PolicyLink

Regional Development and Physical Activity: **Issues and Strategies for Promoting Health Equity**

A PolicyLink Report











PolicyLink is a national nonprofit research, communications, capacity building, and advocacy organization, dedicated to advancing policies to achieve economic and social equity based on the wisdom, voice, and experience of local constituencies.



Regional Development and Physical Activity: **Issues and Strategies for Promoting Health Equity**

A PolicyLink Report

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Contents

Preface

Introduction

Disparities in Physical Activity and Health

How Development Patterns Contribute to Disparities in Physical Activity

Strategies to Improve Health by Increasing Physical Activity

23 Conclusion

Endnotes

Preface

Where you live can affect your health. Increasingly, advocates and researchers are drawing attention to the impact of neighborhood factors on health, and are working to promote strategies that improve neighborhood conditions. PolicyLink, a national nonprofit research, communications, capacity building, and advocacy organization, dedicated to advancing policies to achieve economic and social equity based on the wisdom, voice, and experience of local constituencies, has prepared this paper to identify community-driven approaches that improve neighborhoods so that residents can lead active, healthy lives.

The paper explores the connection between development patterns, physical activity, and poor health. Adults and children in all communities, particularly in those most affected by poor health, should have equal opportunities to be active and healthy and to live in safe, walkable neighborhoods. This exploration examines how neighborhoods that

have become racially segregated and economically isolated as a result of sprawling development patterns offer few opportunities to be physically active, and how this harms the health of community residents. Policies and organizing efforts are highlighted to provide the readers with ideas for action.

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Angela Glover Blackwell

President

1

There are important connections between health and patterns of community development and growth. This paper focuses on the link between regional development trends and levels of physical activity, with special attention to the health of, and the conditions faced by, residents of low-income, urban core communities. Specifically:

- Disparities are described in levels of physical activity and in related health conditions.
- Disparities in accessibility, cost, safety, and quality of local sites where people might have opportunities to be physically active are described.
- Strategies to increase local opportunities for physical activity are highlighted.

Sprawl, the pattern of land use in which low density, auto-dependent development spreads farther and farther from urban core areas, affects almost everyone. The negative effects of sprawl are drawing increased attention and concern in all types of communities. The environmental and health problems that result from sprawl, however, are particularly devastating for many low-income communities. As jobs, development, and investment move farther to the periphery of metropolitan areas, these changes lead to shifts in the tax base, political power, and public investments in infrastructure and services. Furthermore, as development shifts from metropolitan areas, surrounding rings of older

suburbs increasingly become economically depressed as well, facing similar challenges to urban core areas.

Racially segregated, economically isolated neighborhoods are left with underfinanced and low quality public schools, substandard housing, few local job opportunities, a lack of adequate public transportation to jobs in outlying suburban areas, an absence of local stores and services, and deteriorating streets. Public policies contribute to these burdens. Often all residents of a region pay the same costs for infrastructure such as sewer or water operations, yet much of the money raised is used to finance new infrastructure in suburban communities. State and federal policies have also long favored highway

construction and repair over public transit, particularly in newly developing suburban areas. Similarly, state funding for schools tends to go toward new construction, often in suburbs, rather than rehabilitation of older schools in urban areas. Urban and inner-ring suburban neighborhoods face a lack of recreational open space, poor air quality, environmental contamination and pollution, traffic dangers, and serious problems of crime and public safety.

The consequences of sprawl-related development patterns have put people in both suburbs and in urban areas at increased risk for a range of diseases and conditions including: respiratory health problems, heart disease, diabetes, pedestrian injuries, and heat-related illnesses and fatalities. In fact, low-income urban communities suffer from high rates of many of these diseases and conditions. One of the pathways through which development patterns influence health is by affecting opportunities for physical activity, since low levels of physical activity have adverse effects on

health. Low-income urban communities have inadequate opportunities in local environments to be physically active.

People in low-income neighborhoods often lack the personal economic resources and mobility that would enable them to go outside the neighborhood to seek opportunities to promote health. Furthermore, low-income urban communities face challenges in using public resources to improve their local environment. Concentrated poverty and a fragmented, inequitable system of local public financing lead to lower tax bases in most inner cities and less political influence to obtain parks, recreation facilities, and other supports for healthy, active living of the quality often found in more affluent suburbs.

This paper discusses disparities in physical activity, health conditions, and in local opportunities to be physically active. This is followed by a discussion of strategies and examples of community-driven efforts that can increase levels of physical activity and improve health.

Sprawl-Related Development Patterns



Decreased Physical Activity



Health Consequences

Disparities in Physical Activity and Health

2

Why Physical Activity is Important for Good Health

Low levels of physical activity are associated with a range of adverse health effects. Physical activity is important for good health because it can reduce the risk of heart disease, high blood pressure, colon and breast cancer, osteoporosis, diabetes, obesity, and overall mortality rates. Regular physical activity is beneficial for children and youth as well as adults. It has been found to increase self-esteem and reduce anxiety and stress among teenagers.²

A lack of physical activity is linked to obesity, and obesity often leads to negative health outcomes. There is an obesity epidemic in the United States. Over half of Americans are obese, and low-income women, African American and Latino women, and Latino men are particularly likely to be overweight.³ Obesity is linked to heart disease, high blood pressure, some forms of cancer, diabetes, asthma, premature mortality, and other health problems.⁴ In addition to suffering from generally higher rates of obesity, low-

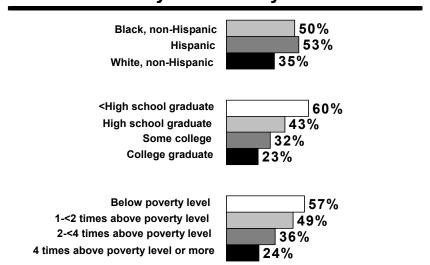
income people of color are also more likely than higher-income and white counterparts to suffer from many of the health consequences related to obesity.⁵

Obesity generally results from poor nutrition and high calorie consumption in combination with a lack of enough physical activity. Low-income communities often face difficulties in obtaining healthy foods, and this is another important contributor to obesity in these communities. Efforts to reduce obesity should therefore consider the effect of community conditions on both opportunities for physical activity as well as opportunities to purchase and eat healthy foods.

