the ability to pay for resources beneficial to health. In addition, distribution of food from farms to local institutions, restaurants, and other food outlets can increase the availability of healthy food in a community.

Health impacts of healthcare and prevention

Preventive care is important for community health because it works against acute illness and avoidable disease and death.¹³⁸ Studies show that individuals are more likely to receive preventive healthcare services if they have a usual source of primary care or if they are covered by health insurance.¹³⁹ Access to these two factors—health insurance and regular source of care—can be restricted by a number of barriers. Some of those barriers are: high cost of insurance or services; lack of access to medical care providers due to transportation issues or a lack of nearby providers; limited to no knowledge about the healthcare system, especially for members of recently immigrated families; and a lack of confidence in providers due to fears of discrimination or even deportation based on race/ethnicity/nationality.^{140 141} Other causes for provider mistrust relate to the cultural obstacles within our healthcare system. Healthcare professionals commonly do not represent the racial and ethnic characteristics of their clients, which can lead to an insufficient level of the practitioner cultural competency necessary for treating patients in a relevant way.¹⁴² It is also the case that undocumented people remain excluded from insurance benefits, despite the Affordable Care Act's Medicaid expansion and Healthcare Exchanges.¹⁴³ These are some of the barriers that need to be addressed to open up access to preventive care for low-income and racial/ethnic minority groups.

Access to primary and preventive healthcare services and information benefits community health, and it is also cost effective for local and federal governments.¹⁴⁴ A healthcare system that does not highly prioritize and utilize preventive care services is materially and economically inefficient since it does not embrace the opportunity to “prevent pain and suffering for fewer dollars compared to waiting to treat diseases after they occur.”¹⁴⁵ For example, when poor people are unable to access primary and preventive healthcare, they depend more heavily on emergency medical treatment for their sole healthcare source. When emergency services become a person's only or primary source of care, they often present with more acute health issues that place a heavier strain on emergency medical resources and practitioner attention.¹⁴⁶

Health impacts of homelessness

Homelessness has severe impacts on health. Homeless children suffer from higher rates of depression, behavioral problems, and severe academic delays.¹⁴⁷ Death rates among the homeless are substantially higher than in the general population.¹⁴⁸ Other common health problems include mental health problems, substance abuse, bronchitis and pneumonia, wound and skin infections, and problems caused by being outdoors. Many homeless women are victims of domestic or sexual abuse.¹⁴⁹

Health impacts of heat illness

Clear associations exist between increased ambient temperature and duration, and morbidity and mortality.¹⁵⁰ In addition, being low-income, non-white, overweight, low socioeconomic status, or senior are some risk factors associated with heat illness and mortality.¹⁵¹

Health impacts of lactation

Breast milk is uniquely suited to an infant’s nutritional needs and has unparalleled health, immunological, and anti-inflammatory properties that protect against illnesses and diseases.¹⁵²

Health impacts of early childcare and early childhood education

Children attending early education programs make cognitive, social, and emotional gains that are associated with improved adult health. People who have attended preschool are more likely to go to a doctor, receive appropriate screenings and immunizations, and receive dental care, laying an early foundation for better health. Additionally, preschoolers and their parents often learn about health and nutrition, which can result in lifestyle changes that address issues such as obesity and malnutrition.¹⁵³

Strategy Scoring Tables

This section presents each strategy showing criteria for evaluating that strategy and findings corresponding to each criterion. Elements of the criteria used to evaluate each HCVAP strategy include:

- **Strategy details and context:** Additional details and context related to the strategy, as provided by City of Chula Vista staff.
- **Health impacts:** An evaluation of health impacts based on literature evidence, demographic, health status and health inequities data, and input from community members.
- **Equity impacts:** An evaluation of equity impacts based on literature evidence, demographic, health status and health inequities data, and input from community members.
- **Community priority:** Level of community priority based on input from community workshops, community survey, and stakeholder meeting.
- **Nature of population impacted:** a description of the population likely to be impacted by this strategy if implemented.
- **Magnitude of impact on health and equity:** An assessment (high, medium, or low) of the number of people that would be impacted and the severity of the impact from a health and equity standpoint.
- **Recommendations (if applicable):** Specific recommendations to improve implementation of the policy, based on literature evidence, community input, and/or an evaluation of regions or populations within Chula Vista with specific needs.
- **Overall priority level:** Overall priority level for strategy, incorporating evaluations of health impacts, equity impacts, community priority, and magnitude of impact on health and equity.

Community Engagement

HCVAP Strategy: Community Engagement (all actions)

Criteria	Findings
<i>Strategy details and context</i>	<p>Specific actions:</p> <ul style="list-style-type: none"> • <u>Inventory Community Assets</u> and establish a <u>Health Advisory Commission</u> representative of the community partners and residents. • Develop the <u>“Healthy Chula Vista” Brand</u> and market health benefits/issues through social media, events, and engagement strategies. • Promote staff and partners as <u>“Community Clinicians”</u> to championing health throughout the City. • <u>Link Business, Philanthropists</u>, and community to maximize resources. • Facilitate <u>Health Series Workshops</u> in a culturally appropriate way to address specific community issues. • Develop and promote existing wellness activities as a means of <u>Civic Engagement Events</u> utilizing Healthy Chula Vista partners. • Adopt a City <u>Limited English Proficiency (LEP)</u> plan to remove barriers for non-native English speakers. • Review the <u>Public Participation Policy</u> to ensure effective civic involvement at all levels address cultural, socioeconomic, literacy and linguistic equity. • <u>Engage Youth and Seniors</u> through volunteerism, issue identification, problem solving, and health issues specific to these populations. • Establish a <u>Health Champions</u> annual recognition event. • Incorporate the nexus between cultural engagement and social and mental wellbeing in the <u>Cultural Arts Master Plan</u>.
<i>Health impacts</i>	<p>Community empowerment has the potential to reduce negative socioeconomic impacts. Community engagement, particularly for youth, can facilitate work experience, attaining new skills, and taking responsibility and accountability.</p> <p>According to Chula Vista residents, community engagement “helps people take ownership and pride in their community.”</p> <p>Voter turnout has historically been low in Western Chula Vista, but new districting may change that in the future. Civic associations and other opportunities for residents to engage in their communities are present throughout the city. These associations and organizations could be leveraged to increase engagement in city decisions.</p>
<i>Equity impacts</i>	<p>If engagement is achieved in culturally appropriate ways, these strategies have the potential to reduce inequities by involving in public decisions residents who were not previously involved.</p>
<i>Community</i>	<p>Medium-Low</p>

<i>priority</i>	
<i>Nature of population impacted</i>	All Chula Vista residents would have the opportunity to participate and benefit from these strategies. However, primary impacts will be for those not currently engaged in public decision-making, which may include youth, Spanish-speaking residents, and low-income residents.
<i>Magnitude of impact on health and equity</i>	Moderate
<i>Recommendations (if applicable)</i>	<ul style="list-style-type: none"> • Create list of existing community events to link HCVAP outreach to. • Outreach to communities that don't normally engage. • Expand work of Promise Neighborhoods into other areas of Chula Vista. • Community Workshop participants voted Strategy #1 the highest: Inventory Community Assets and establish the Healthy Chula Vista Collaborative Stakeholder group with quarterly coordination meetings. • HCVAP participants voted Strategy #8 the highest: Engage youth through volunteerism, issue identification and problem solving.
Overall priority level	Medium

Land Use

HCVAP Strategy: Land Use 1. Incorporate General Plan Amendments that address healthy communities into other relevant planning documents such as Specific Plans and address equity issues.

Criteria	Findings
<i>Strategy details and context</i>	In specific plans that have already been adopted by the city, add more transportation demand management (TDM) strategies, co-location of assets, and features to increase walkability.
<i>Health impacts</i>	<p>TDM practices aimed at reducing reliance on single-occupancy vehicles and efforts to improve walkability would lead to an increase in physical activity, which can prevent obesity, diabetes, and heart disease, improve mental health and physiological wellbeing, and promote longevity. These types of efforts also often improve traffic safety and thus reduce the potential for injuries and fatalities. Reducing driving results in improved air quality and reductions in climate change, which have positive impacts on health.</p> <p>Co-location of assets makes amenities like schools, parks, libraries, and healthy food outlets easier to access. Thus, incorporating these measures into specific plans would lead to a variety of health benefits associated with these community assets.</p>

	There has been a stronger focus on community cores and transit-oriented development in specific plans that have been adopted within the past 3-5 years. Some of the older existing specific plans lack this focus and should be updated.
<i>Equity impacts</i>	For specific plans located in disadvantaged areas of the city lacking pedestrian, bike, and public transit resources, and where community assets are not conveniently accessed, this strategy would improve equity.
<i>Community priority</i>	This strategy was not included in vote.
<i>Nature of population impacted</i>	Residents in various regions of the city where specific plans lacking these priorities are located.
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	Focus on older existing plans that lack the focus on these priorities.
Overall priority level	Medium

HCVAP Strategy: Land Use 2. Evaluate the Design Standards Manual to reflect concepts of Complete Streets, address signage barriers and other health concepts as adopted.

