Taking Action with THRIVE:
Examples of Strategies and Actions to Improve Community Determinants of Health

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Introduction

THRIVE (Tool for Health and Resilience in Vulnerable Environments) is a framework and a tool to assist communities in changing community conditions to achieve better health and safety outcomes. It was created to answer the question: what can be done in communities to improve health and safety and reduce inequities? To answer that question, THRIVE offers a framework that addresses how structural drivers play out at the community level and connects community determinants to health and health equity. The THRIVE tool outlines five steps to guide actions to strengthen community determinants (see box to the right). Step 4 of the THRIVE process (Plan and act) involves planning and implementing strategies. This step entails clarifying vision, goals, and directives; establishing decision-making processes and criteria; and implementing multifaceted activities to achieve desired outcomes.

Taking Action with THRIVE: Examples of Strategies and Actions to Improve Community Determinants of Health supports communities in creating multifaceted and comprehensive activities to improve community determinants that impact health. Building off of Prevention Institute’s Spectrum of Prevention tool, it outlines strategies related to each factor of THRIVE across the levels of the Spectrum. The Spectrum of Prevention is a systematic tool that promotes a multifaceted range of activities for effective prevention. It is a framework for a more comprehensive understanding of prevention that includes six levels for strategy development (see table to the right). These levels are complementary and when used together produce a synergy that results in greater effectiveness than would be possible by implementing any single activity or linear initiative.

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Steps in THRIVE Process
1) Engage and partner
2) Foster shared understanding and commitment
3) Assess
4) Plan and act
5) Measure progress

<table>
<thead>
<tr>
<th>Spectrum of Prevention Levels</th>
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<tbody>
<tr>
<td><strong>6. Influencing Policy and Legislation</strong></td>
</tr>
<tr>
<td>Developing strategies to change laws and policies to influence outcomes in health and safety.</td>
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<tr>
<td><strong>5. Changing Organizational Practices</strong></td>
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<tr>
<td>Adopting regulations and procedures to improve health and safety and create new standards for organizations.</td>
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<tr>
<td><strong>4. Fostering Coalitions and Networks</strong></td>
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<tr>
<td>Bringing together groups and individuals for broader goals and greater impact</td>
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<td><strong>3. Educating Providers</strong></td>
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<tr>
<td>Informing providers who will transmit skills and knowledge to others or to become champions or advocates for your goal.</td>
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<tr>
<td><strong>2. Promoting Community Education</strong></td>
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<tr>
<td>Reaching groups of people with information and resources to promote healthy eating, activity and safety or to prevent unhealthy practices.</td>
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<tr>
<td><strong>1. Strengthening Individual Knowledge &amp; Skills</strong></td>
</tr>
<tr>
<td>Enhancing an individual’s capacity to eat healthy, get active or to avoid unhealthy behaviors / environments.</td>
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1 For a more information on THRIVE, please refer to the THRIVE Overview and Background document.
The strategies suggested in this document for each THRIVE factor are not meant to be exhaustive, but to provide ideas of the sorts of actions that could comprise a multifaceted approach to prevention and improving community determinants. Strategies are organized by level of the Spectrum, and a Spectrum of Prevention is presented for each factor.

Examples of communities taking action to improve the determinants of health are also outlined under each of the factors. These real-world examples provide insight into the strategies, successes, and lessons learned by communities working to improve community determinants. These examples may help generate ideas of actions to take elsewhere, encouragement that change is possible, and assistance to other groups wishing to tackle similar issues. The examples discussed usually involve actions across the Spectrum, and have outcomes related to multiple THRIVE factors. These examples reinforce the importance of a multifaceted range of activities, and the interrelated nature of THRIVE’s twelve factors.
Cluster: People

Factor Name: Social Networks & Trust

Factor Definition: Trusting relationships among community members built upon a shared history, mutual obligations, opportunities to exchange information, and that foster the formation of new, and strengthen, existing connections.

Sample Strategies and Actions Using the Spectrum of Prevention

<table>
<thead>
<tr>
<th>Levels</th>
<th>Sample Strategies and Actions</th>
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<tbody>
<tr>
<td>6. Influencing Policy and Legislation</td>
<td>• Promote policies that establish green spaces, comfortable sitting spaces and community gardens where people can meet, converse, connect, and build relationships. &lt;br&gt;• Develop neighborhood centers where people can interact and hold community meetings and events. &lt;br&gt;• Implement policies that prevent violence.</td>
</tr>
<tr>
<td>5. Changing Organizational Practices</td>
<td>• Ensure that community events reflect the cultural diversity and values of the neighborhood, meet the language needs of community members, and hold appeal for people of different ages. &lt;br&gt;• Foster group process in programs to promote relationships between individuals. &lt;br&gt;• Encourage one-on-one interaction through intergenerational and interracial mentoring and activities as well as around common interests.</td>
</tr>
<tr>
<td>4. Fostering Coalitions and Networks</td>
<td>• Set up multi-racial/ethnic community task forces that engage in searching discussions about what racism is, how it affects the community, and potential solutions. &lt;br&gt;• Engage anchor institutions (faith, service) to help advance community social cohesion.</td>
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<tr>
<td>3. Educating Providers</td>
<td>• Educate service and health providers to understand and facilitate the process of community healing from historic and current trauma. &lt;br&gt;• Train providers on CPTED II, which focuses on fostering social cohesion through environmental design.</td>
</tr>
<tr>
<td>2. Promoting Community Education</td>
<td>• Hold annual community events and celebrations centered on themes of interest to members of the community. &lt;br&gt;• Welcome new members of the community to the neighborhood and let them know about available resources and services as well as promote understanding across differences including culture, age, and disability.</td>
</tr>
<tr>
<td>1. Strengthening Individual Knowledge &amp; Skills</td>
<td>• Foster social competencies via positive early childhood education.</td>
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Examples of Communities in Action

Community Example: Shreveport /Bossier Community Renewal, Shreveport, Louisiana

Shreveport/Bossier Community Renewal (SBCR) is an effort to rebuild the social bonds within the Shreveport region of Louisiana, a low-income area with high crime rates. The theory upon which the project is founded is that building these relationships, and thereby strengthening community, is the only way that “society [can] realize the true sense of community that is necessary to make everything else work.”

In 1992, SBCR founder/coordinator, Mack McCarter began meeting and building relationships with other Shreveport residents. McCarter had wanted to do something about the racial tensions and the resulting social problems within Shreveport, but wasn’t clear on how to go about accomplishing this. Through partnering with the Black community, business, social and church leaders as well as other community residents, McCarter began to understand that the how was through building relationships among neighborhood residents to create a “true” community. According to McCarter, “if there is no intentional methodology to connect people, we cannot assume it will happen.”

SBCR’s methodology is comprised of 3 parts. 1) The Renewal Team that consists of individuals who register project volunteers 2) The Haven House Plan, which is a strategy for increasing the social cohesion on a neighborhood block 3) Internal Care Units, or Friendship Houses that are located within low-income neighborhoods. SBCR staff and their families live in these houses and develop relationships with other neighborhood residents through the offering of services out of their homes ranging from structured after-school programs to health care services.

Since its inception, SBCR has accomplished the following outcomes: 1) Fostered relationships between the faith community, business, universities, health care providers, community-based organizations, police, and community members 2) Improved interracial relations within Shreveport, 3) Developed a three part strategy to increase community cohesion that involved establishing neighborhood-based centers that provide services to residents. Additionally, SBCR has been the recipient of several accolades, including being chosen as one of 19 “Solutions for America” by the Pew Partnership for Civic Change, an All-American City award from the National Civic League, and a $728,000 grant from the Robert Wood Johnson Foundation who is also committed to funding a research project to further assess the value of SBCR and promoting it as a model program to other cities.
Factor Name: Participation & Willingness to Act for the Common Good

**Factor Definition:** Individual capacity, desire, and ability to participate, communicate, and work to improve the community; meaningful participation by local/indigenous leadership; involvement in the community such as through local community and social organizations and participation in the political process.

