

THE BUILT ENVIRONMENT AND HEALTH

11 Profiles of Neighborhood Transformation

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Prevention Institute is a nonprofit, national center dedicated to improving community health and well-being by building momentum for effective primary prevention. Primary prevention means taking action to build resilience and to prevent problems before they occur. The Institute's work is characterized by a strong commitment to community participation and promotion of equitable health outcomes among all social and economic groups. Since its founding in 1997, the organization has focused on injury and violence prevention, traffic safety, health disparities, nutrition and physical activity, and youth development. This, and other Prevention Institute documents, are available at no cost on our website.

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Foreword

In recent years the public health community has become increasingly aware that the design of the built environment can have a major impact on the health of the public. For example, one may expect more physical activity and healthier diets among persons in communities with convenient, safe walking paths and accessible sources of fresh fruits and vegetables. On the other hand, poorer health indicators may be expected among residents of communities with high crime rates, few parks or walking paths, numerous alcohol and tobacco outlets, and little access to fresh food.

In this monograph, the Prevention Institute has profiled eleven projects in predominantly low-income communities where local residents mobilized public and private resources to make changes in their physical environments to improve the health and quality of life for their citizens. Such changes included building a jogging path around a cemetery, transforming vacant lots into community gardens, reducing the prevalence of nuisance liquor stores, and creating attractive murals on walls where graffiti once reigned.

These case studies will help concerned citizens, urban planners, and public officials examine possibilities for local environmental changes that would improve the health of the residents of their communities.

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Introduction

*This is the last town in the world...
Before this came to be, there were
all the possibilities in the world.
There were all the opportunities for
starting with small things to create a
sweet new history and future.
If only we had seen them.*

BEN OKRI, A PRAYER FOR THE LIVING

There is growing recognition that the built environment—the physical structures and infrastructure of communities—plays a significant role in shaping our health. To a great extent, the connection between environment and health has centered on the results of human exposure to contaminated air, water, and soil. Decisions about land use, zoning, and community design influence the degree of human exposure to toxins, but also have implications for neighborhood access to healthy foods, and the level of safety and attractiveness of neighborhoods for activities such as walking and biking. The designated use, layout, and design of a community's physical structures including its housing, businesses, transportation systems, and recreational resources affect patterns of living (behaviors) that, in turn, influence health.

With support from the Centers for Disease Control and Prevention's National Center for Environmental Health, Prevention Institute crafted 11 profiles about communities across the country

The designated use, layout, and design of a community's physical structures including its housing, businesses, transportation systems, and recreational resources affect patterns of living (behaviors) that, in turn, influence health.

that reveal how the built environment can positively influence the health of community residents. These profiles were written to:

1. Describe the important connections between the built environment and health for practitioners in public health, city and regional planning, community economic development, and other related fields;
2. Support public health practitioners in looking beyond the traditional bounds of the healthcare system to address social and environmental determinants of health;
3. Suggest potential expanded roles for practitioners from diverse fields to promote health-enhancing improvements to the built environment;
4. Highlight a range of opportunities to create community-level change to the built environment through multi-sector partnerships with community residents, businesses, community organizations, and local government; and,
5. Provide concrete examples that demonstrate the importance of the built environment in promoting health.

Environmental factors contribute to disproportionately high incidences of negative health outcomes (cancer, asthma, injuries) in low-income communities which are often also beset with structural and institutional inequities. Disfranchised communities are more likely than wealthy communities to be the sites of hazards and,

BUILT ENVIRONMENT AND HEALTH: OVERVIEW OF PROFILES

The program profiles include: 1) a description of the geographic area and changes that were made; 2) the process required to implement the changes, including leadership and organizational collaboration; 3) any documented impacts, positive and negative; 4) lessons learned, framed as “wisdom from experience;” 5) supporting research that documents the connection between the built environment and health; and 6) next steps for action.