Disparities in Physical Activity

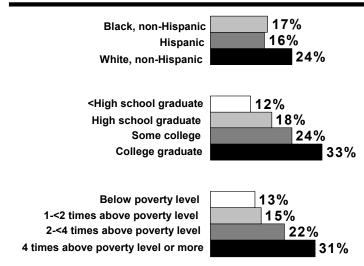
Measures of recreational exercise, such as running and swimming, show that there are significant disparities between people with lower and higher incomes, and between people of color and whites. Data from the Centers for Disease Control and Prevention (CDC) show that there are disparities by race, education, and income in participation in recreational physical activity (Charts 1 and 2).

Adults Reporting No Participation in Leisure-Time Physical Activity* ...



* Engaged in no light-moderate or vigorous physical activity lasting 10 minutes or longer. Source: Centers for Disease Control and Prevention, National Health Interview Survey, 1997

Adults Reporting Participation in Regular,
Vigorous Physical Activity* ...



*Regular activity is 3 or more times per week for 20+ minutes

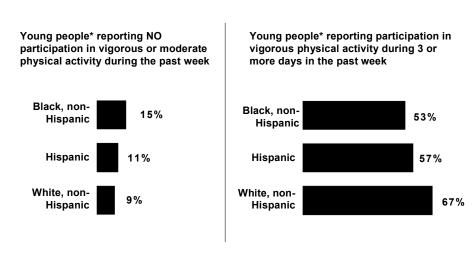
Source: Centers for Disease Control and Prevention, National Health Interview Survey, 1997

These national surveys have revealed that African Americans and Latinos are more likely than whites to report that they do not participate in any leisure-time physical activity. These surveys also show that people with low levels of income and education are more likely than others to say they participate in no leisure time physical activity. Regular, vigorous exercise was more common among whites than blacks and Latinos, and among people with higher levels of education and income than among those with lower levels. §

Similarly, CDC data also show racial disparities in recreational physical activity for young people (Chart 3). In a large national study, black students in grades 9 through 12 were more likely than white students to say they did not engage in any recreational exercise in the past week. And white students were more likely than black or Latino students to report engaging in vigorous exercise at least 3 times per week. ⁹

Exercising as recreation, such as biking or gardening, is a good way to be physically active. Routine physical activity that happens in the course of everyday life, however, such as walking each day to work or while running errands, can also improve health. The Surgeon General has noted that, "people who are sedentary and who do not enjoy, or are otherwise not able to maintain, a regimen of regular, vigorous activity can still derive substantial benefit from more moderate physical activity as long as it is done regularly." ¹⁰ Engaging in regular light to moderate physical activity for at least 30 minutes on most days, whether done at once or in three 10-minute sessions, is beneficial to health.¹¹ Physical activity that is built into people's everyday routines is important because it is done on a consistent, regular basis, and requires less motivation to do than many other kinds of physical activity.

Young People and Participation in Physical Activity



* Students in grades 9-12

Source: Centers for Disease Control and Prevention, Youth Risk Behavior Survey, 1995

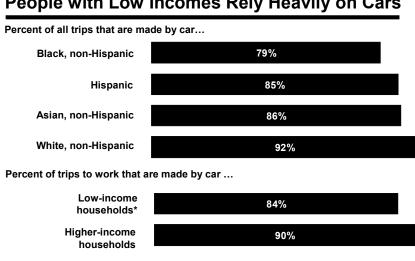
Routine physical activity is particularly important in circumstances where scheduled exercise is less likely to occur. A study of attitudes and perceptions about exercise that was conducted with low-income African Americans, found that participants said their work or daily activities were stressful, and that they felt that exercising would just add to that stress. ¹² The participants saw getting rest as more important than getting exercise. Given the disparities in recreational physical activity and the life stresses that may make it difficult for people to exercise, people in low-income communities of color would need to undertake more routine physical activity to realize the health benefits of an active lifestyle.

Yet like other Americans, most low-income households and people of color rely heavily on cars (Chart 4). Many have noted that people with low incomes and people of color are actually more likely than higher-income people and whites to walk.

Cars, however, are still the primary means of transportation. Even though low-income people are less likely than higher-income people to personally own a car, over eight in ten (84%) trips by people in low-income households to work are made by car, and walking accounts for only 13% of social and recreational trips.¹³ Similarly, the vast majority of trips made by both people of color and whites are made in cars—79% of all trips by African Americans, 85% of all trips by Latinos, 86% of all trips by Asians, and 92% of all trips by whites are made by car.¹⁴

Based on findings on recreational exercise and on routine physical activity like walking, there are opportunities to improve levels of physical activity for low-income people of color. This may be achieved by increasing interest in and opportunities for recreational physical activity, or through changing environments in ways that make it possible for people to be more active in everyday life.