Criteria	Findings
<i>Strategy details and context</i>	<p>Strategy intends to evaluate health impacts of complete streets policy.</p> <p>City of Chula Vista Complete Streets Policy states the following purpose: Improve mobility and connectivity, promote community health and well-being, improve air and water quality, increase safety, enhance neighborhoods and businesses, and advance the overall quality of life for all of Chula Vista’s citizens and visitors.</p> <p>Examples listed:</p> <ul style="list-style-type: none"> • Street and sidewalk lighting • Sidewalks, median refuges, and crosswalk improvements • ADA compliant accessibility • Improved pedestrian access to transit stops and bus shelters • Bicycle accommodations, shared-use lanes, wide travel lanes or bike lanes as appropriate • Shade trees • Street furniture • Pedestrian, bicycle, and public transportation network connectivity and transportation mode-sharing
<i>Health impacts</i>	Based on the literature review, this strategy will be beneficial to health

	<p>by increasing physical activity, improving traffic safety, improving air quality and reducing climate change impacts, and reducing costs associated with reliance on vehicles. Complete streets policies also encourage social interaction and enhance public safety.</p> <p>Streets in the southwestern portion of the city (west of I-805) are more likely to have missing sidewalks. Community Workshop participants expressed their opinion that there should be more street lighting. Compared to the rest of the San Diego region, Chula Vista has higher percentages of population and employment in close proximity to public transit.</p>
<i>Equity impacts</i>	<p>Improving public transit, pedestrian, and bicycle infrastructure has the potential to benefit residents who do not own vehicles the most.</p> <p>Equity impacts are dependent on location of complete streets improvements.</p>
<i>Community Priority</i>	High
<i>Nature of population impacted</i>	<p>All Chula Vista residents that walk, bike, and use public transit as modes of transportation.</p> <p>In particular, households without a vehicle available (6% of Chula Vista population).</p> <p>Communities where complete streets features are currently lacking (e.g., sidewalks).</p>
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	Implement this strategy in areas of the city with the highest need for complete streets improvements.
<i>Overall priority level</i>	High

HCVAP Strategy: Land Use 3. Review and amend as appropriate CVMC Zoning and Conditional Use Permit (CUP) processing using a holistic approach to health considerations stressing co-location of amenities and sensitivity of uses near community assets.

Criteria	Findings
<i>Strategy details and context</i>	Update zoning policy and CUP processing to encourage proximity of community amenities (e.g., schools, parks, and libraries) and limiting certain uses (e.g., fast food and industrial) near schools and parks.
<i>Health impacts</i>	<p>Close proximity to healthy amenities like schools, parks, libraries, and healthy food outlets makes them convenient and easy to access. Thus, this strategy may lead to residents being more likely to use these amenities and gaining health benefits associated with them.</p> <p>Availability of fast food was a prominent theme at community workshops. Zoning and the CUP process could be used to limit the</p>

	<p>availability of unhealthy food sources.</p> <p>However, impacts of zoning and CUP changes are not immediate, and eventual changes in development may take years.</p>
<i>Equity impacts</i>	<p>If healthy amenities are currently less likely to be co-located in low-income, underserved neighborhoods currently, this strategy has the potential to benefit these populations the most.</p> <p>However, impacts of zoning and CUP changes are not immediate, and eventual changes in development may take years.</p>
<i>Community priority</i>	High
<i>Nature of population impacted</i>	Those living in areas that lack healthy amenities or have an abundance of un-healthy amenities that could be eliminated through zoning or CUP changes.
<i>Magnitude of impact on health and equity</i>	Moderate
<i>Recommendations (if applicable)</i>	
Overall priority level	High

HCVAP Strategy: Land Use 4. Develop an awareness campaign and update the Otay Valley Regional Park Concept Plan and consider updates to the Green Belt Master Plan to incorporate healthy community concepts.

Criteria	Findings
<i>Strategy details and context</i>	The Otay Valley Regional Park is in southern Chula Vista. The Green Belt consists of connected open space ringing the city. This strategy would promote awareness of these resources and their accessibility.
<i>Health impacts</i>	<p>In addition to providing shade and lowering temperatures, vegetation in parks can absorb and intercept air pollutants, thereby improving air quality and lowering the risks of asthma and other respiratory conditions, decreased lung function, heart attack, and premature death. Exposure to nature improves attention, encourages physical activity, and improves mental health.</p> <p>Chula Vista currently does not meet the City of San Diego’s standard of 2.8 acres of parks per 1,000 population.</p> <p>As expressed at Community Workshops, many residents were unaware of Otay Valley Regional Park and the Green Belt. In addition, workshop participants felt that many city parks are dirty and not safe. Therefore, by creating awareness, more residents may become interested in using these large regional park assets and reap associated health benefits. However, the awareness campaign and park resources must be culturally</p>

	<p>appropriate to the diversity of Chula Vista residents for these equity benefits to come to fruition.</p> <p>Stakeholder Meeting participants expressed that there are fewer parks in Western Chula Vista and that these parks have fewer amenities.</p> <p>Survey respondents indicated that they want more public resources in the city including parks.</p>
<i>Equity impacts</i>	<p>This strategy is anticipated to increase awareness of parks for all Chula Vista residents. It may especially benefit residents living in areas with poor access to parks. There is a perceived inequity in access to parks in the western portion of the city. In some cases the parks are present but the access to them is poor due to a lack of sidewalks, high-quality and paved streets, and signage.</p> <p>The awareness campaign and park resources must be culturally appropriate to the diversity of Chula Vista residents for these equity benefits to come to fruition. Also, public transportation links must be provided for some populations to have access to the parks.</p>
<i>Community priority</i>	High
<i>Nature of population impacted</i>	All Chula Vista residents; residents reached by awareness campaign; residents with poorer access to parks in their communities, residents living in close proximity to Otay Valley Regional Park and the Green Belt.
<i>Magnitude of impact on health and equity</i>	Moderate-high
<i>Recommendations (if applicable)</i>	Ensure awareness campaign is culturally appropriate. Prioritize increasing lighting in and cleaning up existing parks as well.
Overall priority level	High

HCVAP Strategy: Land Use 5. Use available Resiliency tools to evaluate the city’s emergency preparedness.

Criteria	Findings
<i>Strategy details and context</i>	<p>The purpose of this strategy is to evaluate whether the city is prepared for disasters.</p> <p>The City Resilience Framework developed by Arup is built on four essential dimensions of urban resilience: Health & Wellbeing, Economy & Society, Infrastructure & Environment, and Leadership & Strategy. Each dimension contains three “drivers,” which reflect the actions cities can take to improve their resilience.</p> <p>One driver contained in the Health & Wellbeing dimension is “Ensures Public Health Services,” which is defined as “Provide access to effective</p>

	<p>public healthcare and emergency services to safeguard physical and mental health. This includes medical practitioners and plans, as well as clinics and ambulances.”</p> <p>Another driver contained in the Infrastructure & Environment dimension is “Ensure Continuity of Critical Services,” which is defined as “Actively manage and enhance natural and man-made resources. This includes designing physical infrastructure such as roads and bridges to withstand floods so that people can evacuate, as well as ecosystem management for flood risk management. It also includes emergency response plans and contingency plans that may coordinate airports to function so that relief can be lifted in and out during a crisis.</p>
<i>Health impacts</i>	<p>If this strategy leads to improvements in emergency preparedness, it will lead to positive health impacts in the event of a natural disaster. Natural disasters can cause severe health hazards and death. Often existing public health concerns and disparities are exacerbated.</p> <p>Survey respondents indicated that the lack of preparedness for natural disasters is an issue that the city should address.</p>
<i>Equity impacts</i>	Disadvantaged populations are likely to be the hardest hit by natural disasters, so this strategy has the potential to improve conditions for these populations the most.
<i>Community priority</i>	Low
<i>Nature of population impacted</i>	Entire city; residents who are currently facing health and equity burdens that would be exacerbated by a natural disaster.
<i>Magnitude of impact on health and equity</i>	High in the event of a natural disaster, which are becoming more frequent as a result of climate change.
<i>Recommendations (if applicable)</i>	Also include a plan for improving emergency preparedness where this evaluation points to gaps.
Overall priority level	Medium

HCVAP Strategy: Land Use 6. Evaluate the Balanced Communities (“Inclusionary”) Policy Guidelines to provide Affordable Housing throughout the city and support financial self-sufficiency.

Criteria	Findings
<i>Strategy details and context</i>	The current city policy limits affordable housing in certain areas of the city. This strategy would support providing high-quality affordable housing throughout the city.
<i>Health impacts</i>	High-quality housing that is affordable for all income levels is essential for health. Affordable housing allows households enough income for other resources and prevents displacement, which can result in loss of social networks and negative mental health impacts.

	<p>In Chula Vista, 43% of homeowners and 54% of renters are currently housing-cost burdened, so some of these people would benefit from this strategy.</p> <p>Current city policies limit affordable housing in Western Chula Vista. By providing affordable housing throughout the city, this strategy would lead to more opportunities for affordable housing in Western Chula Vista.</p> <p>According to the Community Workshops and survey respondents, the lack of affordable housing in Chula Vista is an extremely high concern for residents. This was one of the biggest priorities raised in the workshops overall. Stakeholder Meeting participants also discussed their beliefs that people of different income levels should live together in the same neighborhoods.</p>
<i>Equity impacts</i>	Ensuring affordable housing for all income levels impacts low-income populations the most, as lower-cost housing is the only level of housing affordable to them.
<i>Community priority</i>	Very High
<i>Nature of population impacted</i>	Low-income populations, residents in Western Chula Vista
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	<ul style="list-style-type: none"> • Ensure affordable housing in all neighborhoods is high-quality. • Ensure high opportunity neighborhoods have their fair share of affordable housing.
Overall priority level	High

HCVAP Strategy: Land Use 7: Develop a Parklet Policy to allow business expansion (i.e., along Third Avenue).

Criteria	Findings
<i>Strategy details and context</i>	Strategy would increase parklets on Third Avenue.
<i>Health impacts</i>	Parklets can improve the character and beauty of a neighborhood, which may improve one’s sense of belonging and lead to other positive mental health impacts. By providing a public space, they can enhance community building and social cohesion, which can also have mental health benefits. In addition, they can have a positive impact on business on the area, which can bring economic benefits to local business owners and employees that can lead to financial stability and the ability to support a healthy lifestyle.