Sample Strategies and Actions Using the Spectrum of Prevention

<table>
<thead>
<tr>
<th>Levels</th>
<th>Sample Strategies and Actions</th>
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</table>
| 6. Influencing Policy and Legislation | • Establish action campaigns that engage community members in changing local policies.  
• Eliminate laws and policies that make it difficult for all residents to engage in the political process.  
• Create safe and accessible streets for all users and develop neighborhoods so that housing, jobs, and community resources are connected.  
• Implement policies that emphasize the prevention of violence. |
| 5. Changing Organizational Practices | • Establish and sustain apprenticeships, particularly for local political action.  
• Make it easy for community members to get involved by focusing on relevant issues, being clear about what people can do, holding meetings at accessible times and locations, addressing child care issues, and providing stipends or pay when possible. |
| 4. Fostering Coalitions and Networks | • Organize community constituencies and action campaigns to pressure public agencies and political leaders to improve community conditions.  
• Recruit those affected by particular issues onto commissions and committees and train a diverse and broad number of community members to participate in such a capacity. |
| 3. Educating Providers | • Train residents as mentors to create mentoring opportunities both across ages and "near peer."  
• Look for leadership potential among youth; provide members with hands-on experiences and opportunities for skill development to foster civic engagement. |
| 2. Promoting Community Education | • Disseminate information within the community on problems and issues that directly affect residents’ quality of life and provide them with an analysis of the costs of failing to take action around a specific problem affecting their community.  
• Reframe larger issues in local terms in order to illustrate how a community can take specific actions that will contribute to progress on a larger scale.  
• Conduct training on democracy and citizen involvement. |
| 1. Strengthening Individual Knowledge & Skills | • Help community members define problems through processes that create understanding and ownership.  
• Recognize and support indigenous leadership.  
• Sponsor voter registration/education drives and ensure that written and oral information is available in the languages used by community members. |
Examples of Communities in Action

**Community Example 1: Decreasing Community Violence, South Los Angeles, California**

At the peak of the violence epidemic in the 1990's, drive-by shootings and alcohol abuse were common in some South Los Angeles neighborhoods, a predominantly African American and Latino area of the city. Fearing their children would be shot in crossfire, parents would not let their children play outside. In addition to not feeling safe, community residents experienced a saturation of liquor store outlets, had limited food options, and were subjected to police sweeps that were intended to be a ‘solution’ to alcohol and drug abuse. Because residents were unhappy with the law enforcement response to these issues, they came together to bring safety back to their neighborhoods. Neighbors collaborated to create the Community Coalition for Substance Abuse Prevention and Treatment and worked on a number of activities including outreach to local gangs, liquor store closures, and community revitalization. In taking collective action, they significantly reduced instances of violence and alcohol and drug related issues in their streets and residents felt comfortable in their community. The Coalition also organized a youth group, called South Central Youth Empowered through Action, which works to address the root causes of issues related to education, racism, and limited employment opportunities. Major outcomes of this work include 1) Reduced risk of death and injury from firearms, alcohol, and drug abuse through collective action (*participation & willingness to act for the common good*) and 2) Increased opportunities for children to play outside and move around throughout the community (*parks & open space; look, feel & safety*), which can reduce the risk of chronic disease.

**For more information:** Community Coalition; [http://cocosouthla.org/](http://cocosouthla.org/)

**Community Example 2: Shawnee Neighborhood Association, Louisville, KY**

To reduce violence and to increase opportunities for physical activity and the availability of healthy foods in Louisville, Kentucky’s Shawnee neighborhood, the local health department’s Center for Health Equity worked in partnership with the neighborhood association, youth, and local businesses to develop a plan that reflected community priorities. Through a community-informed process, it surfaced that the neighborhood had been experiencing elevated rates of violent assaults that the residents attributed to the availability of alcohol and increased alcohol consumption. In response, the partnership determined that their three most important activities to reduce violence were to decrease alcohol consumption, to increase resident perception of safety, and to increase resident engagement in neighborhood activities.

In support of the main goal of the project to increase neighborhood safety and promote physical activity, the pilot project’s youth have successfully advocated for changes to the community environment. Through digital storytelling—a technique using photos and videos to capture the assets, challenges, and potential solutions for neighborhood changes—the youth brought attention to the work of the pilot partners and spurred action among local stakeholders and decision makers. The recommendations of the pilot partners have been
included in the Shawnee neighborhood sustainability plan; there have been significant
decreases in neighborhood blight; tobacco and alcohol advertisements have been removed
from storefronts by neighborhood retailers; and the city has facilitated major street repair.

The continued work of the pilot partners is helping to foster health and wellness in the
neighborhood. Their innovative, cross-cutting approaches have served as a model for the
Louisville “Healthy Zone” initiative. The “Healthy Zone” is an emerging initiative that
encourages neighborhoods to coordinate efforts, leverage community assets, and moves
forward approaches that address multiple issues and create healthier environments. The pilot
project—through building and strengthening community relationships, giving youth an outlet
for meaningful contribution, and working on making the neighborhood a safer place for
everyone—serves as a building block towards the creation of a “Healthy Zone” in Shawnee.

For more information:  http://www.preventioninstitute.org/component/sbxmapper/article/403.html

Community Example 3: LIFETIME, Oakland, California

LIFETIME is a non-profit organization based in Oakland, California that assists single mothers on
welfare to obtain higher education and remain off of welfare and out of poverty permanently.
Founder and director, Diana Spatz, who completed her BA while raising her daughter on
welfare, established LIFETIME in 1996. LIFETIME began as a service-learning class at the
University of California at Berkeley that Spatz taught to other student welfare-mothers like
herself, instructing them of their rights as welfare recipients, and forming support systems for
them while they worked toward their degrees. Spatz’s momentum grew, and soon her class
became LIFETIME, the organization. Parent members participate in political education,
leadership development, and advocacy training in order to become effective advocates for the
policies that affect their lives.

LIFETIME has accomplished multiple successes that are related not only to promoting
educational outcomes but also to engaging low-income mothers in political advocacy.
Outcomes include: 1) Trained single mothers on welfare as advocates for their educational
rights to ensure that they are able to obtain a higher education and remain off of welfare and
out of poverty permanently (local wealth & living wages), 2) Provided services to over 400
parents to help them reach their higher education goals (education), 3) Involved these parents
in advocating on behalf of policies that affect them under welfare law (participation &
willingness to act for the common good). The parents’ civic engagement efforts resulted in the
changing the welfare policies in all of California’s 58 counties, thereby increasing CalWORKs
parent transportation support services (getting around), increasing parents’ access to education
(education), and winning accommodations for learning disabled parents.
**Factor Name:** Norms and Culture  

**Factor Definition:** Norms are broadly accepted behaviors to which people generally conform that promote health, wellness and safety among all community residents; discourage behaviors that inflict emotional or physical distress on others; and reward behaviors that positively affect others. Culture is the shared knowledge and set of practices created by a set of people for perceiving, interpreting, expressing, and responding to the social realities around them.

### Sample Strategies and Actions Using the Spectrum of Prevention

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<tr>
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</table>
| 6. Influencing Policy and Legislation | • Lobby local transportation officials to more strictly regulate the display of images on public transportation that target women and children and that condone or encourage violence against them. Work with the transportation administration to develop a policy on advertising on public transportation vehicles or property.  
• Implement comprehensive smoke-free and point-of-sale policies to change norms around the acceptability of smoking and provide cessation services for people who want to quit.  
• Implement healthy beverage policies to change norms around sugar sweetened beverage consumption. |
| 5. Changing Organizational Practices | • Enlist the support of faith-based groups and other cultural organizations to increase acceptance of differences.  
• Create spaces in the community for diverse cultures to socialize and share experiences.  
• Promote baby-friendly and breastfeeding hospital practices.  
• Develop food service guidelines related to health and sustainability standards for food purchased, sold and served in schools, after-school, and in childcare environments. |
| 4. Fostering Coalitions and Networks | • Encourage local coalition and network members to think about how the work they are doing can shift norms within the community, whether it’s related to increasing healthy eating and physical activity or preventing youth violence. |
| 3. Educating Providers | • Encourage providers such as the local police force to think about the values and norms they accept and how that may impact who in their community is arrested and incarcerated. |
| 2. Promoting Community Education | • Develop mass media campaigns that shift what people perceive as ‘normal’, for example silence around intimate partner violence or mental health issues. |
| 1. Strengthening Individual Knowledge & Skills | • Increase understanding across groups by working with individuals to discourage behaviors that negatively impact others. |
Examples of Communities in Action

Community Example: Men Can Stop Rape: The “Strengths Campaign,” Washington DC

Men Can Stop Rape (MCSR) launched the “Strengths Campaign”, a media education initiative designed to prevent rape and other forms of dating violence among DC high school youth. The campaign focused on shifting social and gender norms regarding date rape and relationship violence. The campaign develops awareness of the problem amongst young people and supports them with tools to move from “awareness into action”. The theme of the campaign, "My Strength is Not for Hurting," is employed to 1) promote positive, non-violent models of male strength; 2) educate young men about their role as allies with women and girls in preventing rape and dating violence and helps them take action to end interpersonal violence. They also aim to 3) promote healthy relationships based on equality and respect, and 4) create safer school communities.