The program profiles tell the following stories:

1. Evergreen Cemetery Jogging Path: In the predominantly Latino, urban area of Boyle Heights, California in East Los Angeles, the Latino Urban Forum and neighborhood residents rally community-wide support to create a safe, 1.5 mile walking/jogging path. Community members previously had no access to parks or open space, but can now get physically active, in their own neighborhood.

2. Partners Through Food: In the Upper Falls community of Rochester, New York, a dynamic collaborative of community members increases access to healthy food by organizing for over five years to bring a full-service supermarket into a community which lacked a single grocery store.

3. Boston Lead-Safe Yard Project: An innovative partnership focusing on Roxbury and Dorchester in Boston, Massachusetts uses affordable techniques to minimize exposure to lead in inner-city yards—a contemporary environmental hazard linked to developmental disabilities and learning delays, particularly among children under six, living in older, urban homes.

4. Gardens for Growing Healthy Communities: A community/academic partnership transforms vacant lots into community gardens in urban neighborhoods throughout Denver, Colorado, creating and documenting new opportunities for physical activity, healthy eating and social connections among community residents, survivors of abuse and homeless people.

5. South Los Angeles Liquor Store Closures: Working to reduce violence and crime in South Los Angeles, California, this community-driven, grassroots effort organizes community residents to close neighborhood liquor stores that negatively impact community health and safety.

6. The Paterno Trivium: Community residents work collaboratively with city government to transform an unsafe traffic intersection into a neighborhood gathering spot and to improve the pedestrian environment on adjacent streets in Hudson Heights, New York City—an ethnically diverse, urban community.

7. The Fenway Alliance: A powerful coalition of 20 well-respected arts, culture and academic institutions revitalizes a cultural district by improving walkability through major infrastructure projects in Boston, Massachusetts. Although focused in a commercial district, their efforts demonstrate innovative roles for large-scale institutions in improving the built environment. Their work is focused on attracting African American and Latino pedestrians from nearby schools and communities.

8. Westside Project: With an eye toward improving the built environment, a collaborative of local government agencies, including the public health department, work to build community support and trust before building pedestrian amenities for residents in Stamford, Connecticut who had become wary after a history of displacement and gentrification.

9. The Seattle Department of Transportation: This citywide department pays special attention to achieving equity across geographic and economic boundaries while working to create an integrated network of pedestrian and bicycle infrastructure that promotes safe physical activity for residents throughout Seattle, Washington.

10. The Wray Health Initiative: In the rural town of Wray, Colorado a coalition builds a neighborhood walking path, basketball court and other features to make fitness fun for people of all ages by soliciting community buy-in and creating social support for activity.

11. Philadelphia Mural Arts Program: Utilizing a grassroots model, this effort engages community members, including ex-gang members, in the creation and painting of murals that improve aesthetics and transform neighborhoods in urban, economically disenfranchised communities throughout Philadelphia, Pennsylvania.

at the same time, often lack the infrastructure to support physical activity and healthy eating. Too many residents live in community environments that promote disease and injury and do not support healthy behaviors that can help them avoid major chronic diseases that result from sedentary lifestyles and poor nutrition (e.g., heart disease and stroke). Many people live in neighborhoods that are over-saturated with alcohol outlets and advertisements, lack grocery stores, have sidewalks in disrepair, have little access to open space, and have dangerously high traffic speeds.

Further, compared to residents of middle-class communities, residents of low-income neighborhoods—struggling with the presence of environmental hazards, crumbling infrastructure, and a lack of economic resources—face even more barriers to overcoming them. They often need to implement change in the face of inadequate transportation, fewer businesses in the neighborhood to support them, institutional barriers to neighborhood investment, and lack of influence within the local government. In addition, people's previous experiences of housing cost increases and gentrification may create a realistic concern that enhancing the neighborhood could result in unintended strain and disruption to the community.