<i>Equity impacts</i>	Equity impacts are dependent on the locations of parklets. The Third Avenue community currently faces inequities, so this strategy aimed at this community may have small improvements on equity.
<i>Community priority</i>	Low
<i>Nature of population impacted</i>	Community residing and working on Third Avenue.
<i>Magnitude of impact on health and equity</i>	Low
<i>Recommendations (if applicable)</i>	
Overall priority level	Low

HCVAP Strategy: Land Use 8. Consider hiring of a Grant Coordinator.

Criteria	Findings
<i>Strategy details and context</i>	This person would work with communities to partner in grants. There is currently a barrier to getting new grants.
<i>Health impacts</i>	If hiring a grant coordinator allows the City of Chula Vista to receive grant funding and implement HCVAP strategies that they wouldn't otherwise be able to fund, this strategy would lead to positive health impacts.
<i>Equity impacts</i>	If hiring a grant coordinator allows the City of Chula Vista to receive grant funding and implement equity-focused HCVAP strategies that they wouldn't otherwise be able to fund, this strategy would lead to positive equity impacts.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	All city residents
<i>Magnitude of impact on health and equity</i>	Depends on which grants are obtained and how funding is used.
<i>Recommendations (if applicable)</i>	If hiring a grant coordinator, prioritize grants targeted to those currently facing health inequities (e.g., low income populations)
Overall priority level	Medium

Transportation

HCVAP Strategy: Transportation 1. Utilize the Complete Streets policy to ensure safe, comfortable, and convenient access to all users and establish multi-modal Performance Thresholds.

Same as Land Use 2. Not analyzed.

HCVAP Strategy: Transportation 2. Consider combining the Transit, Pedestrian & Bike Master Plans in the next update cycle.

Criteria	Findings
<i>Strategy details and context</i>	Combining these master plans will coordinate the planning of pedestrian, bicycle and public transit infrastructure in Chula Vista.
<i>Health impacts</i>	Coordinating planning for pedestrian, bicycle and public transit will streamline the use of alternative forms of transportation besides driving. Increased efficiency and quality of walking, biking, and using public transit will increase physical activity levels and decrease obesity, diabetes, and heart disease, improve mental health and physiological wellbeing, and promote longevity. In addition, these forms of transportation encourage social interaction and reduce air pollutants that cause negative respiratory health impacts and climate change.
<i>Equity impacts</i>	For households that do not own a vehicle and rely on alternative forms of transportation, which make up 6% of the Chula Vista population, this strategy has the potential to improve their transportation options.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	All Chula Vista residents that walk, bike, and use public transit as modes of transportation. In particular, households without a vehicle available (6% of Chula Vista population)
<i>Magnitude of impact on health and equity</i>	Medium
<i>Recommendations (if applicable)</i>	
Overall priority level	Medium

HCVAP Strategy: Transportation 3. Reevaluate the Pavement Management System to determine priorities and ensure equitable improvements.

Criteria	Findings
<i>Strategy details and context</i>	Current city practices maintain existing pavement but don't address unpaved and unmaintained streets.
<i>Health impacts</i>	Limited literature evidence suggests that paving previously unpaved streets increases household investment in durable goods, motor vehicle ownership, property values, investment in home improvement, and use of credit, and degree of satisfaction with government. While these indicators may not have clear links to health impacts, it can be inferred that higher spending indicates a higher perception of disposable income, better mental health, and higher quality of life.

<i>Equity impacts</i>	The majority of unpaved streets and streets lacking sidewalks are in the western portion of the city, which also faces other inequities. Thus, paving previously unpaved streets will benefit West Chula Vista and improve equity.
<i>Community priority</i>	High
<i>Nature of population impacted</i>	West Chula Vista residents, residents of low-income neighborhoods
<i>Magnitude of impact on health and equity</i>	Medium
<i>Recommendations (if applicable)</i>	
Overall priority level	Medium

HCVAP Strategy: Transportation 4. Support walking audits to address mobility for all users.

Criteria	Findings
<i>Strategy details and context</i>	Identify areas that have deficiencies such as poor sidewalk and street lighting, poor park resources, lack of ADA compliance, lack of bike and pedestrian resources, and other mobility concerns.
<i>Health impacts</i>	<p>Walking environments – including sidewalk conditions and lighting for example – and potential destinations – such as parks and shops – have been shown to influence how much and why people walk. Walking provides physical activity and increases social cohesion.</p> <p>Street lighting has been shown to reduce crime. Reduced crime is associated with better mental health and a lower risk of injuries and death. If this strategy leads to improvements in street lighting in areas where it currently is inadequate, it will have positive health impacts. According to city staff, most areas have streetlights, although they are not at a pedestrian scale.</p> <p>Neighborhood walkability has been associated with the amount of physical activity people get. Survey respondents rated sidewalk construction and maintenance and safe crosswalks as their top transportation priorities.</p>
<i>Equity impacts</i>	Because this strategy seeks to identify areas that currently do not have adequate sidewalks and street lighting and those areas are often low-income areas, reducing inequities is central to its mission. However, positive equity impacts will only occur if the strategy leads to improvements in walkability in these areas.
<i>Community priority</i>	High. This strategy was added to the Healthy Chula Vista Action Plan based on community priority as expressed in Community Workshops.
<i>Nature of population impacted</i>	Residents in neighborhoods that are currently less walkable.
<i>Magnitude of impact</i>	High

<i>on health and equity</i>	
<i>Recommendations (if applicable)</i>	<p>Participants in the Stakeholder Meeting recommended that audits also include parks, ADA features, bike facilities, trees, and crosswalk signals.</p> <p>Prioritize improving walkability first in neighborhoods that are resource-poor rather than well-off (e.g., more suburban type neighborhoods) since people in resource-poor neighborhoods likely have fewer physical activity options available to them.</p>
Overall priority level	High

HCVAP Strategy: Transportation 5. Review Public Transit Access with MTS to ensure residents can access community assets and innovative programs to encourage transit use are supported.

Criteria	Findings
<i>Strategy details and context</i>	Improve public transit access to key community assets such as libraries, parks, major shopping centers, and schools.
<i>Health impacts</i>	<p>Availability of convenient and high-quality public transit allows people to access places and resources they need to live healthy lives, including workplaces, schools, healthy food, childcare, parks, gyms, and recreational activities.</p> <p>The city currently has public transit resources such as regional light rail (three stops are in Chula Vista) and local buses. A Bus Rapid Transit (BRT) system will be constructed beginning in 2016.</p> <p>Community Workshop participants emphasized that public transit should be on time, reliable, and affordable.</p>
<i>Equity impacts</i>	As a whole, lower income people tend to rely on public transit more than higher income people. Therefore, improving public transit access to key community assets would improve equity for these populations.
<i>Community priority</i>	High
<i>Nature of population impacted</i>	Chula Vista residents who use public transit.
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	<ul style="list-style-type: none"> • Increase education and marketing of available public transit and the forthcoming BRT system. • Consider offering free bus passes to a select group of residents like Mid-City CAN is advocating for in San Diego.
Overall priority level	High

HCVAP Strategy: Transportation 6. Continue to respond and promote schools to participate in Safe Routes to Schools.

Criteria	Findings
<i>Strategy details and</i>	Continue to promote Safe Routes to School.

<i>context</i>	
<i>Health impacts</i>	<p>SRTS and actively commuting to and from school in general can improve physical activity levels, mental health, and academic performance; increase the number of students who walk or bike to and from school; improve safety of walking and biking to and from school, such as reduce child pedestrian injuries; and lower healthcare and transportation costs for school districts and families.</p> <p>Thirty-six elementary and six middle schools in Chula Vista already have SRTS programs. However, a survey conducted by County of San Diego Health and Human Services Agency indicates that only 19.3% of children ages 5-11 in the city have been physically active 1+ hours per day in past week.</p> <p>This was ranked as the highest transportation priority among Community Workshop participants. Stakeholder Meeting participants also prioritized SRTS, citing that obesity is a big concern in Chula Vista.</p>
<i>Equity impacts</i>	SRTS programs could be targeted to schools with high numbers of low-income students, foster youth, and English-language learners
<i>Community priority</i>	High
<i>Nature of population impacted</i>	Public school children
<i>Magnitude of impact on health and equity</i>	Medium-high
<i>Recommendations (if applicable)</i>	Target new SRTS programs to schools that serve high numbers of low-income students, foster youth, and English-language learners
Overall priority level	High

HCVAP Strategy: Transportation 7. Promote alternative Car & Bike Sharing programs.

Criteria	Findings
<i>Strategy details and context</i>	Promote car and bike sharing programs in the city.
<i>Health impacts</i>	<p>Bike sharing is associated with convenience, better air quality, financial savings, increased use of public transit, and physical activity.</p> <p>Car sharing is associated with reduced reliance on driving, reduced carbon emissions, financial savings, and increased walking, bicycling and public transit use.</p> <p>There used to be a car-sharing program in Chula Vista, but the program was discontinued as of June 2015.</p>
<i>Equity impacts</i>	Bike and car sharing make these resources more accessible for everyone, and thus it increases transportation equity.
<i>Community priority</i>	Low
<i>Nature of population impacted</i>	Residents with limited household vehicle use, low-income residents
<i>Magnitude of impact</i>	Low

<i>on health and equity</i>	
<i>Recommendations (if applicable)</i>	
Overall priority level	Low

HCVAP Strategy: Transportation 8. Support Alternative Fuel Infrastructure.

Criteria	Findings
<i>Strategy details and context</i>	There are currently alternative fuel stations on city sites that are available for city vehicles, and electric fueling stations for the public. This strategy would expand options available to the public.
<i>Health impacts</i>	Use of alternative fuels reduces emissions of pollutants associated with gasoline and diesel that are harmful to health. Reducing emissions associated with gasoline and diesel vehicles improves air quality and reduces health impacts like respiratory and cardiovascular disease, cancer, and premature mortality. Currently in Chula Vista, there are nine stations providing electricity, one providing propane, one providing both biodiesel and ethanol, and two providing compressed natural gas.
<i>Equity impacts</i>	This is not anticipated to greatly influence inequities. Low income populations are less likely to be able to afford cars that use alternative fuel sources. Because low-income communities are more likely to live near busy roadways, minor positive air quality improvements could benefit these residents.
<i>Community priority</i>	Low
<i>Nature of population impacted</i>	People who drive vehicles that run on alternative fuels.
<i>Magnitude of impact on health and equity</i>	Low
<i>Recommendations (if applicable)</i>	
Overall priority level	Low

HCVAP Strategy: Transportation 9. Adopt and support education of Transportation Demand Management (TDM) ordinances and concepts with sensitivity to cultural and socioeconomic issues.