MCSR implemented social marketing and community organizing campaigns to address these issues. They installed bus and bus shelter ads throughout the District of Columbia, posters in all DC public high schools, and developed a mini-magazine for students around campaign themes. They also provided tools for the youth to engage in action on these issues through training workshops entitled "Safe and Strong". Additionally, they provided resources to the adults working with young men in the schools through inclusive relationship-building efforts, including recruiting teachers and staff on their board, and providing guidebooks to all school personnel.

The Strength Campaign uncovered several key elements to successfully implementing this initiative. They included 1) the critical importance of reaching out to young men as potential allies (social networks & trust; participation & willingness to act for the common good); 2) helping young men redefine what it means to be a strong man by re-creating social norms related to respect towards and violence against women and girls (norms and culture); 3) examining the gender role and social norms pressure young men face to engage in risky behavior and linking that negative pressure to teen dating violence (norms and culture); 4) the need to involve young people in the development of the campaign and effectively incorporate their concerns in shaping the messages of the campaign (participation & willingness to act for the common good); and 5) building alliances and sustained partnerships with the school district and the school community (social networks & trust; participation & willingness to act for the common good).

For more information: Men Can Stop Rape; [www.mencanstoprape.org](http://www.mencanstoprape.org)
Cluster: Place

Factor Name: What’s Sold & How It’s Promoted

Factor Definition: The availability and promotion of safe, healthy, affordable, culturally appropriate products and services (e.g. healthy food, pharmacies, books and school supplies, sports equipment, arts and crafts supplies, and recreational items); and the limited promotion, availability, and concentration of potentially harmful products and services (e.g. fast food, tobacco, firearms, alcohol, and other drugs).

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<th>Levels</th>
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| 6. Influencing Policy and Legislation | • Encourage the siting of supermarkets in food deserts and food swamps by providing financial and regulatory incentives.  
• Consider food access as part of land use and economic development decisions.  
• Work with policymakers and local elected officials to place restrictions on the density of alcohol outlets or fast food establishments within a community or near schools.  
• Implement point-of-sale policies to address access to and promotion of tobacco products.  
• Pass healthy beverage policies.  
• Develop neighborhoods so that housing, jobs, and community resources are connected. |
| 5. Changing Organizational Practices | • Encourage local restaurants to develop food service guidelines related to health and sustainability standards for food purchased, sold and served.  
• Enable farmers’ markets to accept SNAP and WIC Electronic Benefits Transfer (EBT) cards.  
• Adopt guidelines to improve the nutritional quality of meals in schools, after-school, and childcare environments.  
• Encourage organizations, departments and agencies to institute healthy food procurement policies.  
• Encourage small and discount store improvements that include the sale of fresh fruits and vegetables.  
• Encourage editorial boards of newspapers and magazines to set internal policies to not accept advertising for firearms and gun shows, alcohol, tobacco or other unhealthy and exploitative products. |
| 4. Fostering Coalitions and Networks | • Organize local coalitions to conduct community food assessments to determine what’s available and what’s marketed. |
| 3. Educating Providers | • Provide training, technical assistance, equipment, and other incentives to corner stores and street vendors to improve the availability of produce and other healthy food options.  
• Provide training to school foodservice staff to improve the nutritional quality and appeal of meals. |
2. Promoting Community Education.

• Use marketing and media campaigns to educate communities on how the linkages between marketing of unhealthy products and community health status.

1. Strengthening Individual Knowledge & Skills

• Work in local community institutions, such as schools, community centers, and faith-based organizations to teach media literacy to community members to be more critical television viewers and media consumers.
• Teach parents how to avoid purchasing misleadingly labeled foods in grocery stores.
• Promote media marketing literacy to students in local schools.

Examples of Communities taking Action

Community Example 1: South Los Angeles

South Los Angeles has an African American cultural tradition marked by rich culinary, artistic, musical, and architectural achievements. Today, South LA is predominantly Latino. In the late 1980’s, the area’s struggles with crime and violence intensified during the crack cocaine epidemic. Crisis levels of homicide became a catalyst for community activists and leaders to search for tangible ways to halt the substance abuse and violence that were tearing apart the community.

A newly formed group, the South LA Community Coalition, led a campaign to target liquor stores that detracted from community well-being and created public nuisances. Based on a large survey of residents, the group focused its efforts on identifying alcohol vendors with high rates of alcohol- and drug-related violence in and around their businesses, and seeking closure of these community-unfriendly establishments. Community Coalition efforts to thwart violence and reduce substance abuse in an area oversaturated with alcohol outlets have achieved success by using a community-driven approach to reduce the number of neighborhood businesses that represent a threat to the health and well-being of local residents. Coalition efforts have met with a good deal of success. In only three years, the Community Coalition prevented the re-opening of the 24 liquor stores it had originally targeted before the 1992 LA riots, and shut down nearly 200 operating liquor stores in South Los Angeles. The IMOYASE Group has documented an average 27% reduction in violent crime/felonies, drug-related felonies or misdemeanors, and vice (e.g., prostitution) within a four block radius of each liquor store that was closed.


Community Example 2: Garden of Eden, St. Louis, Missouri

The Garden of Eden is a community run grocery-store-like facility established to serve the African American community in St. Louis, Missouri. The project was initiated because
Abraham’s Children (AC) – a project of Interfaith Partnership of Metro St. Louis working with more than 45 churches – recognized the city suffered from a lack of healthy foods, at the same time local advocates and researchers were identifying obesity as a major health concern. At the suggestion of one health advocate from an AC church, an alliance among a diverse group of organizations established the Garden of Eden.

Funded by the Centers for Disease Control and Prevention, the effort has been a partnership between Abraham’s Children, St. Louis University School of Public Health, and Health Works, a local business in St. Louis. The three entities entered into a joint decision making process, a process which requires approval by all the partners before taking action and capitalizes on the strengths of each entity. While all partners developed a plan and applied for grants to support the project, each fulfills a unique function in the team. A church donated the space in its basement to house the market. Local businesses have guided the design and layout of the market. A local supermarket chain, SaveALot, trained community members. Abraham’s Children, which has lay health workers in each of its member churches, provides health counseling and information to members of participating congregations. Community members contribute their understanding of community needs and strengths to the staffing and management of running the store. For example, they recommended that seniors in the community could be trained as nutrition educators. State and local minority health agencies have also lent their expertise to the effort.

The Garden of Eden opened its doors in July 2003. Even before opening, the effort had already achieved four major outcomes. These were: 1) Increasing knowledge and skills regarding fruits and vegetables and physical activity (what’s sold & how it’s promoted); 2) Job training for community residents (local wages & living wealth); 3) Empowering residents: reports from members of the participating groups demonstrated that they felt motivated and organized to address other health concerns in their community after having successfully implemented this project (participation & willingness to act for the common good). This was initiated by developing a community dialogue about the relationship between community resources (e.g. a market) and behavior (e.g. healthy eating); and 4) Establishing a community-run grocery-store-like facility (what’s sold & how it’s promoted), which holds the promise of improving fruit and vegetable intake among African Americans in St. Louis. Over time, this can result in improved health outcomes such as reduced risk of chronic disease.