However, the physical environment can promote health directly through access to clean air and water and can influence people's behavior by facilitating health-promoting activities, such as walking, biking, and healthy eating. Changes to the built environment can have a positive impact on many health-related issues, from diabetes and asthma to traffic safety and community violence. In many cases, a change to the built environment will simultaneously impact multiple health conditions. To date, most published examples of improvements to the built environment have occurred in middle- and upper-class communities of predominantly White residents.

A good solution solves multiple problems: Changes to the built environment can have a positive impact on many health-related issues, from diabetes and asthma, to traffic safety and community violence. In many cases, a change to the built environment will simultaneously impact multiple health conditions.

In choosing these 11 profiles, we focus primarily on improvements in communities where the mean resident income is low and where concentrations of African American and Latino residents are high. We highlight how improvements to the built environment can enhance the health and well-being of members of these communities. The examples illustrate how changes to the built environment can be particularly meaningful in communities that have historically

lacked important features such as well-maintained pedestrian infrastructure, services and institutions, or public art. Taken more broadly, the profiles demonstrate how improvements to the built environment have the potential to reduce health disparities.

In compiling these profiles, several themes emerged about how communities are able to overcome challenges and succeed.

- Broad, diverse participation is necessary to mobilize the resources and build the will to make community improvements.
- Efforts to create health-promoting environments provide opportunities to build community resilience and marshal community assets, rather than the more typical focus on risk factors.
- Persistence and innovation are common qualities of the organizers and organizing efforts that successfully brought about improvements to the built environment.
- Engaging communities to focus on changing the policies and practices of local organizations and institutions is part of an effective strategy for improving health and leaving behind lasting changes in neighborhoods.
- Focusing on the built environment fits well with other public health approaches that a) recognize that changing individual behavior involves changing social norms and environmental determinants of health and b) concentrate on the community as the unit of analysis and action.

- While making built environment changes may be necessary, they are not sufficient. As the profiles of the Wray Health Initiative in Wray, Colorado and the Westside Project in Stamford, Connecticut illustrate, improvements to the physical environment are significant components of a multifaceted strategy for promoting health that includes community education, increasing social capital and enhancing social support.

Over the past decade, more and more communities have emphasized the importance of making design decisions in the context of the overall community. The term “smart growth” refers to a land development strategy aimed at managing the growth of a community, minimizing automobile transportation dependence, and improving the efficiency of infrastructure investments. While “smart growth” initiatives have brought attention to the need to manage new growth and development effectively, *Built Environment and Health: 11 Profiles*, calls attention to the value of neighborhood-level changes within existing structures. Many low-income urban environments suffering from disinvestments and decay already have the skeleton of a walkable community and possess great potential. Practices as simple and routine as road repavement are opportunities for neighborhood enhancement. One road at a time, more space can be created for bicycles and pedestrians, and routes can be narrowed and altered to promote “traffic calming,” (i.e., decreasing vehicular speed, and increasing safety). These profiles demonstrate that small and incremental changes are opportunities to design solutions that suit unique neighborhood environments and are significant contributions toward improving health and quality of life locally. These changes offer substantial enhancements for the affected residents, and build momentum for further improvements.

In identifying profiles, a key goal was to highlight initiatives that clearly demonstrate linkages between environmental changes and changes in health behaviors

and outcomes. However, such projects are few and our selected efforts are not thoroughly evaluated. Documenting the health impact of environmental change efforts remains a challenge for a host of reasons. Communities generally are not collecting the quality and quantity of data needed to demonstrate impact. Some built environment initiatives are not explicitly designed with health outcomes in mind, and therefore health-related information may not be collected. Furthermore, multi-year surveillance of changes in population health status is often beyond the scale or resource capacity of localities. Therefore, to improve the evaluation of future initiatives it may be appropriate for local evaluation to focus on documenting changes in behavior. For example, a community can assess changes in rates of walking among residents in a manner that can be coordinated with national efforts examining changes in the rate of health conditions such as obesity and heart disease.