Criteria	Findings
<i>Strategy details and context</i>	If implemented, the Chula Vista ordinances would be similar to SANDAG's. The SANDAG program states that TDM "refers to programs and strategies that manage and reduce traffic congestion by encouraging the use of transportation alternatives. SANDAG coordinates a number of programs that are increasing the number of commuters who carpool, vanpool, take transit, bike, walk, and telework. These activities are facilitated through the iCommute program. The goal of iCommute is to manage and reduce traffic congestion, as well as reduce greenhouse gas emissions and other

	<p>environmental pollutants that result from commuters driving alone each day. Managing the demand for our roadways is a cost-effective method for improving the daily commute while also improving the quality of life across the region.”</p> <p>For more information, see http://www.sandag.org/index.asp?projectid=19&fuseaction=projects.detail.</p>
<i>Health impacts</i>	If this strategy increases walking, biking, and using public transit, resulting health benefits will include increased physical activity levels and decreased obesity, diabetes, and heart disease, and improved mental health, physiological wellbeing, and longevity. In addition, these forms of transportation encourage social interaction and reduce air pollutants that cause negative respiratory health impacts and climate change.
<i>Equity impacts</i>	For households that do not own a vehicle and rely on alternative forms of transportation, which make up 6% of the Chula Vista population, this strategy has the potential to improve their transportation options.
<i>Community priority</i>	Low
<i>Nature of population impacted</i>	All Chula Vista residents that walk, bike, and use public transit as modes of transportation. In particular, households without a vehicle available (6% of Chula Vista population)
<i>Magnitude of impact on health and equity</i>	Medium
<i>Recommendations (if applicable)</i>	If implemented, also do public education about transportation demand management.
Overall priority level	Medium

HCVAP Strategy: Transportation 10. Support smart street technologies for multi-modal users through the Smart City Initiative.

Criteria	Findings
<i>Strategy details and context</i>	<p>The city has plans to incorporate “smart infrastructure” concepts in a new development on the currently undeveloped (besides a marina and a RV park) bayfront. The 535-acre bayfront plan includes buildings and city infrastructure that incorporates energy efficiency, demand response, and clean energy generation. In addition, a wired network is planned which has the potential to allow technologies such as real-time transit data and lighted crosswalks.</p> <p>The current incorporation of smart city concepts into the bayfront plan is not completed, so this strategy would encourage these street-level benefits but final decisions are up to developers. Longer-term plans will expand smart infrastructure to other areas of the city.</p>
<i>Health impacts</i>	Real-time transit data and lighted crosswalks would benefit transit users and pedestrians, making it more convenient and safe to walk and use public transit. These forms of transportation are associated with

	increased physical activity levels and decreased obesity, diabetes, and heart disease, and improved mental health, physiological wellbeing, and longevity. In addition, these forms of transportation encourage social interaction and reduce air pollutants that cause negative respiratory health impacts and climate change.
<i>Equity impacts</i>	For households that do not own a vehicle and rely on alternative forms of transportation, which make up 6% of the Chula Vista population, this strategy has the potential to improve their transportation options. However, this strategy will primarily impact future residents of the bayfront community.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	Residents of the bayfront community
<i>Magnitude of impact on health and equity</i>	Low
<i>Recommendations (if applicable)</i>	
Overall priority level	Low

HCVAP Strategy: Transportation 11. Support improvements to existing trolley services and additional Light Rail Connections.

Criteria	Findings
<i>Strategy details and context</i>	Improve existing trolley service and extend trolley line.
<i>Health impacts</i>	Use of public transit is associated with increased physical activity levels and decreased obesity, diabetes, and heart disease, and improved mental health, physiological wellbeing, and longevity. In addition, use of public transit encourages social interaction and reduces air pollutants that cause negative respiratory health impacts and climate change.
<i>Equity impacts</i>	This strategy will benefit people who rely on public transit the most.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	Public transit users
<i>Magnitude of impact on health and equity</i>	Medium
<i>Recommendations (if applicable)</i>	Increase education and marketing of available public transit
Overall priority level	Medium

Healthy Food Access

HCVAP Strategy: Healthy Food 1. Utilize the [Healthy Food Access Portal](#) to evaluate resources that improve access to healthy foods in low-income areas.

Criteria	Findings
<i>Strategy details and context</i>	Use tools available at the Healthy Food Access Portal to evaluate food access in Chula Vista. This will help hone in on areas of the city that need better food access.
<i>Health impacts</i>	<p>Convenient, high-quality, and affordable access to healthy food is paramount for overall health and wellbeing, and the prevention of obesity, diabetes, and other chronic diseases. Diabetes prevalence is greater in Chula Vista than in the rest of San Diego County.</p> <p>Eighty-one percent of Chula Vista adults report eating fewer than 5 fruits and vegetables per day, and 19% report eating five or more per day.</p> <p>In Community Workshops, some participants emphasized that although some food outlets are available in their communities, they are not high-quality.</p>
<i>Equity impacts</i>	Low-income populations are more likely to experience poor access to healthy foods in their neighborhoods and disproportionate rates of obesity. Food access and affordability was the highest priority in Community Workshops. A large supermarket in Chula Vista, Haggen Food and Pharmacy, recently closed which reduced food access for some residents.
<i>Community priority</i>	Strategy was not included in vote. Priority level for food access in general was High.
<i>Nature of population impacted</i>	Improved food access would most benefit populations that currently have poor access to healthy foods, and residents who have limited or no access to a vehicle.
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	Also consider analyzing the availability of unhealthy food and consider policy changes related to that.
Overall priority level	High

HCVAP Strategy: Healthy Food 2. Review the [Community Garden Policy](#) to ensure barriers are removed and encourage community champions.

Criteria	Findings
<i>Strategy details and context</i>	Encourage community gardens in Chula Vista.
<i>Health impacts</i>	Community gardens offer opportunities for many physical and mental health benefits. For example, they can encourage eating healthy fresh fruits and vegetables, engaging in physical activity, strengthening

	<p>social connections, improving communities by beautifying vacant lots and public parks, and decreasing violence.</p> <p>Chula Vista currently has five community gardens.</p> <p>Some Stakeholder Meeting participants raised this strategy as an important one, but Community Workshop participants did not.</p>
<i>Equity impacts</i>	Access to and participation in community gardens would most benefit residents who currently have poor access to healthy foods, and residents who have limited or no access to a vehicle. However, since it takes time to participate in community gardening, this strategy may not be taken advantage of by those most in need, since they likely would have little time to participate.
<i>Community priority</i>	Low
<i>Nature of population impacted</i>	Residents with interest and time for participating in a community garden, food insecure residents, residents with limited or no access to a vehicle.
<i>Magnitude of impact on health and equity</i>	Medium
<i>Recommendations (if applicable)</i>	
Overall priority level	Low

HCVAP Strategy: Healthy Food 3. Update the Healthy Vending policy for City facilities.

Criteria	Findings
<i>Strategy details and context</i>	Enforce an existing vending policy established in 2006 that would make food available in vending machines at city facilities healthier. City facilities that this policy applies to include parks, community centers, gymnasiums, libraries, and any other City of Chula Vista building, structure, or complex.
<i>Health impacts</i>	Benefits of a healthy diet are numerous and include overall maintenance of physical and mental health, as well as prevention of obesity, diabetes, and other chronic diseases. Diabetes prevalence is greater in Chula Vista than in the rest of San Diego County.
<i>Equity impacts</i>	This strategy isn't anticipated to have significant equity impacts.
<i>Community priority</i>	Low
<i>Nature of population impacted</i>	Residents and city employees who use the facilities listed above.
<i>Magnitude of impact on health and equity</i>	Medium-low
<i>Recommendations (if applicable)</i>	
Overall priority level	Low

HCVAP Strategy: Healthy Food 4. Develop an Urban Agriculture policy to promote and address implications.

Criteria	Findings
<i>Strategy details and context</i>	This policy would allow urban agriculture activities such as beekeeping and keeping chickens at private residences. A policy may also include regulations related to hydroponics and other sustainable food systems.
<i>Health impacts</i>	If residents grow their own food they are more likely to eat it, and food grown or raised at home is likely to be healthier than processed food. In addition, residents practicing urban agriculture will engage in physical activity.
<i>Equity impacts</i>	Urban agriculture is likely to be healthy for whoever takes the time to engage in it, and fill a particular need for residents who currently have poor access to healthy foods, and those who have limited or no access to a vehicle. However, since it takes time to develop and maintain a garden or livestock, residents who are busy with paying work and childcare may not have time to maintain home agriculture practices and thus they would not reap the benefits.
<i>Community priority</i>	High
<i>Nature of population impacted</i>	Residents throughout the city who have an interest in urban agriculture.
<i>Magnitude of impact on health and equity</i>	Medium
<i>Recommendations (if applicable)</i>	If implemented, ensure there is adequate public outreach and education to ensure the new policy is taken advantage of.
Overall priority level	Medium

HCVAP Strategy: Healthy Food 5. Study the location and number of Fast Food Offerings and explore No Drive Thru Regulations in areas of the city already concentrated.