Community Example 3: San Francisco Tobacco Free Project Community Action Model, California

In 1996, the San Francisco Tobacco Free Project (SFTFP) began funding local community-based organizations (CBOs) to work with community advocates to implement the five-step Community Action Model (CAM). CAM is being used to successfully address social determinants of tobacco related health disparities. It is designed to foster community engagement in engineering environmental change through policy development and change in organizational practices.
Based on the theory of Paulo Freire, the CAM model involves participatory action research, and builds on the strengths of a community to create change from within. SFTFP is a constituent part of a larger movement in prevention that is working to shift the focus away from changing individual behaviors and towards examining and shaping the environment in ways that support healthy choices. CAM provides a framework for community members to acquire the skills and resources to investigate the health of the place where they live and then plan, implement and evaluate actions that change those places in ways that promote and improve health and community wellness.

The CAM is a community organizing approach that involves a five-step process. This process includes: 1) participating in skill based trainings about the model and choosing a focus area that has meaning to the community; 2) defining, designing and implementing a community diagnosis to find the root causes of a community concern or issue and the resources to overcome it; 3) analyzing the results of the diagnosis and preparing their findings; 4) selecting, planning, and implementing an achievable and sustainable action and/or activity to address the issue of concern, and 5) enforcing and maintaining the action to ensure that their efforts will be maintained over the long term.

Over a nine year period ending in 2004, thirty-seven projects have been or will be funded over six funding cycles. CAM projects implemented by local community-based groups to date have included a) a city wide ban on tobacco ads; b) development and passage of policies to ban tobacco food subsidiary products in San Francisco schools by the SFUSD school board; c) a smoke-free parks policy; d) improved regulation to prevent teen access to tobacco on the internet; and e) tenant-driven smoke free policies in multi-unit housing complexes. The many positive outcomes of CAM include 1) increased funding to activist-oriented CBO's (local wealth & living wages), 2) lasting impact in developing both individual and organizational capacity to continue social justice work by creating environmental change through policies (participation & willingness to act for the common good), and 3) meaningful involvement of community members in creating quality and health-supporting local environments (participation & willingness to act for the common good).

For more information: San Francisco Department of Public Health Community Health Promotion & Prev. Branch Tobacco Free Project; http://sanfranciscotobacofreeproject.org/actions/

Community Example 4: Vietnamese Health Promotion Project, San Francisco, California

The Vietnamese Health Promotion Project was concerned about extremely high cervical cancer rates among Vietnamese immigrant women in San Francisco, California. Sponsored by the University of California, San Francisco, the project brings together university medical researchers and community residents to promote screening and early detection. In addition to getting the word out through Vietnamese radio, television and newspaper outlets, the project also employs lay health workers to bridge cultural and language gaps and encourages women to get Pap tests on a regular basis. Program data suggests that radio, television and newspaper
ads are effective at getting the general word out about what cervical cancer is, why to be concerned about it, and about the Pap test. It is important to note that while the use of the media was important in and of itself, it was far more effective in conjunction with a campaign in which lay health workers conducted face-to-face outreach. Outcomes include 1) Earlier detection of cervical cancer among Vietnamese women in San Francisco, 2) Increased awareness about the problem of cervical cancer via the use of media, and 3) Increased knowledge and awareness of other health issues, such as smoking, asthma, and health insurance.
**Factor Name:** Look, Feel, & Safety

**Factor Definition:** Surroundings that are well-maintained, appealing and perceived to be safe and culturally inviting for all residents.

### Sample Strategies and Actions Using the Spectrum of Prevention

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<th>Levels</th>
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| 6. Influencing Policy and Legislation | • Work with city officials to ensure that streets are well-lit and maintained, and that elements that threaten the overall aesthetic/ambiance such as blight, garbage, and unwanted or offensive graffiti are attended to.  
• Implement policy that increases trails and pathways in communities to encourage residents opportunities to be active outside and engage in neighborhood activities.  
• Implement policies that prevent violence. |
| 5. Changing Organizational Practices | • Support and encourage activities that improve the overall aesthetic/ambiance such as planting trees and community gardens, painting murals, and holding clean-up days by organizations, particularly large or anchor organizations. |
| 4. Fostering Coalitions and Networks | • Develop a neighborhood coalition to assess the physical space in the community (streets, sidewalk design, pace and frequency of traffic, etc.) and determine areas that could be improved to increase safety and concrete goals for action. |
| 3. Educating Providers | • Work closely with law enforcement/courts to address issues of disproportionate contact with residents of color within communities. |
| 2. Promoting Community Education: | • Hold events in outdoor venues to educate community members on how to increase safety in their community.  
• Provide opportunities for the painting of murals with healthy messages. |
| 1. Strengthening Individual Knowledge & Skills | • Inform residents which outdoor spaces, such as parks or trails, are underutilized to promote foot traffic and activity outside and create a sense of safety.  
• Encourage youth development programs and activities that incorporate opportunities for youth to learn new skills, such as how to tend to a community garden. |
Examples of Communities taking Action

Community Example: Housing, Chicago Illinois

A Chicago housing project was transformed through an award-winning architectural makeover. Prior to the renovation, tenants did not feel safe enough to sit outside their front door, where chain-linked fences enclosed corridors and created a prison-like environment. In the process of the redesign, the chain link fences were eliminated and the buildings were enclosed with glass. The president of the Tenants' Association explained, “Nobody thought the idea of putting glass over the sides of the buildings would really work, but it changed everything. You couldn’t help but see a rosier day.”

Improving the ambiance of the community led to 1) a significant reduction in theft and violence in the building. In addition to anecdotal reports, the head of the local Chamber of Commerce has found that reports of small theft and violence from the building have virtually stopped. Improvements have created real changes in both the sense of safety within the complex and actual reduction in reports of some types of crime (housing; look, feel & safety). This improved sense of safety has created opportunities for interaction as people are comfortable being in the common spaces of the complex (social networks & trust) and are more comfortable walking around (getting around; parks & open space).
Factor Name: Parks & Open Space

Factor Definition: Availability and access to safe, clean parks, green space and open areas that appeal to interests and activities across the generations.

Sample Strategies and Actions Using the Spectrum of Prevention

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| 6. Influencing Policy and Legislation | • Provide funding to adequately maintain parks, playgrounds, and recreation areas.  
• Increase the number of play spaces for children and create recreational facilities near residential areas.  
• Implement policy that increases trails and pathways in communities.  
• Develop neighborhoods so that housing, jobs, and community resources are connected.  
• Ensure that parks and open space development is specified for underserved populations during general plan updates—with specific attention to equitable access to public play spaces. |
| 5. Changing Organizational Practices | • In neighborhoods with limited resources, create joint-use agreements between schools, city agencies to share public facilities and increase access to recreational programming.  
• Work with schools, after-school programs, and early childhood education to provide physical activity opportunities. |
| 4. Fostering Coalitions and Networks | • Create a coalition of residents, school officials, parks and recreation representatives and others to determine how to increase park access and address neighborhood safety concerns. |
| 3. Educating Providers | • Train city planning agencies on how access to park and open space can revitalize communities and impact health, especially among low-income communities and communities of color. |
| 2. Promoting Community Education | • Develop campaigns to raise awareness and motivation for physical activity  
• Create bus shelter maps that promote the location of nearby parks and trails are nearby.  
• Engage non-park professionals, i.e. afterschool groups, environmental groups, seniors and parents, to understand how parks and open space contributes to health. |
| 1. Strengthening Individual Knowledge & Skills | • Educate community members on where low- or no-cost spaces for physical activity are located. |

Examples of Communities taking Action

Community Example 1: San Francisco County Jail Garden Project

In response to high recidivism rates among inmates at the San Francisco County Jail, Catherine Sneed, a counselor at the jail, decided to create a program that would provide a connection to
nature and food and nutrition while enriching job-skills for inmates. Sneed saw an innate connection between the community’s connection to the environment and crime and poverty. The Garden Project integrates education and job-skill attainment, with community and environmental stewardship (education; local wealth & living wages). Inmate and parolee apprentices of The Garden Project are trained in horticulture and learn how to grow organic vegetables that are then donated to the local community centers. The inmates also participate in educating the community about proper nutrition and neighborhood greening projects, including planting and maintaining trees and shrubs at schools, police stations, and housing developments. The project also created the Earth Stewards Program to support at-risk young adults.