Like Other Americans, Most People of Color and People with Low Incomes Rely Heavily on Cars



^{*} Low-income households were defined as households with 1-2 people and a total income of <\$10,000, 3-4 people and total income <\$20,000, or 5+ people and total income <\$25,000.

Source: Top: Giuliano, 2000; Bottom: Murakami and Young, 1997

How Development Patterns Contribute to Disparities in Physical Activity

3

Historical and political factors have shaped the cultural and physical environments in which many low-income people of color live—and these environments contribute to low levels of physical activity. An understanding of environmental barriers to activity reveals the need for greater equity in access to and quality of opportunities to be physically active.

Recently, there has been increasing interest in understanding how the built environment affects the likelihood that people will be physically active, and in working to change environments to be more supportive of physical activity. The Centers for Disease Control and Prevention have developed a program to promote walking, bicycling, and access to recreation facilities, through environmental and policy interventions. Related to this project, they have published a literature review on the relationship between the built environment and physical activity. 15 The Robert Wood Johnson Foundation is funding several programs designed to improve environments in ways that promote physical activity and has convened experts to better understand how to promote health and physical activity through community design. 16

This form of dispersed development has been attributed with the following consequences for quality of life: concentration of poverty in urban centers and remote communities; divestment and limited access to capital in urban and rural areas; urban residents financing the lion's share of suburban infrastructure and services expansion yet disproportionately burdened with undesirable land uses, threats to public health, increasing job loss, abandonment, and neglect; mismatch between where people work and where they live; excessive reliance on automobile transportation, which contributes to traffic congestion, energy consumption, air pollution, and uncontrollable land consumption.

- Robert Wood Johnson Foundation, 2000¹⁷

Over the past 50 years, policymakers have chosen to provide incentives that have promoted suburban sprawl and that have drawn resources, investment, and development away from low-income inner-city communities of color. Mortgage deductions, public subsidies used to attract businesses and developers to outlying areas, public infrastructure investments such as road and sewer system construction, and other incentives have benefited suburban areas. These incentives helped fuel white flight from central cities, while Federal Housing Administration policies and private practices by real estate professionals simultaneously restricted many people of color from moving out of urban areas. As whites and later some middle-class minority families moved out of central cities, inner-city neighborhoods came to consist of greater and greater concentrations of people with few economic resources.¹⁸

Middle- and higher-income families may be able to compensate for the limitations of their neighborhoods because they are mobile and have economic resources to get exercise beyond what is available in their local communities. By contrast, people with less mobility and few economic resources do not have these same options. For example, the absence of parks and recreation centers is particularly detrimental for children who live in high-density, low-income communities where houses do not have private yards and gardens that they could use for playing. Similarly, local community environments that allow adults to exercise and get routine physical activity are an important way for adults to be physically active, since many do not have access to local pay recreation facilities or cannot afford to go to those facilities that do exist.

There have been many detrimental consequences of inequitable housing and development policies and practices. These include environmental barriers that many low-income people face to being physically active, and to benefiting from good health as a result. These barriers are highlighted in several areas.

Barriers to Recreational Physical Activity

Many low-income people, particularly those living in communities of color, have little access to recreational sites like gyms, parks, and playgrounds.

Recreational Facilities/Gyms. Cost is one factor that prohibits many residents of low-income communities from being able to exercise at recreational facilities. Studies have found that residents of low-income communities are more likely than residents of other communities to say that the inability to afford to go to recreation facilities is a problem that keeps them from exercising. Beyond cost barriers, many low-income community residents do not have access to these facilities even when they are able to pay—indoor private gyms are virtually non-existent in many low-income neighborhoods. Access to parks and indoor gyms has been found to be associated with the likelihood that a person attains recommended levels of physical activity.²⁰

Parks. When cost makes exercising at private gyms impossible, local parks are a good alternative to allow adults, as well as children, to be physically active. In low-income communities of color, however, there are inequities in the availability and safety of parks, as well as in the recreation options available in local parks. A Trust for Public Land survey found that across the country, parks tend to be concentrated in wealthier neighborhoods.²¹ Similarly, a 2002 study found that low-income communities of color in Los Angeles have much lower levels of access to parks than other residents.²² The quality of parks is another important issue. A 1992 Carnegie Council report noted disparities between lower- and higher-income areas in the number of recreation programs available at parks.²³ The Trust for Public Land survey found that those parks that were available in low-income communities suffered from inadequate maintenance and safety problems.

Schools. In many urban core areas, the local tax base has been significantly reduced as businesses have moved out and property values have declined or not kept up with the increases in cost of living. This has left many school systems in and near urban centers struggling to pay for teachers and basic services. A study by The Education Trust found large funding gaps between high- and low-poverty school districts in many states, with schools that serve the most lowincome and minority students receiving much less state and local money per student than districts with the fewest low-income and minority students.²⁴ Reduced funding for school systems is likely to translate into reduced funds for recreational facilities and activities in schools as well. Schools that are struggling to pay for basic educational needs of their students are unlikely to be able to offer many recreational options.

Playground Structures. When efforts to reduce injuries through playground safety legislation are not tied to adequate resources, the result can be reduced access to playground equipment. California enacted legislation that regulates the design, installation, and maintenance of all playgrounds in the state that are open to the public, in an effort to reduce childhood injuries. Thus, many play structures are being torn down but not replaced. One California newspaper, after interviewing many school district representatives notes that, "district officials are trying to balance safety and liability with having something for students to play on."25 For many children, this legislation, lacking adequate funding to replace playground structures, is resulting in fewer opportunities to play and be physically active. Low-income children are disproportionately affected since they do not have as much access to other neighborhood recreation facilities or parks, and they lack the financial resources to pay for classes involving physical activity. Other states that wish to implement this kind of legislation, should ensure that as play structures deemed risky are destroyed, there will be adequate funds made available to replace those structures with new, safer structures.