Criteria	Findings
<i>Strategy details and context</i>	In areas of the city that have high concentrations of fast food outlets, explore the potential for limiting the availability of drive-through service. In addition, explore a policy of fast food outlets offering “default options” of healthy fresh produce rather than standard items such as French fries.
<i>Health impacts</i>	When affordable healthy food is not readily available, people consume the food that is realistically available to them, which for low-income populations, is often less expensive, highly processed food from corner stores and fast food restaurants. This leads to disproportionate rates of obesity and diabetes for these communities. Fast food outlets are abundant throughout the city, with the largest clusters along Third Ave and Broadway in Western Chula Vista. Having too many fast food outlets and not enough healthy food outlets was a major priority among Community Workshop participants

	and survey respondents.
<i>Equity impacts</i>	Low-income people are more likely to consume food from fast food restaurants, and thus their diets are more likely to change as a consequence of this policy.
<i>Community priority</i>	High
<i>Nature of population impacted</i>	Patrons of fast food restaurants; residents of neighborhoods with high concentrations of fast food outlets
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	
Overall priority level	High

HCVAP Strategy: Healthy Food 6. Evaluate the feasibility of additional Farmers Markets, Food Distribution, and/or other innovate programs to address healthy food insecurity and accept EBT.

Criteria	Findings
<i>Strategy details and context</i>	Additional farmers markets and food distribution to businesses in low-income and underserved neighborhoods.
<i>Health impacts</i>	<p>Farmers markets and food distribution from farm to local businesses can increase the availability of healthy food in a community, strengthen communities, and support the local economy.</p> <p>Eighty-one percent of Chula Vista adults report eating fewer than 5 fruits and vegetables per day, and 19% report eating five or more per day.</p> <p>Community Workshop participants, survey respondents, and Stakeholder Meeting participants all expressed that they wanted more farmers markets in Chula Vista.</p>
<i>Equity impacts</i>	Because this strategy is specifically targeted to communities that don't currently have food security, it has the potential to improve equity.
<i>Community priority</i>	High
<i>Nature of population impacted</i>	Chula Vista residents who face food insecurity.
<i>Magnitude of impact on health and equity</i>	Medium-high
<i>Recommendations (if applicable)</i>	If implemented, ensure there is adequate public outreach and education to ensure the new policy is taken advantage of.
Overall priority level	High

HCVAP Strategy: Healthy Food 7. Establish procurement policies for Municipal Event Catering that promote healthy food options and sustainable practices.

Criteria	Findings
<i>Strategy details and context</i>	Provide healthy food at municipal events such as trainings and award recognition events.

<i>Health impacts</i>	Benefits of a healthy diet are numerous and include overall maintenance of physical and mental health, as well as prevention of obesity, diabetes, and other chronic diseases. Diabetes prevalence is greater in Chula Vista than in the rest of San Diego County. In addition, offering healthy food at municipal events could result in drawing a greater number of participants in the events, which would positively impact community engagement.
<i>Equity impacts</i>	This strategy isn't anticipated to substantially increase or decrease equity.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	Anyone attending municipal events has the potential to benefit from this strategy.
<i>Magnitude of impact on health and equity</i>	Low
<i>Recommendations (if applicable)</i>	
Overall priority level	Low

HCVAP Strategy: Healthy Food 8. Work with educational assets to promote Nutrition Programming.

Criteria	Findings
<i>Strategy details and context</i>	Promote nutrition programs in schools.
<i>Health impacts</i>	Adequate nutrition is essential for maintaining good health. Hunger is particularly devastating to children, because proper nutrition is critical to a child's development. Nutritional offerings at schools are of great importance for childhood nutrition and overall health.
<i>Equity impacts</i>	This strategy would provide the most benefits for children who are currently food insecure and/or have unhealthy food options in their homes and communities.
<i>Community priority</i>	High. This strategy was added to the Healthy Chula Vista Action Plan based on community priority as expressed in Community Workshops. Stakeholder Meeting participants also prioritized this strategy.
<i>Nature of population impacted</i>	Children attending public school, especially those receiving free and reduced price lunch.
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	Focus first on meals for those students receiving free and reduced price lunch.
Overall priority level	High

HCVAP Strategy: Healthy Food 9. Support regional efforts for Food Waste Prevention Programs that provide food alternatives for food insecure individuals

Criteria	Findings
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<i>Strategy details and context</i>	<p>This strategy would be modeled after programs such as Orange County’s “Waste Not OC Coalition” policy, whose mission is to meet the nutritional needs of the community and protect the environment by facilitating the donation and distribution of wholesome surplus food. That program has three parts:</p> <ul style="list-style-type: none"> • Food recovery – connect grocers and restaurants to food recovery agencies • Food distribution – connect those in need with pantries that provide wholesome food (healthcare professionals refer food insecure individuals) • Training and education – train and educate potential donors to safely handle donated food. <p>In a three-month period in 2014, 18.3 tons of excess food was diverted to local pantries. This is equivalent to 30,527 meals. This food would have otherwise gone to landfills, and thus this practice has environmental benefits.</p> <p>For more info, see http://www.wastenotoc.org/.</p>
<i>Health impacts</i>	<p>This strategy would reduce food insecurity. Reducing food insecurity would reduce hunger, which leads to a variety of poor health impacts, such as chronic disease, obesity, underweight babies, poor mental health, and suicide.</p> <p>Community members expressed concern that such programs could attract additional homeless people to Chula Vista and had concerns about this.</p>
<i>Equity impacts</i>	Because this strategy would serve those who currently experience food insecurity, poverty, and homelessness, it would have substantial equity impacts.
<i>Community priority</i>	High
<i>Nature of population impacted</i>	Food-insecure people, homeless people, low-income people.
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	Implement additional substance abuse and mental health services to take care of the homeless.
<i>Overall priority level</i>	High

HCVAP Strategy: Healthy Food 10. Attract and retain Full-service Grocery Stores and Casual Restaurants that offer affordable and quality healthy food

Criteria	Findings
<i>Strategy details and context</i>	Increase full-service supermarkets in Chula Vista.
<i>Health impacts</i>	Supermarkets offer a wide variety of foods, including fresh produce, and sell their products at an approximately 10% lower rate than small

	<p>retail food stores. Providing a variety of affordable food choices with ample healthy options increases the likelihood of a healthy diet among customers. Benefits of a healthy diet are numerous and include overall maintenance of physical and mental health, as well as prevention of obesity, diabetes, and other chronic diseases.</p> <p>Diabetes prevalence is greater in Chula Vista than in the rest of San Diego County.</p> <p>Four large supermarkets serving Western Chula Vista recently closed, including Haggen and Fresh & Easy. Additionally, two more serving eastern Chula Vista closed in the past few years.</p>
<i>Equity impacts</i>	If this strategy specifically targets underserved neighborhoods, it will decrease inequities in food access.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	Residents of neighborhoods where new stores will locate. Residents with fewer transportation resources.
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	Implement available strategies to ensure that neighborhoods that recently lost their Haggen and Fresh & Easy stores get replacement full-service grocery stores.
Overall priority level	High

HCVAP Strategy: Healthy Food 11. Support Local Processing of healthy foods.

Criteria	Findings
<i>Strategy details and context</i>	Incentivize local processing of locally grown foods; serve locally harvested produce to local residents.
<i>Health impacts</i>	<p>One health benefit that can stem from locally grown food is that farm and food processing jobs can stay in the community, supporting the local economy and leading to increased incomes and tax base that can support health-promoting opportunities and lifestyles. Another is that the food is fresher and tastes better, which can encourage people to eat more fresh produce.</p> <p>Eighty-one percent of Chula Vista adults report eating fewer than 5 fruits and vegetables per day, and 19% report eating five or more per day.</p>
<i>Equity impacts</i>	If local food production and processing jobs go to low-income residents and those who are currently unemployed, this strategy will improve equity.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	Local residents who get food production and processing jobs; Farmers market vendors and buyers.
<i>Magnitude of impact on health and equity</i>	Medium

<i>Recommendations (if applicable)</i>	
Overall priority level	Medium

Physical Activity

HCVAP Strategy: Physical Activity 1. Educate and address inequities through the Safe, Accessible, Fun & Easy (SAFE) campaign to encourage increased awareness of walking, bicycle and pedestrian access.

Criteria	Findings
<i>Strategy details and context</i>	The SAFE campaign already exists and this strategy would increase awareness of it.
<i>Health impacts</i>	<p>This strategy aims to increase walking and biking, which would lead to health benefits such as increased physical activity levels and decreased obesity, diabetes, and heart disease, as well as improved mental health, physiological wellbeing, and longevity. In addition, alternative forms of transportation besides driving reduce air pollutants that cause negative respiratory health impacts and climate change.</p> <p>The 2015 San Diego Regional Walk Scorecard gave Chula Vista a relatively low “status of walking” score, due to low rates of walking and high collision rates.</p> <p>Rates of obesity, overweight, and diabetes are high in Chula Vista, and only 19.3% of children ages 5-11 have been physically active 1+ hours per day in a given week.</p>
<i>Equity impacts</i>	Residents in certain areas of the city such as Western Chula Vista aren’t aware of nearby park resources. This strategy would increase awareness in some of these disadvantaged areas.
<i>Community priority</i>	High
<i>Nature of population impacted</i>	All Chula Vista residents have the potential to become more aware of pedestrian and bicycle resources.
<i>Magnitude of impact on health and equity</i>	Medium-high
<i>Recommendations (if applicable)</i>	Target outreach to communities with high rates of chronic disease
Overall priority level	High

HCVAP Strategy: Physical Activity 2. Incorporate the Recreation Needs Assessment into the Parks & Recreation Master Plan to address community inequities and preferred programming.