The Garden Project is a model crime-reduction strategy that has been incredibly successful. Program participants are less likely to commit crimes and return to jail. In fact, participants have a 24% recidivism rate, which is less than half the rate of non-participants, who experience a 55% recidivism rate. Gardening is therapeutic, particularly for inmates and parolees, because it can provide a connection to nature as well as a real-life metaphor for self-care and personal growth. In addition, the program allows participants to give back to their community by providing meals for low-income families, and beautifying neighborhoods (parks & open spaces; look, feel, & safety; participation & willingness to act for the common good).

For more information: The Garden Project; www.gardenproject.org

Community Example 2: CALTrans Community Planning Project, Cutler/Orosi, California

Concerned about high pedestrian injury rates, residents of Cutler and Orosi in Tulare County, California identified and implemented solutions through a series of community wide forums, focus groups, and workshops. Participants included representatives from church organizations, local activist groups, and local residents of the area. CALTrans provided funding through its community planning project’s community-wide initiatives to make California communities more pedestrian and bicycle friendly through traffic calming measures. Since a majority of the residents are Spanish-speaking, events were conducted in both English and Spanish and translators were also provided. Outcomes of the planning project include: 1) Reduced risk of pedestrian injury by improving sidewalks (getting around; parks & open space), 2) Increased opportunities for physical activity not only by sidewalk improvement, but also through the creation of bike lanes on major roads (getting around; parks & open space), which can reduce the risk of chronic disease, and 3) Increased accountability by establishing of a nonprofit vision committee, charged with implementation of the final recommendations (participation & willingness to act for the common good).
**Factor Name: Arts & Cultural Expression**

**Factor Definition:** There are abundant opportunities within the community for cultural and artistic expression and participation, and for positive cultural values to be expressed through the arts; and arts and culture positively reflect and value the backgrounds of all community residents.

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| 6. Influencing Policy and Legislation | • Mandate culturally appropriate art programming in schools as part of the curriculum and provide subsidies for lower-resourced schools to train/employ staff to run the programs.  
• Enable community organizations focused on youth development to access appropriate art- and culture-based programs. |
| 5. Changing Organizational Practices | • Enable large art institutions to promote exhibitions that represent all cultures.  
• Work with art institutions to establish culturally relevant artistic and creative opportunities in the community that are low-cost and accessible to everyone.  
• Encourage art institutions to create apprenticeships for community members to develop artistic skills and to prepare them for a career in the art administration. |
| 4. Fostering Coalitions and Networks | • Create a community group composed of city officials, local art institution leaders, artists, and youth to develop a mural art project or city beautification initiative that trains youth and provides employment opportunities. |
| 3. Educating Providers | • Work with educators, youth development service providers, probation/parole officers, health workers, and faith organizations so that they recognize the value of art and cultural expression as opportunities to promote health and well-being in the community. |
| 2. Promoting Community Education | • Nurture involvement in the arts through multigenerational mentoring, arts in the schools, making the arts visible in the community, and ensuring wide access to arts programs.  
• Use marketing and media campaigns supporting healthy environments, behaviors and products to promote art and culture. |
| 1. Strengthening Individual Knowledge & Skills | • Link residents to artistic outlets in the community and educate residents and youth on the value of art as a cultural outlet, stress reducing activity, and community beautification tool. |
Examples of Communities taking Action

Community Example: East Bay Center for the Performing Arts, Richmond California

In 1968, five Richmond teachers searching for lasting and meaningful responses to deeply-entrenched disparities in social justice and educational opportunities got together to establish the East Bay Music Center to provide music lessons for 45 students in a rented church. To date the center continues to grow (it changed its name in 1976 to reflect its expanded vision), offering art and performance instruction in the belief that, when sensitively taught, the arts can become a powerful tool for helping individuals and communities actualize to their greatest potential. They also recognized that the arts can serve as a vehicle for social reconciliation and a practical model for meaningful collaboration. Since its founding, the East Bay Center for the Performing Arts has served more than 700,000 people.

The East Bay Center for the Performing Arts is an educational institution that integrates the vigor of a nationally recognized arts training and producing center with a strong commitment to the serving people from the local community. They provide quality programming, deep respect for community integrity, and their staff and students work together in a positive spirit imbued with joyfulness and hope.

Theatre production, private and group music lessons and performance opportunities, filmmaking classes, and ethnic dance classes and troupes are offered, and scholarships are offered on a sliding scale based on financial need, motivation, and commitment. EBCPA has expanded to offer classes at area schools, focusing especially on schools made up of students with limited resources and opportunities for arts education.

By making the art forms available to any who wish to participate (students range from age 5 to 80), EBCPA has become a cornerstone in the broader community’s cultural and artistic life. EBCPA students and faculty have produced more than 42 original theater and film works on topics such as date rape, gang violence, race relations, substance abuse, AIDS, teen pregnancy, and youth achievement.

The EBCPA’s programs 1) provide positive in-school, after-school, and summer arts programs (arts and culture); 2) increase the physical activity of young people in an exciting and culturally appropriate manner (look, feel and safety); 3) bring young people together in a neutral location and promote positive interaction in a community rife with neighborhood turf issues (social networks and trust); 4) foster a collective appreciation of cultural diversity and strengths, and celebrates the community’s diverse ethnic heritage and cultural history (norms and culture).

For more information: The East Bay Center for the Performing Arts; www.eastbaycenter.org
**Factor Name:** Getting Around

**Factor Definition:** Availability of safe, reliable, accessible and affordable ways for people to move around, including public transit, walking, biking and using devices that aid mobility.

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| 6. Influencing Policy and Legislation | • Develop a local ballot measure requiring elected officials to use public transportation a minimum number of days per week.  
• Implement policy that increases trails and pathways in communities.  
• Work with city officials to ensure that streets are well-lit and maintained, and that elements that threaten the overall aesthetic/ambiance are attended to.  
• Reduce the need to travel to access healthy food options by using policy to improve the community food retail environment. |
| 5. Changing Organizational Practices | • Increase user rates on public transportation by developing more convenient schedules and shifting perception around usage of public transit.  
• Encourage transit authorities to consider free or reduced transit to and from local grocery stores, community events, and institutions such as schools and libraries.  
• To reduce the need for travel, work with organizations to provide tobacco cessation services in places where residents already go, such as pharmacies or local clinics. |
| 4. Fostering Coalitions and Networks | • Involve communities in planning local transportation services. Develop a set of criteria that communities can use to evaluate efforts by the local transportation authority to comply with Title VI of the 1964 Civil Rights Act and involve low-income, communities of color in the design of local transportation projects. |
| 3. Educating Providers | • Identify high-crime transit lines in the community. Invite local politicians to ride these lines together with a group of residents and use this opportunity to discuss the importance of safe, accessible public transportation and identify specific items that local politicians can work to improve. |
| 2. Promoting Community Education | • Use marketing and media campaigns to educate communities on public transportation updates and ways to get involved in increasing access to transit. |
| 1. Strengthening Individual Knowledge & Skills | • Implement riding safety classes for all schoolchildren in exchange for a free bicycle helmet. |
Examples of Communities taking Action

Community Example: Fruitvale Transit Village, Oakland, California

Fruitvale is a low-income, predominantly minority community in Oakland, California. In 1991, Bay Area Rapid Transit (BART) unveiled its plan to construct a large parking structure that would separate the Fruitvale BART station from the surrounding community. Upon hearing this news, the Unity Council (a community development corporation within Oakland created to provide space for working on issues impacting the Latino community within Fruitvale) organized community opposition to BART’s plan. The Council and residents of Fruitvale insisted that there was a better way to develop the Fruitvale station. BART listened, and began working with the Unity Council to develop a new plan.

In 1992, the Unity Council held meetings to bring together various stakeholders. The success of the Fruitvale Transit Village Project has been attributed to the amount of collaboration that took place between stakeholders. Participants in these meetings were asked to name specific goals for the project. These included: improved public safety, increased availability of jobs in Fruitvale, increased number of services within the community, affordable housing, and improved air quality within the community through reducing pollutants from traffic. As a result of resident input, two new buildings were constructed for housing and office space, and a pedestrian walkway was built connecting the BART station area with the greater Fruitvale area.