Barriers to Walking

In addition to barriers to recreational exercise, there are also environmental barriers that make it challenging for residents of low-income communities to go for recreational walks in the neighborhood, or to engage in routine physical activity such as walking to stores or jobs.

Crime. Crime is one barrier to physical activity that can keep people from walking more in their neighborhoods. One study found that residents of low-income communities are more likely than residents of higher-income communities to say that concern about crime limits their participation in physical activities. Another study found that people in low-income neighborhoods are more likely to be afraid that they will be attacked or victimized, and this fear reduces the likelihood of walking. The author of the study explains that, "If residents of poor neighborhoods were not afraid, they would walk even more than they already do." 27

Pedestrian Safety. Pedestrian safety is also a concern for many communities. In 1997, the pedestrian fatality rate for blacks was almost twice as high as for whites, and the rate for American Indians was nearly three times higher.²⁸ Death rates are particularly high in urban communities—in 1998, the majority (69%) of all pedestrian deaths occurred in urban areas.²⁹ A key contributor to these high rates may be inadequate infrastructure to protect pedestrians, such as investment in adequate road design and safety features. These features are particularly needed in highly trafficked urban areas. Unlike many urban areas, newer suburban communities often have designs that limit traffic flow in residential areas, such as cul-de-sacs or gates limiting access to non-residents. One survey found that people with lower incomes were more likely than those with higher incomes to say that heavy traffic was a barrier to physical activity in their neighborhood.³⁰ Residents and their children might be more likely to walk if they knew that their communities were safe for pedestrians. And for those community members who have no choice but to walk to get to jobs, school, and other locations, pedestrian injuries and deaths are possible negative health effects.

Many of the most dangerous neighborhoods are lowincome, lower density communities that have neither the amenities and widespread car ownership of affluent suburbs nor sidewalks, frequent traffic signals, and more adequate transit service of established core neighborhoods. Metropolitan Atlanta is typical of these types of regions, where such communities are home to many recent immigrants. The metropolitan Atlanta pedestrian fatality rates are 4 per 100,000 people for African Americans, 10 for Hispanics, and less than 2 for Whites. Commenting on the disparity, the Chair of Environmental and Occupational Health at the Emory School of Public Health explains, "That says worlds about who has to walk on roads that are unwalkable, who gets to drive, and how we designed the region."

Community Design and Public Transportation.

Inadequate public transportation systems and sprawling development patterns that fail to mix residential and commercial facilities may be important factors that reduce walking. If people are unable to get to stores, jobs, and other locations from their homes, then people have no option except to take most trips in a car.³² As previously noted, the vast majority of trips by people in low-income households and people of color are made by car.

Strategies to Improve Health by Increasing Physical Activity

4

Increasing the amount of walking that people in low-income communities of color can do as a routine part of their daily activities, and increasing other forms of physical activity, can help to reduce obesity, improve overall health, and reduce health disparities. Yet, as outlined, there are many barriers to physical activity in low-income communities in terms of access, cost safety, and quality. There are fewer parks and recreational facilities, pay recreational facilities are often unaffordable, and in many cases the necessary infrastructure, such as pedestrian safeguards, is inadequate or nonexistent.

At the same time, low-income communities may have assets lying dormant that could be used to increase opportunities for physical activity. Many urban areas were once economically thriving before the flight of middle- and higher-income residents. These areas may have existing infrastructure that was once good quality but has fallen into disrepair. For example, an existing community might already have transit routes or parks, making it possible for government to invest efficiently in improving those existing systems and

sites instead of making potentially much larger investments to build new systems.

In addition, sprawling suburban growth patterns tend to cover great distances and compartmentalize residential and commercial development. Urban communities are often more compact and typically have a greater mix of residential and commercial development, enabling public transit to serve a greater number of people more efficiently than in suburban areas.

It can be challenging for communities to gain the public and private investment needed to improve existing infrastructure. Similarly, it can be challenging to advocate for building needed new infrastructure, such as new parks and recreation facilities or installing transit lines where none exist. Low-income, racially segregated urban core communities often face uphill battles in garnering support for government and private investments in local development. Instead, investments are often made in growing, outlying suburban areas.

There are, however, many examples of innovative community-led efforts to improve neighborhood environments. Some of these efforts seek to improve the physical environment while also enhancing residents' leadership and advocacy skills. For example, several initiatives involve youth in developing and running recreational programs, and some involve youth in advocacy efforts. Seniors also make effective advocates for the need for health-promoting opportunities for physical activity, and may benefit from having opportunities to take leadership roles in recreational programs and advocacy efforts.

Regional Alliances

Community-based solutions are powerful, and they can be strengthened further through an understanding of how regional dynamics have shaped and continue to shape local communities. Regional alliances can be useful, particularly in promoting long-term policy changes for more equitable development patterns and greater links of poor neighborhoods to resources. Both urban and suburban communities have been affected by sprawl-related development patterns, and it can be useful for these groups to work together. They face powerful opposing interests, such as the oil industry and car manufacturers, that favor design of neighborhoods and regions to accommodate cars instead of for pedestrians, cyclists, and transit riders. Furthermore, many issues affecting neighborhood environments cross jurisdictions within regions, but decisions are generally made at local and state levels,33 making regional alliances important. There may be opportunities for strategic alliances of urban and suburban residents who wish to ensure that communities are livable and provide opportunities for all to be physically active. Racism, class inequities, and poverty affect how regions develop. These factors must be considered in thinking about regional dynamics, and in attempting to build alliances between groups with sometimes differing interests.