Criteria	Findings
<i>Strategy details and context</i>	Incorporate needs identified in the December 2015 Recreation Needs Assessment into the Parks & Recreation Master Plan.
<i>Health impacts</i>	If needs identified in this needs assessment are integrated into Chula Vista parks and recreation programs, residents may use parks and recreation programs (such as health and fitness classes, social activities, and creative arts) more. This would increase physical activity and social cohesion, and improve mental health.
<i>Equity impacts</i>	If efforts are directed toward communities that need recreation resources the most, this strategy would improve equity.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	Users of parks and recreation programming, youth.
<i>Magnitude of impact on health and equity</i>	Medium
<i>Recommendations (if applicable)</i>	
Overall priority level	Medium

HCVAP Strategy: Physical Activity 3. Address Park Amenity and Perceived Maintenance Inequities through education.

Criteria	Findings
<i>Strategy details and context</i>	Some Community Workshop participants expressed their opinion that city parks are too dangerous and are not clean, and that these deficiencies prevent their use of parks. Dog parks and cleaner, high-quality bathroom facilities are two specific needs that they shared.
<i>Health impacts</i>	<p>Parks can benefit health by encouraging exercise, providing improvements to medical conditions, improving concentration and attention, and improving mental health. In addition, they improve air quality and lower associated risks of asthma and other respiratory conditions, decreased lung function, heart attack and premature death.</p> <p>People’s perceptions of parks will influence whether they will use parks. Perceptions of crime and a lack of safety deter people from visiting parks. This is particularly true in neighborhoods that have gang violence, where parks are sometimes convening grounds for gang activity.</p> <p>Stakeholder Meeting participants expressed that there are fewer parks in Western Chula Vista and that these parks have fewer amenities.</p>
<i>Equity impacts</i>	If this strategy focuses efforts on improving parks that are currently

	unsafe and lacking infrastructure, it will increase equity. Community Workshop participants expressed their perceptions of parks in West Chula Vista needing attention.
<i>Community priority</i>	High. This strategy was added based on community feedback at Community Workshops.
<i>Nature of population impacted</i>	All residents who visit parks; in particular those who live near parks currently needing improvements.
<i>Magnitude of impact on health and equity</i>	Medium
<i>Recommendations (if applicable)</i>	This strategy should focus on parks having the most needs first.
Overall priority level	Medium

HCVAP Strategy: Physical Activity 4. Integrate healthy community concepts throughout and complete an “operations and maintenance for sustainability” chapter of the Parks & Recreation Master Plan.

Criteria	Findings
<i>Strategy details and context</i>	Developers in the city often build new parks, but the city then has trouble maintaining them. This strategy attempts to plan better for park maintenance and sustainability.
<i>Health impacts</i>	<p>Parks can benefit health by encouraging exercise, providing improvements to medical conditions, improving concentration and attention, and improving mental health. In addition, they improve air quality and lower associated risks of asthma and other respiratory conditions, decreased lung function, heart attack and premature death.</p> <p>People’s perceptions of parks will influence whether they will use parks. Perceptions of crime and a lack of safety deter people from visiting parks. This is particularly true in neighborhoods that have gang violence, where parks are sometimes convening grounds for gang activity.</p> <p>Stakeholder Meeting participants expressed that there are fewer parks in Western Chula Vista and that these parks have fewer amenities.</p>
<i>Equity impacts</i>	If this strategy focuses efforts on improving and maintaining parks that are currently unsafe and lacking infrastructure, it will increase equity. Community Workshop participants expressed their perceptions of parks in West Chula Vista needing attention.
<i>Community priority</i>	High. This strategy was added based on community feedback at Community Workshops.
<i>Nature of population impacted</i>	All residents who visit parks; in particular those who live near parks currently needing improvements.
<i>Magnitude of impact on health and equity</i>	Medium

<i>Recommendations (if applicable)</i>	This strategy should focus on parks having the most needs first.
Overall priority level	Medium

HCVAP Strategy: Physical Activity 5. Increase awareness of the Adopt-A-Park/Volunteer Park Rangers program to promote civic responsibility and community engagement.

Criteria	Findings
<i>Strategy details and context</i>	There is an existing program but it is small. This strategy would increase awareness and attempt to promote community engagement and physical activity.
<i>Health impacts</i>	<p>If this awareness-building strategy leads to more residents becoming involved in Adopt-A-Park and Volunteer Park Rangers programs, residents would benefit from community engagement. Participants in these programs may increase their civic engagement and feelings of ownership in their communities, gain work experience, and gain opportunities for socializing.</p> <p>In addition, since these programs involve being physically active, participants would reap the benefits of physical activity, which has the potential to decrease obesity, diabetes, and heart disease, improve mental health and physiological wellbeing, and promote longevity.</p> <p>According to a Stakeholder Meeting participant, there is only one park ranger assigned to 56 city parks. If this is the case, this strategy could also help fill gaps in city park maintenance.</p>
<i>Equity impacts</i>	Unknown or neutral equity impacts.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	Participants in these programs
<i>Magnitude of impact on health and equity</i>	Low
<i>Recommendations (if applicable)</i>	
Overall priority level	Low

HCVAP Strategy: Physical Activity 6. Institute an Open Streets Initiative and collaborate with business community to implement.

Criteria	Findings
<i>Strategy details and context</i>	This strategy would encourage Open Streets events during which streets open to pedestrians and bikes and closed to cars.
<i>Health impacts</i>	This strategy would promote physical activity, which has the potential to decrease obesity, diabetes, and heart disease, improve mental health and physiological wellbeing, and promote longevity. It may

	<p>encourage people to use alternative forms of transportation besides driving in their everyday life, which has a multitude of health and environmental benefits.</p> <p>Rates of obesity, overweight, and diabetes are high in Chula Vista, and only 19.3% of children ages 5-11 have been physically active 1+ hours per day in a given week.</p> <p>The 2015 San Diego Regional Walk Scorecard gave Chula Vista a relatively low “status of walking” score, due to low rates of walking and high collision rates. This strategy might help boost rates of walking.</p>
<i>Equity impacts</i>	Neutral equity impacts: this is likely to be a resource for people of all socioeconomic levels. If Open Streets events were held in disadvantaged areas, this strategy would have greater equity impacts.
<i>Community priority</i>	Low
<i>Nature of population impacted</i>	Residents who don’t work on weekends when these events would likely occur, families, residents who already walk and ride a bike.
<i>Magnitude of impact on health and equity</i>	Low (if Open Streets events occur infrequently); Medium (if Open Streets events occur frequently, such as on a weekly basis).
<i>Recommendations (if applicable)</i>	More frequent (e.g., weekly) events are likely to have a bigger impact.
Overall priority level	Low

Health Care & Prevention

HCVAP Strategy: Health Care & Prevention 1. Raise awareness of Chronic Diseases through the development of baseline data inclusive of health determinant inequities.

Criteria	Findings
<i>Strategy details and context</i>	Building awareness of the prevalence of chronic diseases for residents of Chula Vista through collection and reporting of baseline data about disease levels, the determinants of those diseases, and inequities in disease levels.
<i>Health impacts</i>	Awareness of chronic disease levels, determinants of disease, and inequities can inform policy debates and spur policy change related to the determinants of health. This could result in significant improvements in health if the data is used.
<i>Equity impacts</i>	Awareness of health inequities and inequities in the determinants of health can inform policy debates and spur policy change. This could result in significant reductions in inequities if the data is used.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	All residents of Chula Vista

<i>Magnitude of impact on health and equity</i>	Medium-high
<i>Recommendations (if applicable)</i>	Because data by itself does not often lead to policy change, this strategy may only be successful if combined with significant investment in education about health and the determinants of health and/or community advocacy. Therefore, recommendations include: 1) invest in an education campaign after the data is collected; 2) provide resources to community and advocacy groups to use the data in their policy change work.
Overall priority level	Medium-high

HCVAP Strategy: Health Care & Prevention 2. Analyze the nexus between health/wellness and Economic Development.

Criteria	Findings
<i>Strategy details and context</i>	This strategy would seek to analyze the connections between health and economic development (in both directions), and promote these connections in order to promote better opportunities for health.
<i>Health impacts</i>	A healthy workforce improves economic capacity. A thriving and equitable economy, in which all residents have opportunities for healthy jobs offering fair wages and benefits, improves population health.
<i>Equity impacts</i>	If economic development programs are targeted to low-income and high-unemployment areas, and through the health lens, lead to higher wages and employment, equity impacts could be significant as income and employment are strong determinants of health.
<i>Community priority</i>	Healthcare strategies were not prioritized in any of the Community Workshops. This strategy was not prioritized in the Stakeholder Meeting.
<i>Nature of population impacted</i>	Unknown
<i>Magnitude of impact on health and equity</i>	High if economic development leads to increased employment and income; Low if it only benefits those who are already well off.
<i>Recommendations (if applicable)</i>	Target any efforts at economic development opportunities that increase income and employment in neighborhoods that currently have lower income and higher unemployment.
Overall priority level	Medium

HCVAP Strategy: Health Care & Prevention 3. Support funding applications for Community Development Block Grant funding that provide preventive health care to the most vulnerable populations.

Criteria	Findings
<i>Strategy details and context</i>	Support ways to fund preventative health care in the city's most vulnerable populations.

<i>Health impacts</i>	Preventive care works against acute illness and avoidable disease and death. People are more likely to receive preventive healthcare services if they have a usual source of primary care or if they are covered by health insurance. If this strategy improves access to preventative care, it will help prevent illnesses and avoidable disease and death for the Chula Vista population. Thirty-four percent of people in the South Region of San Diego County are uninsured all or part of the year.
<i>Equity impacts</i>	If this strategy is focused in underserved areas, it will improve equity.
<i>Community priority</i>	Healthcare strategies were not prioritized in any of the Community Workshops, and thus, individual strategies were not voted on.
<i>Nature of population impacted</i>	Residents who currently have poor or no access to preventative healthcare due to lack of insurance, enough money, or barriers in transportation resources or language.
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	
Overall priority level	High

HCVAP Strategy: Health Care & Prevention 4. Support County Cool Zones sites.