The following outcomes were achieved as a result of the Fruitvale Transit Village Project, 1) Businesses were brought into the area and increased the availability of local jobs (living wages & local wealth); 2) Availability of public services; 3) Reduction of air pollution resulting from traffic (air, water & soil); 4) Engaged residents as part of the solution (participation & willingness to act for the common good); 5) Affordable housing was located next to a major transportation site (housing, getting around); and 6) Aesthetics were integrated into the planning process (look, feel, & safety).
**Factor Name: Housing**

**Factor Definition:** High-quality, safe and affordable housing that is accessible for residents with mixed income levels.

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| **6. Influencing Policy and Legislation** | • Pass legislation that supports subsidized housing and increases the availability and funding for transitional housing for homeless, those recently released from prison, and people with mental health issues.  
• Provide local tax incentives to landowners to retrofit their rental properties so as to promote safe and habitable housing.  
• Implement smoke-free multi-unit housing policies.  
• Develop neighborhoods so that housing, jobs, and community resources are connected. |
| **5. Changing Organizational Practices** | • Encourage local housing and community development departments to offer financial incentives to for-profit and not-for-profit housing developers to construct multi-family housing, to renovate existing housing, to construct emergency shelters, and to create housing projects with pockets of low-income housing.  
• Work with schools, after-school programs, and early childhood education to provide physical activity opportunities. |
| **4. Fostering Coalitions and Networks** | • Develop a coalition to educate city councils, planning commissions, and community groups about housing affordability issues and can propose initiatives aimed at developing substantive solutions to local housing crises.  
• Work with residents of low-income neighborhoods to form a residents’ association where homeowners and tenants can voice grievances and discuss solutions to some of the housing-related problems faced by their neighborhood. |
| **3. Educating Providers** | • Educate landlords on what they need to maintain in their residences and resources they can connect to in order to create healthy environments for tenants.  
• Work with local health providers to encourage them to think about root causes related to housing that may exacerbate illness like asthma or cause unintentional injury. |
| **2. Promoting Community Education** | • Hold community meetings to educate residents on the types of housing developments that are being proposed in their community and how they can ensure that developments meet the needs of the local community. |
| **1. Strengthening Individual Knowledge & Skills** | • Work with tenants and housing residents so that they know what to look for when inspecting their own homes (e.g. mold, rodents/cockroaches, etc.) |
Examples of Communities taking Action

Community Example 1: Diggs Town Public Housing Redevelopment Project, Norfolk, Virginia

Diggs Town, a large low-income public housing project, was built in Norfolk, Virginia in 1950. Like many public housing projects, Diggs Town was built without much thought to constructional character or giving residents a sense of ownership of their community. Instead, Diggs Town appeared bleak—row after row of little box dwellings resting on patches of uncultivated land. Residents were experiencing many problems with violence, unemployment, drug use, and other crime. In 1990, the Norfolk Redevelopment and Housing Authority (NRHA) began the Diggs Town redevelopment project.

The NRHA commissioned Urban Design Associates (UDA) to work with Diggs Town residents in the redevelopment of their community. The thought behind this was that if residents were engaged in the process, they would feel a sense of ownership of their community, and therefore take pride in its maintenance. Additionally, it was thought that the residents themselves would be the best “experts” on the housing project, because they were there every day, and could therefore assist UDA in identifying both the weaknesses and assets of the community. As partners in the redevelopment project, residents expressed the need for front porches—to have space where residence could socialize with each other.

The Diggs Town Public Housing Redevelopment Project produced the following outcomes 1) Improved public safety as indicated by decreased calls to police (look, feel, & safety), 2) Fostered a sense of ownership, pride, and collective upkeep through designating individual space and community gardens in common areas (look, feel & safety; participation & willingness to act for the common good; social networks and trust), 3) Established DEEDS (Diggs Town Economic Empowerment Demonstration) which integrates social services into Diggs Town with the goal of increasing the self-sufficiency of residents (living wages & local wealth).

Community Example 2: St. John’s Well Child and Family Center

When clinicians at St. Johns’ clinic in Los Angeles noted a significant number of patients with conditions ranging from cockroaches in their ears to chronic lead poisoning, skin diseases, and insect and rodent bites, they inferred that many of the cases might be related to substandard housing conditions. The clinic incorporated into office visits a set of questions about patients’ housing conditions and was able to collect not only standard health condition data (e.g., allergies, bites, severe rashes, gastrointestinal symptoms) but also housing condition information (e.g., presence of cockroaches, rats, or mice).

St. John’s clinic partnered with a local housing agency, a human rights organizing agency, and a tenant rights organization to form a collaborative to address substandard and slum housing in Los Angeles. The data that St. John’s collected made them an asset in the collaborative and helped the collaborative to gain partners. The collaborative developed and pursued a strategic plan to improve housing conditions in the area. The plan included community engagement,
research, medical care and case management, home assessments, health education, litigation, and advocacy. The collaborative passed local administrative policies and secured agreements from high level leadership at different government agencies (LA City Attorney’s Office and LA Department of Public Health) that led to improved landlord compliance with standard housing requirements. The clinic now serves a surveillance role, reporting landlords that perpetuate substandard housing, and the community now has the infrastructure in place to ensure that landlords not in compliance face the proper financial and legal consequences. Evaluation results show that residents’ living conditions and health outcomes both improved as a result of the collaboration’s efforts (housing).
**Factor Name: Air, Water & Soil**

**Factor Definition:** Safe and non-toxic water, soil, and indoor and outdoor air.

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| 6. Influencing Policy and Legislation | • Promote legislation that opens green space, calls for tree planting, and creates 'pocket' parks.  
• Ensure that local economic incentives both hire local populations and to control pollution emissions affecting the neighboring community.  
• Implement comprehensive and multi-unit housing smoke-free policies. |
| 5. Changing Organizational Practices | • Encourage landlords and school officials to test the water for toxins in apartment buildings and schools and change pipes and fixtures when needed to prevent illness especially in children.  
• Encourage the communication of medical clinicians with public health officials to identify acute and chronic symptoms that result from exposure to pollutants.  
• Encourage food companies to engage in and adopt sustainable agriculture practices or reduce the use of pesticides.  
• Increase access to public spaces through joint use agreements among organizations. |
| 4. Fostering Coalitions and Networks | • Develop multi-sector coalitions that include members who can help map neighborhoods and identify sites that need clean-up and determine which decontaminated sites can be utilized as a resource for the community. |
| 3. Educating Providers | • Train doctors and nurses in communities located near toxic conditions to educate their clients about housing and school conditions to better respond to negative health outcomes. |
| 2. Promoting Community Education | • Educate and organize community members around environmental issues and engage them in improving environmental quality.  
• Link residents to resources that can help them improve their environmental quality, for example lead abatement programs for low-income families. |
| 1. Strengthening Individual Knowledge & Skills | • Develop capacity among community members to use local environmental data to make the case to city councils and planning commissions regarding increasing environmental quality. |
Examples of Communities taking Action

Community Example 1: West Oakland Environmental Indicators Project (WOEIP), Oakland, California

The West Oakland Environmental Indicators Project (WOEIP) was borne in response to the poor air quality and other environmental justice issues faced by West Oakland residents. Due to its close proximity to the Port of Oakland, West Oakland residents, whose population is primarily low-income African Americans, experience increased exposure to diesel fuels and particulate matter. For example, residents of West Oakland breathe air that contains three times more diesel particles than in the rest of the San Francisco Bay Area, putting them at risk for various respiratory conditions as well as other serious health conditions like lung cancer and heart attacks. WOEIP has conducted several community-based participatory research (CBPR) projects that utilize a collaborative problem-solving model which empowers residents to improve their neighborhoods through community driven research and engaging community knowledge.