Some researchers and foundation and government officials, have expressed interest in expanding their focus on the connections between the built environment and health. They hope to better understand how environments in low-income communities promote or inhibit physical activity, and push for the environmental changes that would promote it. Community based equity advocates may be able to capture and strengthen interest in the need for safety, transit, and land use improvements in lowincome communities by looking for new and diverse alliances. Foundations and government agencies, by working with advocates, have an opportunity to broaden the base of support for policies to promote environmental and policy changes. For alliances to be successful, issues of race and class cannot be ignored.

Some promising strategies to increase physical activity can be achieved quickly, others require a longer-term commitment. For example, a community might seek to improve physical activity fairly quickly, by making intersections safer so children can walk to school safely. A community could focus on improving physical activity in the long-term, by advocating for changes in urban design or for public investments in parks or recreational facilities. A few examples of existing initiatives and potential policy opportunities are highlighted in the following sections.

Opportunities for Recreational Physical Activity

There are a variety of strategies that could help increase interest in physical activity and reduce disparities in access, cost, safety, and quality of local recreational sites.

Encouraging Recreational Physical Activity. An important first step in increasing recreational exercise, particularly for adults, is increasing interest in exercising. Public health departments can play a key role in these efforts. For example, the New York State

Department of Public Health has made mini-grants to a number of faith-based organizations in minority communities in New York, Buffalo, and Albany to promote physical activity. These grants have been used to create opportunities for and interest in exercise. Programs have included installing exercise equipment in church gyms and starting walking clubs. The state health department is also beginning to work with communities to identify aspects of their neighborhoods that should be changed to make it safer and easier for residents to walk.

Improving Access to Recreational Facilities and **Indoor Gyms.** Recreational facilities are not available in many low-income neighborhoods, and many residents could not afford to go to private gyms even if they were available. One strategy for increasing physical activity in the short-term in these communities is to provide free recreational facilities for residents. For example, Casa Familiar, a nonprofit community based organization in San Ysidro, California, is operating two recreation centers that community members can use for free. The centers offer aerobics classes, team sports, dance classes, and other fitness programs for youth and adults. In the longer term, it may be possible to create programs with public subsidies or incentives to private investors for building recreational facilities in low-income communities, and to ensure that those facilities are promoted to the residents.

Improving Access to Safe, Attractive Local Parks.

In the short-term, working with churches, local parks and recreation departments, and others may enable community groups to ensure that parks are safe both from crime and also from dangers such as broken glass or syringes. Efforts also might focus on increasing the number and variety of activities available at parks, and ensuring that the activities provided meet the needs and interests of the communities those parks serve.

The last several years have seen the growth of many efforts to revive neglected or unsafe urban parks, establish new parks and greenways, and use the process of design and implementation, as well as the

resulting new facilities, for building community and social capital. In the course of these efforts a diverse array of new stewards of urban parks have emerged. The partnerships in 20 cities supported by the Trust for Public Land's Green Cities Initiative, for example, have created and maintained a wide range of facilities and built coalitions that are finding new funds, maintaining properties, engaging young people in the design process, and otherwise expanding the constituency for, and impacts of, urban parks.³⁴

There are also promising examples of strategies for increasing access to and the quality of local parks through political advocacy. The Center for Law in the Public Interest is helping to organize a Los Angeles coalition to create more urban parks in the most underserved local communities and to save existing parks in these areas. In several instances, local coalitions around Los Angeles have won funds for creating parks and stopped the development of power plants and industrial and commercial projects that would have replaced these parks. One coalition of civil rights, community, and environmental organizations, as well as business interests, was able to stop a realtor's plan to build industrial warehouses on an abandoned railyard in Chinatown. The developer had failed to meet requirements for an environmental impact assessment and was relying on millions of dollars in federal subsidies. Impact litigation, legislative advocacy, and coalition-building led to the warehouse project being stopped, and to securing instead \$36 million for a state park to be established in the area.

Using School Sites as Community Centers. A

short-term strategy that some have explored to increase opportunities for physical activity, is to use indoor and outdoor recreational sites on school grounds as sites that can be used by the community after school hours. This idea has been around for decades, but its widespread adoption has often been stalled by lack of agreement on the responsibility of schools and other agencies for funding, cleanup, security, supervision, and maintenance. In recent years, though, the logjams have been broken in many communities and more joint use is underway. For

example, in the New York Beacons Initiative, schools serve as community centers for use by kids and local adults, and are open after-school, evenings, and weekends. The schools offer a wide range of services during non-school hours, including sports and recreation. In Berkeley, California, all school grounds, including playgrounds, are open to the public during non-school hours. In cases where schools do not have decent recreational facilities, there may be ways to work with local groups who do have access to recreational facilities, such as local civic associations or professional sports teams, to allow children to use those facilities.