Criteria	Findings
<i>Strategy details and context</i>	Support existing “cool zones” where residents can get out of the heat in the summer. Cool zones are air-conditioned settings where seniors and others can gather.
<i>Health impacts</i>	Cool zones are vital resources for seniors and others who lack air conditioning in their homes. Having access to an air-conditioned place when it’s hot can reduce heat illness and mortality.
<i>Equity impacts</i>	Being low-income, non-white, overweight, low socioeconomic status, or senior are risk factors for heat illness. Thus, this strategy has the potential to benefit these populations in particular.
<i>Community priority</i>	Healthcare strategies were not prioritized in any of the Community Workshops, and thus, individual strategies were not voted on.
<i>Nature of population impacted</i>	Seniors, low-income people, non-white people, overweight people.
<i>Magnitude of impact on health and equity</i>	Medium currently, but high if climate change increases heat waves in Southern California.
<i>Recommendations (if applicable)</i>	Locate cool zones in areas that are unlikely to have their own air conditioning and in places where people may be socially isolated.
Overall priority level	Medium

HCVAP Strategy: Health Care & Prevention 5. Identify barriers to Mental Health care and resources.

Criteria	Findings
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<i>Strategy details and context</i>	This strategy seeks to improve mental health care and resources.
<i>Health impacts</i>	<p>Mental health is a highly important aspect of health that is often under-valued. Mental health also affects physical health in many ways.</p> <p>Rates of hospitalization and emergency department discharges due to anxiety disorders are much higher in Chula Vista than rates in the South Region of the county and the county overall. Stakeholder Meeting participants who are affiliated with local hospitals validated this data with their personal observations about the high degree of mental health needs in the city.</p> <p>According to a participant in the Stakeholder Meeting, language and cultural barriers limit Chula Vista residents' knowledge of existing resources.</p>
<i>Equity impacts</i>	If efforts are focused on low-income communities and communities of color that likely have less access to mental health care currently, equity impacts could be significant.
<i>Community priority</i>	High (Stakeholder Meeting) Healthcare strategies were not prioritized in any of the Community Workshops, and thus, individual strategies were not voted on.
<i>Nature of population impacted</i>	Residents in need of mental health care, communities that lack mental health care currently.
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	<ul style="list-style-type: none"> • Focus some of these efforts on supporting homeless populations and populations not currently accessing mental health care services. • Increase awareness of mental health resources in cultural- and language-appropriate ways.
Overall priority level	High

HCVAP Strategy: Health Care & Prevention 6. Continue to support regional efforts that reconnect Homeless Individuals with health-promoting resources.

Criteria	Findings
<i>Strategy details and context</i>	Prevent and address homelessness by connecting homeless people with the resources they need.
<i>Health impacts</i>	Homelessness results in many significant negative health outcomes in adults and children.
<i>Equity impacts</i>	This strategy targets a population that faces significant inequities, so this strategy would have positive impacts on equity.
<i>Community priority</i>	High. Healthcare strategies were not prioritized in any of the Community Workshops, and thus, individual strategies were not voted

	on. However, homelessness was an issue that arose in all workshops, so this would likely have been voted on as a high priority.
<i>Nature of population impacted</i>	Homeless adults and children
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	Develop communications materials that help the general public understand homelessness and its causes.
Overall priority level	High

HCVAP Strategy: Health Care & Prevention 7. Support Early Childhood Development through Lactation policies and pre-school age wellness programs.

Criteria	Findings
<i>Strategy details and context</i>	Promote lactation and early childcare and childhood education.
<i>Health impacts</i>	Breast milk is uniquely suited to an infant’s nutritional needs and has unparalleled health, immunological, and anti-inflammatory properties that protect against illnesses and diseases. Early childhood education and care can have lifelong health impacts. For example, people who attended childhood are more likely to seek preventative health care and have learned about health and nutrition.
<i>Equity impacts</i>	If the strategy reaches low-income populations that would not otherwise be able to use early childcare programs and mothers who are not currently aware of the benefits of breastfeeding, it will have equity impacts.
<i>Community priority</i>	Healthcare strategies were not prioritized in any of the Community Workshops, and thus, individual strategies were not voted on.
<i>Nature of population impacted</i>	Children, new mothers and families, low-income families
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	Target strategy to low-income families.
Overall priority level	High

HCVAP Strategy: Health Care & Prevention 8. Support Covered CA, CalFresh & WIC enrollment efforts.

Criteria	Findings
<i>Strategy details and context</i>	Support healthcare and food access programs.
<i>Health impacts</i>	These programs provide vital health promoting services – health care and healthy food – to populations that need them – low-income individuals and families.
<i>Equity impacts</i>	These programs target low-income populations, so this strategy would have positive equity impacts.
<i>Community priority</i>	Healthcare strategies were not prioritized in any of the Community

	Workshops, and thus, individual strategies were not voted on.
<i>Nature of population impacted</i>	Low-income individuals, families and new mothers.
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	
Overall priority level	High

HCVAP Strategy: Health Care & Prevention 9. Support Substance Abuse prevention and rehabilitation programs.

Criteria	Findings
<i>Strategy details and context</i>	Increase availability of substance abuse prevention and rehabilitation programs.
<i>Health impacts</i>	Alcohol and drug abuse affect health in multiple ways, including through vehicle collisions, domestic violence, interaction with the justice system, lack of educational progress, homelessness, and loss of work.
<i>Equity impacts</i>	While all populations suffer from substance abuse issues, lower income populations have the fewest resources to address these issues and communities of color are penalized (through the justice system) at disproportionate rates for their substance use. This therefore has significant equity impacts.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	Those with substance abuse issues and their families; those more susceptible to substance abuse.
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	Target programs to low-income communities and communities of color.
Overall priority level	Medium-high

Environmental Quality

HCVAP Strategy: Environmental Quality 1. Adapt Healthy Chula Vista goals to the Climate Action Plan and existing CLEAN initiatives.

Criteria	Findings
<i>Strategy details and context</i>	<p>Ensure HCVAP goals are consistent with the Chula Vista Climate Action Plan and CLEAN initiatives.</p> <p>The Climate Action Plan provides measures to strengthen the City’s climate action efforts and to facilitate numerous community co-benefits. For more info, see: http://www.chulavistaca.gov/departments/public-works/environmental-fiscal-sustainability/conservation/climate-action-plan</p>

	Chula Vista CLEAN offers a set of initiatives related to clean air, clean water, and clean land. For more info, see: http://www.chulavistaca.gov/departments/clean
<i>Health impacts</i>	Climate change may increase heat-related illness (i.e., illnesses such as heat stroke that result when a body's temperature control system is overloaded) and death, health effects related to extreme weather events, health effects related to air pollution, water-borne and food-borne diseases, and vector-borne and rodent-borne disease. Policies and strategies aimed at slowing and adapting to climate change will also prevent these negative health outcomes.
<i>Equity impacts</i>	Climate change will likely reinforce and amplify socioeconomic disparities, causing greatest health hazards to low-income, minority, and politically marginalized groups. Strategies that reduce climate change would benefit these populations the most.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	All Chula Vista residents; in particular those facing socioeconomic disparities.
<i>Magnitude of impact on health and equity</i>	Medium (short term); High (long term)
<i>Recommendations (if applicable)</i>	
Overall priority level	Medium

HCVAP Strategy: Environmental Quality 2. Develop awareness about preservation and maintenance of the Urban Forest & Open Space (Natural Systems).

Criteria	Findings
<i>Strategy details and context</i>	Build awareness of existing urban forest and open space in the city as well as programs and policies in place to preserve and maintain them.
<i>Health impacts</i>	Like parks, urban forest and open space can benefit air quality and reduce climate change, encourage physical activity, and if used by residents, can lead to a myriad of medical benefits. Building awareness of these resources may increase their use and increase support for preservation programs.
<i>Equity impacts</i>	If building awareness of these programs and policies leads to preservation of existing forest and open space, and if that reduces climate change, doing so would benefit those most likely to suffer from the effects of climate change, such as marginalized groups.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	Residents who live or work near urban forest and open space resources; residents who seek out and use these resources
<i>Magnitude of impact on health and equity</i>	Low

<i>Recommendations (if applicable)</i>	Implement culturally-appropriate educational campaigns to build awareness of the city’s urban forest and open space resources.
Overall priority level	Medium

HCVAP Strategy: Environmental Quality 3. Develop a Tobacco and Smoke Free policy for all city facilities and city funded Affordable Housing projects.

Criteria	Findings
<i>Strategy details and context</i>	Write a tobacco and smoke free policy into all city facilities and affordable housing projects. Currently this policy is in effect for some but not all public places in the city.
<i>Health impacts</i>	Secondhand smoke causes and exacerbates lung cancer, respiratory infections, and asthma. Policies reducing exposure to secondhand smoke would improve health for those currently exposed. California law prohibits smoking in nearly every workplace, including restaurants. Chula Vista has an ordinance banning smoking at all outdoor eating establishments as well.
<i>Equity impacts</i>	Low-income residents of affordable housing developments are likely to be most impacted by this strategy. On one hand, this strategy is beneficial to their health, as they would be exposed to less secondhand smoke. On the other hand, this strategy would create an additional restriction on their personal freedom that other higher-income residents not living in affordable housing developments don’t have to comply with.
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	Residents of affordable housing developments; city staff
<i>Magnitude of impact on health and equity</i>	Low
<i>Recommendations (if applicable)</i>	
Overall priority level	Medium-Low

HCVAP Strategy: Environmental Quality 4. Promote Affordable Energy & Water into rehabilitation programs.

Criteria	Findings
<i>Strategy details and context</i>	Incorporate existing energy and water conservation programs (for example, solar power, efficient heating systems, greywater use, planting native plants, high-efficiency irrigation systems) into rehabilitation plans for private residences. Conserving energy and water would also lower costs for residents.
<i>Health impacts</i>	Conserving the state’s and the globe’s precious natural resources protects long-term health in many ways: for example, by protecting drinking water resources and reducing costs to the environment and to health that are caused by energy production.