In 2002 WOEIP partnered with the Pacific institute in its first community based participatory research project to define 17 indicators for quality of life and completed a report which provides 13 actions to reduce diesel pollution in West Oakland. WOEIP’s next steps were to conduct the “West Oakland Truck Traffic Study” that hired and trained local residents to collect diesel truck traffic data that analyzed West Oakland traffic volumes and directions in August 2008. Most recently, in 2009, WOEIP partnered with the Pacific Institute and the East Bay Alliance for a Sustainable Economy to produce “Paying with Our Health,” a 2009 examination of California’s freight transportation industry’s economic and health impacts. This research led to dramatic findings about the levels of pollution that West Oakland residents were exposed to due to the high volume of trucks, trucks driving in prohibited neighborhood areas, and high numbers of idling trucks by the Port. Using these findings, and working collaboratively with the truck drivers, WOEIP created an alternative truck route to reduce truck traffic in residential areas. Their grassroots efforts were successful in pushing the City Council to pass the proposed truck route and obtaining a commitment from the Port of Oakland to reduce 85% of the community health risks from diesel pollution by 2020.

The efforts of West Oakland Environmental Indicators Project will improve health outcomes in West Oakland in both direct and indirect ways. In particular, residents will be at 1) Decreased risk for conditions such as asthma, cancer, and heart attacks by reducing exposure to diesel fuel and articulate matter (air, water, & soil). Additionally, improving air quality can increase community physical activity levels which 2) Reduces risk for obesity and chronic disease. Engaging residents in research and providing scientific training and skills 3) Contributes to community capacity (education; participations & willingness to act for the common good), and 4) May lead to better jobs for participating residents (living wages & local wealth). Lastly, 5) Community collaboration may foster relationships among neighbors which can reduce violence and improve mental health (social networks & trust).
Community Example 2: West Harlem Environmental Action, Inc. (WE ACT)

West Harlem is a Northern Manhattan community in New York with a majority African American and Latino resident population. Northern Manhattan is surrounded by three major highways and houses various truck transportation routes, two sewage treatment facilities, a diesel fuel rail line, and one third of New York City’s diesel bus fleet. Due to this inequitable distribution of the city’s most undesirable land uses and placement of toxic facilities, the people in Northern Manhattan are bearing a large portion of the city’s environmental health burdens. Not surprisingly, the impact of this discriminatory city planning strategy has led to residents of Northern Manhattan experiencing an asthma mortality and morbidity rate that is up to five times greater than the citywide average.

In 1988 the West Harlem Environmental Action (WE ACT) responded to construction plans for a second bus depot in West Harlem located adjacent to a junior high school. After WE ACT’s demand for preparation of an Environmental Impact Statement (EIS) of the proposed bus depot was denied by a judge, WE ACT created “The Clean Fuel-Clean Air-Good Health Diesel Bus Campaign,” which informed the public of the exposure disparities as well as the health impacts linked to the diesel fuel emissions. The campaign applied pressure to the Metropolitan Transit Authority (MTA) to convert diesel buses to natural gas by engaging community members through media announcements and advertisements. In addition, they applied pressure to local government by obtaining thousands of signatures from community members on postcards mailed to the President of the MTA and the Governor.

WE ACT’s efforts resulted in the Governor announcing that the Manhattan-Ville bus depot would be converted to natural gas as part of his Clean Fuel Bus Program and the increased visibility of the public health and environmental justice issues faced by Northern Manhattan community members. In addition, in 1988 WE ACT filed a suit against the city’s Department of Environmental Protection (DEP) for failing to adequately maintain and operate the North River Sewage Treatment Plant. WE ACT settled with the city for a $1.1 million community environmental benefits fund. The fund allowed WE ACT to hire staff and serve as a monitor of the city’s $55 million consent agreement to fix the plant. More recently, WE ACT’s Harlem on the Water Project was awarded two grants that will contribute to the redevelopment of the Harlem Waterfront into a park and revitalize the local economy.

Health outcomes in Northern Manhattan were improved due to: The conversion to natural gas which will reduce diesel fumes in the air 1) Reducing risk for various health conditions such as respiratory illness, heart attacks, cancer, and premature death (air, soil, & water). The grassroots organizing 2) Built community capacity and political and social involvement (participation & willingness to act). Redeveloping the Harlem Waterfront will 3) Promote economic revitalization (living wages & local wealth); 4) Prevent violence by improving the environment (look, feel, & safety); and 4) Reduce chronic disease by increasing resources for physical activity (parks & open spaces). Most importantly, WE ACT’s work has been used as a
model for other communities throughout the country, contributing to improved environmental justice and health outcomes for many underserved populations.

For more information: West Harlem Environmental Action; http://www.weact.org/

Community Example 3: Cultivating Communities, Seattle Washington

_Cultivating Communities_ is a neighborhood gardening program for low-income communities in Seattle, Washington. The program was developed when Seattle Housing Authority (SHA) recognized that residents were planting gardens outside their homes, where the soil was potentially contaminated with lead. To address the problem, SHA partnered with the Department of Neighborhoods’ _P-Patch_ program, which helps Seattle residents develop unused plots of land in the city. Together they formed _Cultivating Communities_ in 1995, adopting a proactive approach to working with low-income communities and immigrant populations. Seattle now has 17 community gardens in 4 SHA sites in different communities, providing lead-free organic gardening space for more than 120 families to grow food for family and friends. Two of the four participating communities, Rainer Vista and Yessler Terrace, have populations in which 50% of the residents are of Southeast Asian origin, many with agricultural backgrounds.

_Cultivating Communities_ has leveraged local resources to support the community gardens, such as the _Neighborhood Matching Fund_ (NMF) administered through Seattle city government. Applications to the _Cultivating Communities_ program are available to any community group, which can form for the purpose of getting a community garden. _Cultivating Communities_ also assists residents with grant management if needed. Currently, _Cultivating Communities_ is transferring the management of existing gardens to community residents and establishing new gardens in recently redeveloped communities. _Cultivating Communities_ also has two community-supported agriculture (CSA) enterprises that provide supplemental income for some families. Subscribers pay a set fee and receive a bag of fresh organic produce for 24 weeks. The interaction between customers and gardeners enables the gardeners practice their English skills and links them to the broader Seattle community, helping them adjust to life in the United States. Since most of the gardeners had little contact with each other when the project began, the enterprise is also helping to build community among the gardeners themselves. _Cultivating Communities_ addressed a potentially harmful problem by building on the capacity and skills of residents and leveraging local resources. The program has resulted in multiple health-promoting outcomes. Most directly, these include 1) Decreased exposure to lead by providing lead-free gardening plots (air, water & soil); 2) Decreased risk of chronic disease as a result of increased availability of healthy food (what’s sold & how it’s promoted); and 3) Decreased risk of mental health problems and violence by promoting social connections and trust between community members (social networks & trust). In fact, residents have noted that relationships among neighbors have contributed to community building and crime prevention. Additionally, the program has achieved outcomes that indirectly promote health including 4) Increased economic opportunity through supplemental income development and increasing
participant skills (*living wages & local wealth*); 5) Opportunities to learn English (*education*); and 6) Improved relations between different racial and ethnic groups (*norms and culture*).

**For more information:**
http://www.preventioninstitute.org/component/sbxmapper/article/309.html
Cluster: Equitable Opportunity

Factor Name: Education

Factor Definition: High quality, accessible education and literacy development for all ages that effectively serves all learners

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| 6. Influencing Policy and Legislation | • Establish a robust early learning and child development environment by instituting universal pre-school  
  • Establish accessible universal before and after school programs.  
  • Implement policies that prevent violence. |
| 5. Changing Organizational Practices | • Ensure that schools are welcoming places for family members by actively engaging parents and other caregivers in decisions about school policies and curriculum.  
  • Work with schools to identify age-appropriate opportunities for meaningful student participation in decisions about school policies and curricula.  
  • Encourage libraries to increase rates of residents and youth who have library cards by providing cards to all public school students.  
  • Develop food service guidelines related to health and sustainability standards for food purchased, sold and served in schools, after-school, and in childcare environments.  
  • Encourage educational institutions to implement joint-use agreements, as well as increase opportunities for physical activity in other school, after-school, and in early childhood education settings. |
| 4. Fostering Coalitions and Networks | • Convene a broad group of stakeholders including community residents, school and city officials, and students to address gaps in literacy services and expand educational opportunities.  
  • Collaborate with local community colleges, vocational programs, and employers to ensure school curriculums reflect community needs. |
| 3. Educating Providers | • Train teachers to ensure that educational curriculum is grounded in relevant culture and history.  
  • Adopt diverse pedagogical methods appropriate for different learning styles.  
  • Ensure diversity trainings are available for teachers who may not share their cultural/ethnic origins. |
| 2. Promoting Community Education | • Create literacy service maps to show community residents where services are and where gaps exist.  
  • Infuse literacy informally in the community through local book clubs and various literary events. |
1. Strengthening Individual Knowledge & Skills

- Focus on literacy through the lifespan by working individually with immigrants and non-English speaking, monolingual members of the community in their first language.
- Foster critical thinking skills in youth in schools.