Reforming the Way Schools Are Designed and

Built. In both suburban and urban settings, school construction and renovation have become enormously important and expensive challenges and opportunities. Often the immediate crisis is one of overcrowding or of dangerously dilapidated buildings and grounds. In the longer term, groups are focused on influencing the way that schools are designed and built. This includes advocating for schools to serve as community centers that can be used by the whole community for recreation, meetings, and other purposes. In New Jersey, a recent court ruling mandated that the state provide high quality facilities for public school children in the poorest, primarily urban, districts of the state. The legislature enacted a school construction bill in response. The state of New Jersey is developing new or renovated schools that will serve as community centers, and that take advantage of community resources. For example, schools might make their recreation facilities available to community members and groups during non-school hours. To take advantage of local resources, schools might work with a local parks and recreation service to allow children to use park facilities to get exercise.

Walkable Communities

Many strategies focus on changing the way neighborhoods are designed and organized so that people can walk to school, jobs, and other destinations, and can enjoy walking in the neighborhood for exercise.

Improving Pedestrian Safety. One immediate way to begin improving residents' opportunities to get routine physical activity through walking is by improving pedestrian safety. Community organizing can be an effective strategy to accomplish this. For example, organizing might focus on getting or maintaining street lights, crossing areas, or stop signs, or on enforcement of traffic laws.

Residents of Richmond, California were concerned about speeding cars in their community. Parents and community members felt it was not safe for children to play outdoors. They organized a petition to put speed bumps in the neighborhood. Armed with 500 signatures of concerned residents from their community and surrounding neighborhoods, the group demanded action by the city council. Initially told there was no money to support speed bumps, the group researched further and discovered that funds from the regional Metropolitan Transportation Commission (MTC) had been granted to install speed bumps on major streets, but not on side streets. The neighborhood council returned to the Richmond City Council, argued that current conditions posed significant health hazards, and demanded that action be taken. Hearings were held, and three months later speed bumps were installed.

Making Walking to School Safer. Another immediate way to increase physical activity among children is to improve opportunities for them to get routine physical activity by walking to school. Safe Routes to School, a project of Transportation Alternatives and the Surface Transportation Policy Project, is a nationwide initiative that focuses on helping communities make walking and biking to school an option that is safe. Projects focus on engineering improvements like expanded sidewalks and traffic calming measures, police enforcement of traffic laws around schools, and health education programs to foster enthusiasm about walking and bicycling to school. For example, the Bronx Safe Routes to School Program is targeting the five worst intersections for children in the Bronx, based on computer mapping of where children have been killed and injured by cars and on interviews with project participants. This is the top cause of death for children ages 5 to 14 in New York City, and the Bronx suffers from the highest percentage of children hit by cars. The Bronx Safe Routes to School program is focusing on making the worst local intersections safer through traffic calming and pedestrian safety engineering.

Increasing Safety from Crime. Reducing crime can increase the amount of walking by neighborhood residents, since people are more likely to walk around their neighborhood if they feel that it is safe. Police efforts to improve neighborhood safety need to include residents and be sensitive to civil rights concerns.

Best practices for collaboration between communities and police departments will vary based on the specific needs and circumstances in particular communities. There are many examples of ways that communities have been working with police departments.³⁵ In Boston, the police department allocates some of its federal block-grant funds to community groups interested in local crime prevention efforts. In New Haven, the police department has been investing in ongoing outreach to the community for over ten years, and can now rely on the community's assistance when they need to recruit new personnel.

Improving Community Design and Public

Transportation. In many communities, particularly communities facing problems of disinvestment and lack of public funds to support city infrastructure, it is nearly impossible to get to jobs or other important destinations without a car. There are several long-term strategies that could increase routine physical activity by reducing reliance on cars and making it possible for residents to get places through walking, bicycling, and public transit.

One long-term strategy is to ensure that there are good systems of public transportation available, particularly in low-income communities. The Transportation Equity Act for the 21st Century (TEA-21) provides an opportunity to improve community environments in ways that would help promote physical activity. Currently, TEA-21 provides funding for planning, construction, and upkeep for public transit, for transit-oriented development, as well as for infrastructure to support pedestrians and bicyclists. TEA-21 will expire on September 30, 2003, and is now in the process of being reauthorized. Some advocates are seeking to ensure that TEA-21 legislation makes recipients of federal dollars more accountable to the communities they serve, particularly to low-income communities in need of better public transportation. Transportation equity advocates around the country are developing skills and constituency bases to help shape both the allocation of federal funds in their regions, as well as the growing number of elections at the local and regional level that can raise new funds for transportation. Where such money becomes available, the priorities for the mix of highway and transit projects, and the allocations among the various communities of a region, are subject to a much broader level of scrutiny and activism than in the past. For example, Bethel New Life, a faith-based community development corporation in Chicago, played an active role in keeping a local transit station open. The Chicago Transit Authority had announced plans to close the station and the Green Line that served the station, but community leaders convinced the transit authority to modernize and rebuild the line instead.

Another long-term strategy to lessen auto dependence is to ensure that neighborhoods are designed and built in ways that mix homes, stores, transit, and other destinations close together. Multiuse zoning, rather than single-purpose zoning that concentrates housing in some areas and commercial districts in other areas, is one way to work toward this goal. Transit-oriented development is another useful strategy, by which housing, commercial sites, and other important destinations are clustered near transit stops. In addition to securing improvements in the local transit line in Chicago, Bethel New Life has undertaken a development project in which affordable single-unit family homes are being built near a transit center that includes shops and restaurants. The homes and transit center are close to schools and services such as a day-care center and an employment office.

The Importance of Community Participation

These are only a few of the many innovative strategies and projects happening across the country that could increase physical activity in low-income communities of color. The particular strategies most appropriate for a given community will vary depending on the specific needs, interests, and assets in that community.

