

Sustainable Communities Planning Grant Program Comments

Advance Notice Comments Prepared by the Convergence Partnership for the U.S. Department of Housing and Urban Development Office of Sustainable Housing and Communities and Office of the Deputy Secretary

March 2010

The Convergence Partnership is pleased to offer comments to the Department of Housing and Urban Development (HUD) Office of Sustainable Housing and Communities and Office of the Deputy Secretary on its plans for a Sustainable Communities Planning Grant Program. The Convergence Partnership is a collaborative of six major philanthropic funders and advisors encouraging multi-field, equity-focused efforts to change environments to support healthy people and healthy places.¹ The Convergence Partnership's strategies of policy, environmental and organizational change through multi-field collaboration are based on its core values of equity and social justice.

The Convergence Partnership applauds the aims of the interagency Sustainable Communities Initiative (SCI) to improve economic prosperity, environmental sustainability, and social equity in metropolitan regions and rural communities. The Convergence Partnership believes that interdisciplinary, multi-field strategies that address equity and environments – such as the joint HUD, DOT and EPA effort – are fundamental to achieving healthier, more equitable communities across America. Research has demonstrated clear links between public health and community environments – including housing, transportation, and environmental quality. For example, communities with walking paths, parks and recreational facilities have residents that are more active than those who do not have access to the same resources. Residents who use public transit are less likely to be obese. Communities with a higher density of unhealthy food outlets have higher rates of diabetes than communities with healthy food access. Housing plays a significant role in numerous health outcomes. What's more, communities with the greatest health impacts also tend to be those facing the greatest physical environmental challenges.

To achieve sustainable, healthy communities across America, regional plans must prioritize health and equity principles and outcomes. Equity means providing all people with diverse opportunities to prosper and achieve their full potential.

¹ In 2006, a collaboration of funders came together to create the Healthy Eating Active Living **Convergence Partnership**, with the shared goal of changing policies and environments to better achieve the vision of healthy people living in healthy places. The steering committee includes representatives from **The California Endowment**, **Kaiser Permanente**, **Nemours**, **the Robert Wood Johnson Foundation**, **Kresge Foundation**, **and the W.K. Kellogg Foundation**. The **Centers for Disease Control and Prevention** serve as critical technical advisors on the committee. **PolicyLink**, a national research and action institute devoted to advancing economic and social equity, serves as program directors for the partnership. **Prevention Institute**, a national non-profit organization dedicated to improving community health and equity through effective primary prevention, provides policy research and analysis along with strategic support. The Convergence Partnership supports multifield equity and social justice focused efforts to support healthy eating and active living by changing environments through strategies that encourage policy and organizational change. http://www.convergencepartnership.org.

To ensure that the SCI maximizes health and equity outcomes in its upcoming Sustainable Regional Development Plans Program, the Convergence Partnership recommends six major steps for the planning and implementation of SCI's Sustainable Communities Planning Grant Program. Further details regarding the recommendations listed below are included in the next section.

Recommendations:

Recommendation #1. Ensure that health and equity anchor the vision of each region and guide future regional development by **requiring applicants to include a dedicated Health Equity Element in their Sustainable Regional Development Plan**.

Recommendation #2. Integrate health and equity priorities in Sustainable Regional Development Plans by requiring applicants to address food systems issues, including access to healthy foods in underserved communities, through sustainable urban and rural land use development.

Recommendation #3. Prioritize equity in all regional development processes by **incentivizing regions** to meaningfully and sustainably include equity partners and community leaders in the planning and implementation of Sustainable Regional Development Plans.

Recommendation #4. Operationalize equity principles throughout grantee selection, planning and implementation by **incorporating health and equity indicators throughout the Sustainable Communities Planning Grant Program**.

Recommendation #5. Ensure that healthy, equitable, sustainable regions are attainable by **providing technical assistance** (including tools that promote equity, such as health benefits analyses) to **grantees to support interagency, multi-field, multi-sector collaboration** both within and across jurisdictions to support the implementation of Sustainable Regional Development Plans.

Recommendation #6. Ensure that health and equity are priorities that infuse all aspects of Sustainable Regional Development Plans through outcomes evaluation by identifying, developing, and tracking meaningful and relevant indicators throughout the planning and implementation process.

Recommendations

Recommendation #1. Ensure that health and equity anchor the vision of each region and guide future regional development by requiring applicants to include a dedicated Health Equity Element in their Sustainable Regional Development Plan.

Regional plans, and the elements which comprise them, set forth the vision and goals for the development of regions into the long term. As visionary planning documents, they play an influential role in guiding the shape and content of policies and plans in the region. SCI Sustainable Regional Development Plans can promote healthy community environments to prevent chronic disease and reduce health disparities by including planning elements that specifically target equity and a comprehensive definition of health.

Preventing disease means creating environments that surround children and families – neighborhoods, schools, childcare centers, and workplaces – that support health and safety. It requires change in both the food environment – including how food is grown, processed, distributed, and sold – and the physical

environment— from how neighborhoods are built to the transportation systems that serve them. It also necessitates preventing violence and injuries by bolstering protective efforts to allow children, families, and communities to thrive in safe environments and reduce trauma associated with violence.