Examples of Communities taking Action

**Community Example 1: St. Hope Academy**

St. Hope is an educational initiative located in Sacramento, California. Deeply impacted by the dismal college going rates for graduates of Sacramento High School, former NBA player Kevin Johnson, founded St. Hope whose mission is to “revitalize inner-city communities through public education, civic leadership, economic development and the arts.”

Through 23 years of effort, St. Hope has increased the graduation rate from 20% to over 85% with nearly 91% of these graduates completing the courses required for admission into the University of California or California State University systems. Through concentrated effort, the school system has been able to eliminate the 150 point achievement gap that exists for African Americans in California. As a beacon of success, over 74% of the graduates from St. Hope school system were accepted into four year academic institutions in 2010, greatly exceeding the 40% average for low income students.

St. Hope has worked to not only change the motivation of students to learn through the adoption of appropriate pedagogical practices but also through transforming the communities surrounding the schools to reinforce the transformational instruction children are receiving in the classroom. St Hope has “started, attracted or catalyzed the creation of 20 businesses throughout the community, resulting in nearly 300 jobs” (living wages & local wealth) and a “significant infusion of capital in the community, including more than $10 million in economic and real estate development investments.”

**For more information:** St. Hope; [www.sthope.org](http://www.sthope.org)

**Community Example 2: Library Cards for All - Salinas, California**

A simple, yet innovative, change in practice has resulted in more young people reading, engaging in meaningful opportunities, having a safe place to gather and connecting with their community in Salinas, California.

In early 2000, the libraries of Salinas were in danger of being closed due to budget cuts. A grassroots campaign, known as Rally Salinas!, managed to raise funds to keep the libraries open until the end of 2005, but services and hours were greatly reduced. In 2005, the city of Salinas passed Measure V, a ½ cent tax measure, which would generate for the city annual revenue of $10 million for public funds. As a result, the libraries reopened 5 days a week.
More recently, a partnership between the library and schools was established to provide all students with library cards, free of charge and application-free. A ceremony was held to present the young people with their cards, which helped to reinforce the feeling of honor and significance of holding a library card, and library staff went to each classroom giving students their individual cards. Each school district received a unique library card with their logo and color. Started in February 2008, by end of June 2008 15,551 students had cards. More importantly, the library has seen a significant increase in library usage by young people and their families since this change in city policy. In order to continue to build the momentum and draw more young people to its safe and imaginative space, the library has eliminated fines and fees for the first year to enable students to learn about using the library. Elizabeth Martinez, Director of the Salinas Public Library, stated, "we want every student in Salinas to learn to read, have a library card, and leave the library feeling better." Library use promotes literacy and reading among families, provides a safe place for students to study and learn (look, feel, and safety) and the engagement of the community served to bring residents together around a common goal (participation & willingness to act).


Community Example 3: Harlem Children’s Zone

Harlem Children’s Zone (HCZ) is a project that started in the early 1990’s on a single Harlem city block to address the concerns and issues of poor families including a failing educational system. Today HCZ has expanded to 97 blocks of Harlem and serves over 20,000 children. HCZ’s programs build strong foundations in early childhood, by teaching parents to create a “literacy rich environment” in their homes and offering pre-K classes to help children prepare for Kindergarten. Additionally HCZ works to close the achievement gap in their college readiness program, which provides academic case management, individual tutoring sessions, and assistance in preparing for college entrance exams.

Their efforts have resulted in their students performing higher on Regents exams than New York State overall, with 93% of high school seniors in the program being accepted into college in 2015 (education). Furthermore, HCZ helps their students stay in college by offering a summer institute that helps prepare students in the transition into college, providing academic and personal support from staff, and placing students in paid internships Harlem Children’s Zone also works to directly improve health by running several successful fitness programs, providing free medical and dental services and giving free vision and hearing tests. In addition, over half of the staff at HCZ are from Harlem and HCZ contributes to the local economy by utilizing local businesses (living wages & local wealth). Finally, HCZ promotes safety by organizing a Peace March in Central Harlem, creating a map that provides safe routes for students to travel to and from program sites and providing staff support to help students switch safely between programs (look, feel, & safety; getting around).

For more information: Harlem Children’s Zone; www.hcz.org
**Factor Name:** Living Wages & Local Wealth  
**Factor Definition:** Local ownership of assets; accessible local employment that pays living wages and salaries; and access to investment opportunities.

### Sample Strategies and Actions Using the Spectrum of Prevention

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| **6. Influencing Policy and Legislation** | • Use local economic development incentives to encourage locally-owned businesses to create or expand their investments within the community.  
• Focus Workforce Investment Act Board priorities (education, training, and job placement) in communities with the highest need.  
• Enable business incubators in areas with high employment needs.  
• Enact living wage policies.  
• Implement policies that prevent violence.  
• Work with the city to change the community food retail environment.  
• Develop neighborhoods so that housing, jobs, and community resources are connected. |
| **5. Changing Organizational Practices** | • Encourage organizations to hire formerly incarcerated individuals to promote positive community investment.  
• Ask businesses to adopt local-hire policies to create community employment opportunities and increase total community wealth.  
• Develop food service guidelines related to health and sustainability standards for food purchased, sold and served in schools, after-school, and in childcare environments.  
• Work with schools to provide health food in school, after school and in childcare environments. |
| **4. Fostering Coalitions and Networks** | • Form a coalition dedicated to improving minimum wage laws or creating a ‘living wage’ policy.  
• Encourage community-level analysis of resident spending to limit economic seepage.  
• Establish Business Improvement Districts. |
| **3. Educating Providers** | • Educate providers regarding the availability of community training programs.  
• Create a venue for the providers of workforce services to regularly meet with local business owners to ensure that training programs match local needs. |
| **2. Promoting Community Education** | • Create a community job forum where groups can learn what jobs are available, connect and network, and provide support to one another.  
• Create a labeling system that helps residents identify which stores in their community are locally owned and operated to strengthen local businesses.  
• Encourage local community based development corporations to provide financial literacy courses to neighborhood residents. |
| **1. Strengthening Individual Knowledge & Skills** | • Offer job-training programs to broaden technical skills and create opportunities for hire in different sectors.  
• Offer and support participation and success in financial literacy courses. |
Examples of Communities taking Action

Community Example: San Francisco Minimum Compensation Ordinance

The city of San Francisco linked health outcomes to limited economic opportunity in order to pass a minimum compensation ordinance, resulting in increased opportunities for health for the city’s lowest income families. The San Francisco Living Wage Coalition worked with city officials and the mayor to pass legislation that would protect all individuals working in the city. Living wages ensure that employees earn enough to pay for basic necessities such as healthy food; have access to health care services; and a living wage allows people to engage in activities that cultivate social networks and reduce stress. In 2004, San Francisco passed a minimum wage ordinance that increased the minimum wage to $8.50 for individuals working more than two hours a week within the city boundaries and tied the annual rate increase to inflation. Each year the rate has increased and in 2012 the rate was set at $10.24, making San Francisco the first city with a minimum wage over $10.00.

The benefits gained by San Francisco residents impacted by the living wage campaign are numerous. A living wage helps families afford basic necessities such as food, a roof over their head, and electricity to stay warm. Knowing that these basic necessities will be taken care of reduces stress and anxiety and provides numerous health benefits. Children in families with living wages experience healthier development, are less likely to live in housing with harmful toxins such as lead, and are more likely to take advantage of educational opportunities that set them up for a better future (education). Living wages not only allow families to live in housing and neighborhoods with better conditions (housing), but they also increase the overall wealth of the community and improve conditions in neighborhoods that contribute to health (look, feel, and safety).

For more information: The Living Wage Coalition; http://www.livingwage-sf.org
ENDNOTES