In cases where documenting behavior change is beyond an initiative’s scope or capacity, evaluation can focus on documenting the environmental change that occurred. With nationally supported evidence demonstrating that a specific environmental change at the community level yields a positive health outcome, communities can focus on implementing and documenting the particular environmental change, rather than attempt to document the expected behavior change. Toward this end, further investment in thorough case studies to evaluate the impact of some interventions, like those profiled in this report, may be warranted.

The powerful influence of the built environment on health suggests that public health practitioners should be involved in planning and policy decisions related to land use, zoning and community design. Health practitioners can serve an essential role in collaborating with other professionals and working alongside neighborhood residents to create and promote healthy communities. Their participation becomes imperative as the conviction grows that addressing the social and

The powerful influence of the built environment on health suggests that public health practitioners should be involved in planning and policy decisions related to land use, zoning and community design.

physical environment is an essential element of a strategy to encourage healthy behaviors. Thus, a new role for public health leadership is emerging. In this emerging role, practitioners need to engage in three principal areas of action. The first is to assess the health impact of land use and community design options before decisions are made as well as after improvements are implemented. The second is to catalyze and facilitate inclusive partnerships with membership that stretches far beyond traditional health fields to plan new structures and redesign existing ones. Third, public health practitioners need to participate in policy-making on issues related to the built environment to ensure protection from toxins, access to healthy food outlets, places to walk and recreate, and other health-promoting environments.

While Prevention Institute was successful at documenting compelling profiles, we also found critical needs and unfulfilled opportunities in communities throughout the country where health and quality of life could be improved through changes to the built environment. Our hope is that the profiles that follow will stimulate and inspire practitioners from multiple fields and sectors to partner with community residents, design solutions, and take action to improve the built environment for the health and well-being of all.

DENVER, COLORADO

Gardens for Growing Healthy Communities transforms vacant lots into community gardens

Vacant lots of land once strewn with garbage now bloom with new life in some of Denver’s poorest neighborhoods. Denver Urban gardens has been transforming unused lots onto community gardens, creating pockets of green in the midst of inner-city communities. A recently formed collaborative, Gardens for Growing Healthy Communities, studies how the gardens impact community health and translates findings for stakeholders. These urban oases foster neighborhood ties and promote physical, social, and mental well-being. By providing access to fresh organic produce, opportunities for physical activity, contact with nature, and neighborhood meeting places, these gardens promote physical and mental health in communities with diverse residents.

THE PLACE

Denver is a rapidly growing urban center that must cope with the challenges of expansion and pressures that growth can place on low-income, inner-city residents. Denver’s population of about 554,636 is about 32% Latino and 10% African American. Denver has over 70 gardens and garden parks in 30 of its 77 neighborhoods. Gardens for Growing Healthy Communities has been working to transform unused land into urban gardens in moderate and low-income neighborhoods which have higher concentrations of Latino and African American residents than the city as a whole. Approximately 14% of

the mostly Latino population lives below the poverty line, according to the 2000 US Census. In the communities where gardens have been constructed, 22% of the population 25 years and older has less than a high school degree.

THE PROJECT

Gardens for Growing Healthy Communities represents a partnership between Denver-based community organizations, the University of Colorado and community residents. This project fosters a “class-blind environment” among neighbors who share a passion for gardening, explained Jill Litt, Gardens for Growing Healthy Communities program director and principal investigator of the project’s research/academic component. “Gardens cross all boundaries: age, race, education and ethnicity,” she said. Denver Urban Gardens, the lead community organization responsible for building and maintaining gardens, estimates that over 25,000 people participate in gardening-related activities each year.

Litt believes that community gardens are a “true public health intervention because they influence so many aspects of health: mental health, physical well-being and social capital through both direct and indirect pathways. The goal of this project is to understand the role of community gardens as a catalyst for broader neighborhood improvements and public health changes,

The goal of this project is to understand the role of community gardens as a catalyst for broader neighborhood improvements and public health changes, including physical activity and dietary patterns.

including physical activity and dietary patterns. We are slowly gathering the data to learn the many ways gardens impact health.”