Community participation is the key to authentic, sustainable, and successful strategies to increase physical activity. Residents must be involved in determining what factors in the environment are most in need of change and how that change should

be achieved. Community residents have a unique knowledge of the specific context of their neighborhoods. They have insight into how local children get to school, what kind of physical activities they engage in at school, and where they go and what they do when they are not in school. Community residents have a good sense of where local adults work, shop, get health care and other services, how they get to those locations, what the major challenges are in getting places or being physically active, and which recreational activities are of greatest interest.

Using their knowledge of the local environment, resources, and barriers to physical activity, community members can craft solutions that are appropriate for their neighborhoods. These groups can advocate to secure funding for projects that will improve their environment. Community based groups can work to ensure that their voice is heard when local, state, and federal government officials and agencies, as well as businesses, are determining how money will be spent on development and public infrastructure. Broad, regional alliances can increase the effectiveness of community advocates in garnering increased investment and resources to ensure healthy environments where low-income residents can live, walk, and play.

Conclusion

5

Advocates in low-income communities are working, through a range of short-term and long-term strategies, to improve community environments. In some cases local advocates are making explicit connections between urban development and its effects on physical activity and health. In other cases, the connections are not explicit—but advocates may benefit from making alliances with groups that are interested in improving health by reducing sprawl and its consequences.

Policies and programs can be designed to help create community environments that promote physical activity and good health. There are efforts already underway to improve community environments, and many show great promise. Many of the longer term efforts, particularly those that seek to change policy or infrastructure, will require broad alliances to garner political support and resources.

There are many converging interests that could help build these new alliances and gain public will for public and private policies to promote active, healthy communities. Across the country, people are concerned about increasing rates of childhood obesity. There is also an obesity epidemic among adults, with Americans struggling to control their weight but increasingly failing to do so. Too few people are getting recreational physical activity because of busy schedules, long commutes, and environmental barriers; routine physical activity is also low, with people relying heavily on cars. The number of seniors in the country is exploding; lack of physical activity will be detrimental to their health, increase health care costs, and reduce their quality of life. Concern about sprawl is gaining public attention and momentum, and research institutions, government programs, and foundation initiatives are increasingly focusing on the detrimental effects of sprawling development patterns on physical activity.

These multiple, intersecting interests could be used to build powerful alliances, and it will be important that low-income communities not be forgotten or ignored. For these alliances to be successful, race and class inequities in development patterns and their effects on health must be included in the dialogue. Community leaders, researchers, foundations, government agencies, and other interested groups have an opportunity to work together to create more equitable, active, healthy communities.

Endnotes

¹ R.J. Jackson and C. Kochtitzky, *Creating a Healthy Environment: The Impact of the Built Environment on Public Health* (Atlanta: Centers for Disease Control and Prevention, 2001); H. Frumkin, *Urban Sprawl and Public Health* (December, 2001; In press: *Public Health Reports*, Vol. 117). Web accessible at www.publichealthgrandrounds.unc.edu/urban/frumkin.pdf.

² U.S. Department of Health and Human Services (DHHS), *Physical Activity Fundamental to Preventing Disease* (June 20, 2002). Web accessible at aspe.hhs.gov/health/reports/physicalactivity/physical activity.pdf.

³ DHHS, *The Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity* (Rockville, MD: DHHS, Public Health Service, Office of the Surgeon General, 2001). Web accessible at www.surgeongeneral.gov/topics/obesity/calltoaction/CalltoAction.pdf.

⁵ Health consequences of obesity that are more common among low-income people of color than other populations include diabetes, asthma, and heart disease. F.L. Brancati, P.K. Whelton, L.H. Kuller, et al., "Diabetes Mellitus, Race, and Socioeconomic Status: A Population-Based Study," *Annals of Epidemiology* 6 (1996): 67-73; M. Harris, K.M. Flegal, C. Cowie, et al., "Prevalence of Diabetes, Impaired Fasting Glucose, and Impaired Glucose Tolerance in US Adults: NHANES III, 1988-1994," *Diabetes Care* 21 (1998): 518-524; The Henry J. Kaiser Family Foundation, *Key Facts: Race, Ethnicity, and Medical Care* (October, 1999).

⁸Centers for Disease Control and Prevention, Advance Data No. 325 (April 7, 2002); DHHS, Physical Activity and Health: A Report of the Surgeon General (DHHS. CDC, and National Center for Chronic Disease Prevention and Health Promotion, 1996). Leisure time physical activity was measured in the National Health and Nutrition Examination Survey (NHANES III) and the Behavioral Risk Factor Surveillance System (BRFSS) questionnaire. In NHANES III, participants were asked about whether in the past month they had participated in walking a mile or more at one time, running, riding a bicycle, swimming, aerobics, dancing, calisthenics, yard work, or weight lifting. In the BRFSS survey, people were asked about participation in any physical activities or exercises like running, calisthenics, golf, gardening, and walking for exercise. In the 1997 National Health Interview Survey, physical activity was measured using questions on participation in leisure-time physical activity, and the frequency and duration of light-moderate and vigorous activity. While these are some of the best and most commonly used measures of physical activity, it should be noted that physical activity that occurs at jobs and in doing housework is not reflected.

⁴ Ibid.

⁶ DHHS, *Physical Activity Fundamental to Preventing Disease* (June 20, 2002). Web accessible at aspe.hhs.gov/health/reports/physicalactivity/physicalactivity.pdf; DHHS, *The Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity*, op. cit.