	Survey respondents and Community Workshop participants prioritized making energy and water more affordable.
<i>Equity impacts</i>	In the long-term, equity will be impacted by this strategy. When natural resources are scarce and become more costly, low-income and otherwise disadvantaged groups are likely to experience deficiencies first.
<i>Community priority</i>	Low (though the community prioritized making energy and water more affordable more generally).
<i>Nature of population impacted</i>	All Chula Vista residents
<i>Magnitude of impact on health and equity</i>	Low (short term); High (long term)
<i>Recommendations (if applicable)</i>	Support the community in addressing their concerns about the cost of water and energy (e.g., by advocating for programs like Low Income Home Energy Assistance Program or LIHEAP).
Overall priority level	Medium-Low

HCVAP Strategy: Environmental Quality 5. Develop community stewards and raise awareness of Waste Diversion and Disposal programs through the “Team Up to Clean Up” and “Buff-a-Block” campaigns.

Criteria	Findings
<i>Strategy details and context</i>	Continue existing city-sponsored efforts to clean up trash and graffiti. The campaigns promote existing disposal programs for hazardous waste, recycling and litter.
<i>Health impacts</i>	This strategy has the potential to build community and beautify streets, which would have positive impacts on mental health, social cohesion, and feelings of belonging in one’s community.
<i>Equity impacts</i>	If trash and graffiti is concentrated in certain residential areas, than these cleanup efforts will improve equity.
<i>Community priority</i>	Low
<i>Nature of population impacted</i>	All Chula Vista residents; primarily those living in areas currently impacted by trash and graffiti.
<i>Magnitude of impact on health and equity</i>	Low
<i>Recommendations (if applicable)</i>	
Overall priority level	Low

HCVAP Strategy: Environmental Quality 6. Utilize Health Assessment Tools to identify vulnerable areas of the community and support programs that address Environmental Justice issues.

Criteria	Findings
<i>Strategy details and context</i>	Use available tools to identify communities that have environmental justice issues, and support programs that address these communities.

	<p>Cal EnviroScreen uses indicators of “pollution burden” and “population characteristics” to identify communities that are environmentally disadvantaged. The tool identifies parts of Western Chula Vista as disadvantaged.</p> <p>SANDAG HCAT collects data for a set of indicators for regions throughout the San Diego area, including 20 Chula Vista neighborhoods. Environmental hazards indicators include proximity to brownfield sites, proximity to superfund sites, residential proximity to traffic, school proximity to traffic, and toxic releases from facilities.</p>
<i>Health impacts</i>	<p>People of color, low-income communities, and Native American populations have historically been disproportionately exposed to harmful environmental conditions that lead to host of serious and life-threatening health conditions such as cancer and respiratory conditions.</p> <p>Environmental injustices based on race and income are present in San Diego County.</p> <p>Stakeholder Meeting participants gave a far higher level of priority to this strategy as compared with other Environmental Quality strategies.</p>
<i>Equity impacts</i>	The main focus of this strategy is to reduce environmental injustices, so equity is at its core.
<i>Community priority</i>	Medium (Community Workshops) High (Stakeholder Meeting)
<i>Nature of population impacted</i>	Communities currently facing environmental injustices.
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	
Overall priority level	High

HCVAP Strategy: Environmental Quality 7. Continue to promote programs that address residential indoor Air Quality and review changeable sources of air pollution for outdoor.

Criteria	Findings
<i>Strategy details and context</i>	Continue programs addressing indoor sources (for example, gas leakages and mold) and outdoor sources (for example, truck routes and busy roadways) of air quality.
<i>Health impacts</i>	<p>The presence of pollutants in the air that we breathe has a direct impact on respiratory and cardiovascular disease and elevates risks of cancer and premature mortality.</p> <p>Because people spend the majority of time indoors, indoor air quality is critical. Examples sources of indoor air pollution include asbestos, bacteria and viruses, building and paint products, carbon monoxide,</p>

	<p>carpets, cleaning supplies and household chemicals, cockroaches, dust mites and dust, floods and water damage, formaldehyde, lead, mold and dampness, pet dander, radon, residential wood burning, secondhand smoke, and volatile organic compounds.</p> <p>Areas of Chula Vista surrounding Interstates I-5 and I-805 have 60-100% of households within 500 feet of high traffic roads. In general, low-income populations are most likely to live near busy roadways in the city. These interstates are truck routes; diesel trucks are a major source of pollution.</p>
<i>Equity impacts</i>	In Chula Vista, low-income populations are more likely to live near busy roadways. Thus, if this strategy ameliorates exposure to roadway pollutants, it will have positive impacts on equity.
<i>Community priority</i>	High
<i>Nature of population impacted</i>	Residents with highest exposure to indoor and outdoor air pollutants
<i>Magnitude of impact on health and equity</i>	High
<i>Recommendations (if applicable)</i>	Focus efforts in regions of the city most impacted by poor air quality (e.g., residents living within 500 feet of high volume roadways such as I-5 and I-805).
Overall priority level	High

HCVAP Strategy: Environmental Quality 8. Continue to promote the highest level of Water Quality (drinking, runoff, & natural bodies) working with businesses, residents, and water districts.

Criteria	Findings
<i>Strategy details and context</i>	Work with businesses, residents, and water districts to continue to promote high water quality.
<i>Health impacts</i>	<p>Health impacts of contaminated drinking water can include gastrointestinal illness, reproductive problems, and neurological disorders.</p> <p>The United States has one of the safest public drinking water supplies of the world, and Chula Vista has no known issues of contamination.</p>
<i>Equity impacts</i>	None anticipated
<i>Community priority</i>	Medium
<i>Nature of population impacted</i>	All Chula Vista residents
<i>Magnitude of impact on health and equity</i>	Low
<i>Recommendations (if applicable)</i>	
Overall priority level	Medium

HCVAP Strategy: Environmental Quality 9. Review the Street Sweeping policy and raise awareness of the program.

Criteria	Findings
<i>Strategy details and context</i>	Review the street sweeping policy, ensure it is adequate, and raise awareness of it.
<i>Health impacts</i>	Street sweeping could reduce dust and thereby improve air quality. By removing debris it also makes bike lanes safer and pedestrian experiences more pleasant, which could increase both bicycling and walking.
<i>Equity impacts</i>	None, though street sweeping needs to be planned for all neighborhoods in Chula Vista.
<i>Community priority</i>	High. This strategy was added based on community feedback at Community Workshops.
<i>Nature of population impacted</i>	All residents
<i>Magnitude of impact on health and equity</i>	Low
<i>Recommendations (if applicable)</i>	Ensure street sweeping in all neighborhoods, not just those that are well-off.
Overall priority level	Medium

Summary of Findings

Based on this analysis, the highest priority strategies are summarized below. Focus areas and the strategies listed under each focus area are presented in order of community priority. Community priority was first determined by votes in community workshops. Stakeholder meetings votes were applied to resolve ties.

Healthy Food Access

- Support regional efforts for Food Waste Prevention Programs that provide food alternatives for food insecure individuals.
- Evaluate the feasibility of additional Farmers Markets, Food Distribution, and/or other innovate programs to address healthy food insecurity and accept EBT.
- Study the location and number of Fast Food Offerings and explore No Drive Thru Regulations in areas of the city already concentrated.
- Attract and retain Full-service Grocery Stores and Casual Restaurants that offer affordable and quality healthy food.

Transportation

- Support Walking Audits to address mobility for all users.
- Continue to respond and promote schools to participate in Safe Routes to Schools.
- Review Public Transit Access with MTS to ensure residents can access community assets and innovative programs to encourage transit use are supported.

Physical Activity

- Educate and address inequities through the Safe, Accessible, Fun & Easy (SAFE) campaign to encourage increased awareness of walking, bicycle and pedestrian access.

Land Use

- Evaluate the Balanced Communities (“Inclusionary”) Policy Guidelines to provide Affordable Housing throughout the city and support financial self-sufficiency.
- Evaluate the Design Standards Manual to reflect concepts of Complete Streets, address signage barriers and other health concepts as adopted.
- Review and amend as appropriate CVMC Zoning and Conditional Use Permit (CUP) processing using a holistic approach to health considerations stressing co-location of amenities and sensitivity of uses near community assets.
- Develop an awareness campaign and update the Otay Valley Regional Park Concept Plan and consider updates to the Green Belt Master Plan to incorporate healthy community concepts.

Community Engagement

- Inventory Community Assets and establish a Health Advisory Commission representative of community partners and residents.
- Engage Youth and Seniors through volunteerism, issue identification, problem solving, and health issues specific to these populations.

Environmental Quality

- Utilize Health Assessment Tools to identify vulnerable areas of the community and support programs that address Environmental Justice issues.
- Continue to promote programs that address residential indoor Air Quality and review changeable sources of air pollution for outdoor.

Health Care & Prevention

- Identify barriers to Mental Health care and resources.
- Continue to support regional efforts that reconnect Homeless Individuals with health-promoting resources.
- Support funding applications for Community Development Block Grant funding that provide preventive health care to the most vulnerable populations.

Conclusions

Based on this prioritization process, HIP’s recommendation to the Healthy Chula Vista Initiative is to implement the strategies identified directly above as both having a significant impact on health and equity of Chula Vista residents, as well as meeting perceived community needs. We anticipate that these strategies have the greatest community buy-in and will result in the largest improvements in health and reductions in health inequities.

We also recommend continuing to engage the community in this process by, for example, holding meetings with community members: to let them know the results of this prioritization process in the coming months; after progress has been made on key issues (e.g., access to healthy food); and in two to three years to discuss progress and new priorities.

We commend the City of Chula Vista for their efforts to address the community issues underlying the community's health issues and for trying to improve health and health equity in the city through this HCVAP process.

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