By drawing upon the core competencies of each of the partner organizations, the Denver gardening collaborative manages to bridge the gap between research and implementation. Not only do the groups foster the creation of urban gardens, but they also document the significant health impact these gardens have on local community health. Community involvement and leadership are cornerstones of the program’s sustainability and popularity.

When it comes to doing the hands-on work of garden creation, Denver Urban Gardens takes the lead. Working with volunteers of all ages, the group provides technical assistance, helping residents plan, design, coordinate, and construct urban gardens in their neighborhoods. It also offers training and education about herbs, composting, tractors, food preservation, water conservation, and other gardening skills. Central to the sustainability of local gardens is the group’s commitment to leadership training and community empowerment to maintain, promote, and nurture gardens. Gardens are community initiated and maintained and gardeners collectively assume responsibility for improving their own neighborhoods and cultivating a sense of pride in their surroundings while growing fresh, organic food close to home.

THE PEOPLE

Diverse Partners Collaborate to Build Healthy Environments

The Gardens for Growing Healthy Communities collaborative brings together a number of different community groups and academic and government institutions, each with different strengths and capabilities.

Community participants play a vital role in shaping garden design, building and planting gardens, and providing ongoing maintenance to gardens. Community groups in-

Gardeners collectively assume responsibility for improving their own neighborhoods and cultivating a sense of pride in their surroundings while growing fresh, organic food close to home.



CHILDREN DEVELOP A PASSION FOR GARDENING WHILE GETTING ACTIVE AND MASTERING NEW SKILLS TO GROW FRESH PRODUCE.

clude: Denver Urban Gardens, a well-established organization that brings gardens to Denver’s urban areas and has a great deal of influence on local policy; Groundwork Denver Inc., a nonprofit dedicated to restoring vacant and underutilized urban land (e.g., urban brownfields); and FrontRange Earth Force, a nonprofit that works with youth around environmental stewardship.

Meanwhile, the Department of Anthropology at the University of Colorado, Denver and the Department of Preventive Medicine and Biometrics at the University of Colorado Health Sciences Center in the School of Medicine provide coordination, funding, and researchers for the effort. As the lead academic part-

ner, the University of Colorado's Health Sciences Center tackles the data collection and monitoring components of the program. Since May 2002, the university has provided student and researcher volunteers to study the health impact of gardens on both the gardeners and the surrounding communities. As part of a class on community assessment, students collect qualitative research data through interviews with community participants and by conducting physical observation of garden sites and the surrounding neighborhoods. Using community-based, participatory techniques, the group has studied the health impact of gardens in approximately 30 Denver neighborhoods, with a focused pilot project in 14 community gardens in two Northern Denver neighborhoods. The collaborative has worked out a complex cost structure with state and local contractors to utilize overgrown and vacated lots. On average, building a new garden costs \$10,000 and making enhancements cost \$3,000 to \$5,000. Maintenance and upkeep costs are kept low through the in-kind efforts of community members. Additionally, Denver's Department of Parks and Recreation donates resources for basic garden maintenance, including sidewalks, accessibility to soil, streetlights, and water.

THE RESULTS

Healthy Change in Local Environments

Preliminary findings indicate that Denver's neighborhood gardens improve the health of resident gardeners by increasing physical activity levels, consumption of fresh fruits and vegetables, and social connectedness through gardening circles—not to mention stress relief.

These gardens provide fresh fruits and vegetables, which are eaten by gardeners and distrib-

uted to neighbors, homeless shelters, and assisted living facilities. In addition, gardeners share recipes for healthy salsas and other foods prepared from the gardens, which further encourage produce consumption. The gardens also contribute to strengthening the fabric of communities and building social capital, explained Litt. Social capital includes the "connections among individual-social networks and the norms of reciprocity and trustworthiness that arise from them,"¹ as well as standards for behavior that are socially dictated. In interviews, participants identified relaxation, decreased stress, and the feeling of a spiritual connection with "Mother Earth" as benefits of gardening.