⁷ For example, a study comparing the distribution of stores in neighborhoods in four cities found that poor neighborhoods had three times fewer supermarkets compared to higher wealth neighborhoods, and that predominantly black neighborhoods had four times fewer supermarkets than white neighborhoods. K. Morland, S. Wing, A. Diez-Roux, and C. Poole, "Neighborhood Characteristics Associated with the Location of Food Stores and Food Service Places," *American Journal of Preventive Medicine* 22 (1) (2002): 23-29.

⁹ DHHS, *Physical Activity and Health*.

¹⁰ Ibid.

¹¹ Ibid.

¹² C.O. Airhihenbuwa, S. Kumanyika, T.D. Agurs, et al., "Perceptions and Beliefs about Exercise, Rest, and Health Among African-Americans," *American Journal of Health Promotion* 9 (1995): 426-429.

- ¹³ For higher-income households, 90% of work trips are made in private vehicles, and 7% of social and recreational trips are made by walking. E. Murakami and J. Young, *Daily Travel by Persons with Low Income*, paper prepared for National Personal Transportation Survey Symposium (October 1997).
- ¹⁴G. Giuliano, "Residential Location Differences in People of Color," in *Travel Patterns of People of Color*, prepared by Battelle Memorial Institute for the Federal Highway Administration (June 2000).
- ¹⁵ L.D. Frank and P. Engelke, *How Land Use and Transportation Systems Impact Public Health: A Literature Review of the Relationship Between Physical Activity and Built Form*, Centers for Disease Control and Prevention's Active Community Environments Working Paper #1 (Georgia Institute of Technology, 2001).
- ¹⁶ The Robert Wood Johnson Foundation, *Healthy People, Healthy Places: Promoting Public Health and Physical Activity Through Community Design, Report of an Experts' Meeting, November 27-28, 2000 (Washington, D.C.: The Robert Wood Johnson Foundation, December, 2000).*
- 17 Ibid.
- ¹⁸ A.G. Blackwell and H. McCulloch, *Opportunities for Smarter Growth: Social Equity and the Smart Growth Movement* (Funders' Network for Smart Growth and Livable Communities and PolicyLink, December 1999).
- ¹⁹ B.J. Moore, N. Glick, B. Romanowski, and H. Quinley, "Neighborhood Safety, Child Care, and High Costs of Fruits and Vegetables Identified as Barriers to Increased Activity and Healthy Eating and Linked to Overweight and Income," *The FASEB Journal* 10 (A562–abstract) (1996).
- ²⁰ R.C. Brownson, E.A. Baker, R.A. Housemann, et al., "Environmental and Policy Determinants of Physical Activity in the United States," *American Journal of Public Health* 91 (12) (2001).
- ²¹ The Trust for Public Land, *Cities Initiative:*Opportunities and Strategies (January 1994). See
 www.tpl.org/tier3 cdl.cfm?content item id=887&
 folder id=728.

- ²² J. Wolch, J. Wilson, and J. Fehrenback, *Parks and Funding in Los Angeles: An Equity Mapping Analysis* (Sustainable Cities Program, GIS Research Laboratory, University of Southern California, 2002). Web accessible at www.usc.edu/dept/geography/ESPE/parks.pdf.
- ²³ Carnegie Council on Adolescent Development, *A Matter of Time: Risk and Opportunity in the Nonschool Hours* (New York: Carnegie Corporation of New York, December, 1992).
- ²⁴ The Education Trust, *The Funding Gap: Low-Income* and *Minority Students Receive Fewer Dollars* (August 2002). Web accessible at www.edtrust.org/main/documents/investment.pdf.
- ²⁵ M. Buchanan, "Playground Regulations Pose a Challenge," *North County Times* (Escondido, CA: *North County Times*, 2001). Web accessible at www.nctimes.net/news/2001/20010224/f.html.
- ²⁶ Moore, et al., "Neighborhood Safety, Child Care, and High Costs." op. cit.
- ²⁷ C.E. Ross. "Walking, Exercising, and Smoking: Does Neighborhood Matter?" *Social Science and Medicine* 51 (2000).
- ²⁸ National Center for Health Statistics (NCHS), National Mortality Data, 1997 (Hyattsville, MD: NCHS, 1998).
- ²⁹ National Highway Traffic Safety Administration, Safety Facts, 1998: Pedestrians (Washington, DC: National Highway Traffic Safety Administration, 1999).
- ³⁰ Brownson, et al., "Environmental and Policy Determinants." op.cit.
- ³¹ Howard Frumkin, quoted in V. Gregg, "Taming Urban Sprawl," *Public Health* (Spring 2001).
- ³² Inadequate public transit also makes it difficult for many residents to get to jobs—the Federal Transit Administration has found that two-thirds of new jobs are in the suburbs, but three-quarters of welfare recipients live in cities or rural areas. Furthermore,

those transit services that are available are often not adequate. Most cities offer little transit service during second and third shift hours. Alliance for a New Transportation Charter, *Transportation and Poverty Alleviation* (fact sheet) and *Transportation and Social Equity* (fact sheet). Web accessible at www.antc.net/issues.

There are exceptions—in a few cases decisions are made at regional levels. For example, Metropolitan Planning Organizations are mandated regional decision-makers responsible for transportation planning, with dollars to allocate for transportation plans.

³⁴ M. Rios, "Building Social Capital Through Participatory Design: The Waterfront Commons of Union Point Park," *New Village Journal* 3 (2002). Web accessible at www.tpl.org/tier2 rp2.cfm?folder id=215.

³⁵ Described in M. Harris West, et al., *Community-Centered Policing: A Force for Change* (Oakland: PolicyLink and the Advancement Project, 2001).

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