This project's findings echo the limited but growing body of published research that indicates that community gardens confer physical and mental health benefits to gardeners. A case-control study of the health impacts of urban gardening in Philadelphia conducted by Blair et al. found gardening to have a positive impact on dietary intake, psychosocial health, and community participation. The authors note that gardeners ate "significantly more of six vegetable categories than non-gardeners...and they also consumed less milk products, sweets, and sweet drinks." In addition, "gardeners were significantly more likely to participate in food distribution projects, neighborhood clean-ups and neighborhood social events."²

At community garden projects in California funded through the Healthy Cities and Communities effort, Twiss et al. documented a number of outcomes ranging from increased physical activity and consumption of fruits and vegetables at one site, to local policy development, community improvement, and increases in knowledge and skill at other sites.³

Community surveys also support the link between urban garden-



THE CHALLENGING WORK OF GARDENING IS AN INTERGENERATIONAL ACTIVITY, WHERE YOUNG PEOPLE LEARN FROM EXPERIENCED GARDENERS.

ing and improved perceptions of mental and physical well-being.⁴ In 2000, Armstrong published results from a survey of community garden coordinators from 63 community gardens in upstate New York which revealed several health reasons for participation in community gardens including: access to fresh food, exercise, contact with nature, and mental health benefits.⁵ In addition, Armstrong found that gardens located in low-income areas were four times more likely to catalyze efforts to deal with community concerns than gardens in non-low-income areas. Because this program reclaims vacant lots, garden creation and maintenance also result in the reduction of other environmental health hazards, including broken bottles and obvious illicit drug use. Finally, gardens provide a source of beauty that increases property values and desirability of properties in garden neighborhoods. Emerging research and program evaluations strongly suggest that community gardens influence several dimensions of health, particularly in low-income, urban neighborhoods where the gardens can be sanctuaries that promote physical, social, and mental well-being.

WISDOM FROM EXPERIENCE

Litt advises, “Communicating results of the program to partners so that they are aware of and fully engaged in each step of the process is essential. I work really hard to emphasize the importance of giving back to the community with project volunteers, students and fellow researchers, not simply going in and getting results. One way we have done this is to demonstrate support for, and investment in, the project’s success through volunteering time to the gardens and in the community.”

LOOKING AHEAD

Building on its current success, Gardens for Growing a Healthy Community is currently working with Denver Urban Gardens to use geographic information system technology to map out areas and expand work to bring gardens to areas of need. Over the long-term, the collaborative will work with community partners



COMMUNITY RESIDENTS BUILD, NURTURE AND MAINTAIN GARDENS WHICH OFTEN SERVE AS NEIGHBORHOOD MEETING PLACES.

to identify new sites for gardens. Community maps will be used to facilitate discussions with communities to identify areas in need of open space and redevelopment, and will allow project partners to prioritize areas for enhancement and cultivation. It will also allow residents to share their ideas about how to create and maintain gardens that will improve physical activity, nutrition, and other health behaviors in their particular communities.

In the future, Litt and her partners are planning to establish the North Denver Health and Sustainability Initiative to empower residents to make sustainable, neighborhood-level changes that will reduce and eliminate health disparities brought on by environmental inequities. This project will build on the community garden efforts by applying lessons learned about community organizing, leadership, and skill development to eliminate environmental injustices.

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ENDNOTES

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This is one in a series of 11 profiles that reveal how improvements to the built environment can positively influence the health of community residents. The examples illustrate how changes to the built environment can be particularly meaningful in communities that have historically lacked important features such as pedestrian infrastructure, services and institutions, or public art. Taken more broadly, the profiles demonstrate how improvements to the built environment have the potential to reduce health disparities.

The profiles were written and produced by Prevention Institute. Funding and guidance were provided by the Centers for Disease Control and Prevention's National Center for Environmental Health. It is our hope that these profiles will stimulate and inspire partnerships between community residents and practitioners from multiple fields and sectors to design solutions and take action to improve the built environment for the health and well-being of all.