Jurisdictions across the country, such as Richmond, California, are creating and implementing innovative Health Elements to assure that long-term planning and development strategies sustain health equity and key community health priorities. Health Equity Elements promote public health and equity, and prevent chronic disease, injury and respiratory illness through healthy planning, land use and development strategies. They describe visions of smoke-free, healthy eating and active living environments in which everyone has an equal opportunity to prosper and achieve his or her full health potential.

Health Equity Elements should address core concerns related to:

- ➤ Increasing access to safe, healthy housing by assuring that quality, affordable housing is available to all members of a community for both shelter and other health-promoting opportunities. It should promote the placement of housing in proximity to employment and education opportunities, affordable transportation, key health and social services, healthy foods, physical activity opportunities, safety and social cohesion. Where possible, it should also include strategies for encouraging and enforcing healthy housing design standards, such as reduced exposure to air pollutants and noise, appropriate ventilation, climate regulation and treatment for pest infestations, and restricted use of toxic materials in construction, such as halogenated flame retardants, which can have long term health effects. VII
- ➤ Promoting affordable transportation and healthy community design to meet the needs of all community members through improved public transit access and service and increased neighborhood bikeability and walkability to promote equal opportunities to access jobs, schools, parks, healthy foods, health care, and other necessary resources for wellbeing. VIII
- ➤ Ensuring safe, accessible parks, playgrounds and places for recreation and open space through improved safety, maintenance, and access to increase physical activity in underserved neighborhoods.ix
- ➤ Ensuring access to healthy, high-quality physical environments through targeted efforts to limit climate change and reduce exposure to toxins and other environmental threats that otherwise disproportionately impact low-income people or communities of color.x
- ➤ Improving food and nutrition options through improved access to healthy, affordable, and culturally appropriate foods in communities and in and around schools and by addressing regional food systems.xi (see also recommendation #2)
- **Reducing risks and bolstering protective factors associated with violence** in homes, schools, and neighborhoods in the most impacted communities. xii
- Increasing availability of and access to equitable economic development and jobs by helping to lift low-income people and communities of color out of the economic downturn to allow them to better meet their basic health needs through expanded economic opportunity.xiii
- **Improving access to quality education and schools** by investing in adequate school facilities, quality teachers and pipelines to success for students in the communities with greatest need.

A significant literature on each of these areas exists, and the Convergence Partnership is willing and ready to share strategies from its collective wisdom and experience pertaining to these issues with SCI.

Recommendation #2. Integrate health and equity priorities in Sustainable Regional Development Plans by requiring applicants to address food systems issues, including access to healthy foods in underserved communities, through sustainable urban and rural land use development.

The production, distribution, sale, consumption and recycling of foods – or, the food system – has large implications for the economic (jobs and neighborhood vitality) and health of all people, communities and regions. Food systems not only provide communities their nourishment, they also impact water, air and soil environments, climate change, and the economies of both rural and urban areas and the region as a whole.

Sustainable food systems are ones that meet the food needs of current populations with minimal impact to ecosystems and the environment, and can continue to meet the food needs of future generations. They encourage local production and distribution infrastructures and make nutritious food available, accessible, and affordable to all. Sustainable food systems consider a range of issues and priorities, including plant and animal production practices, the range of available food options, land use and development priorities, labor concerns, and economic considerations.

Regional development plans can improve economic and environmental opportunities to create and maintain sustainable food systems. Sustainable food systems offer great economic benefits to local growers, and enhance the economic competitiveness of regions. The SCI can promote sustainable food systems by encouraging prospective grant recipients to:

- Provide incentives for expanding access to healthy foods, particularly in communities with "food deserts"xiv;
- Tap the potential for growing food within cities through urban agriculture;
- Diversify farming practices to assure sustainability of the farming industry;
- Promote local farms to support regional food systems;
- Support the purchase and sale of locally grown food products to increase revenues earned among local farms and farm workers, as well as facilitating greater access to fresh food for local retailers; and
- Encourage and enforce safe drinking water standards across all municipalities.

Recommendation #3. Prioritize equity in all regional development processes by incentivizing regions to meaningfully and sustainably include equity partners and community leaders in the planning and implementation of Sustainable Regional Development Plans.

The resources offered by the SCI should be prioritized for those applications that focus on equitable outcomes. Equity means providing all people with diverse opportunities to prosper and achieve their full potential. Regional plans rarely address issues of equity, including key topics related to race, poverty, and inclusion. Key indicators for reaching equitable outcomes include significant community participation, a regional equity partner that receives support for their participation, and a clear strategy for reaching equitable outcomes.

The strongest urban and regional planning and implementation strategies include the input, guidance and perspectives of area residents, neighborhood groups, and small business owners.** The most inclusive processes engage residents from the outset of planning and include their input in decision making. Community-based organizing groups often spur greater and more diverse involvement and can help government agencies successfully engage community representatives on an ongoing basis.

For SCI's Sustainable Regional Development Plans, equity leadership should be core to the application process, plan implementation, and governance. Public agencies should commit to inclusion of an equity partner in decision-making and to incorporating feedback from broader community engagement as well as the use of analytical tools to measure and ensure equitable outcomes. The grant review and selection committee should prioritize the selection of plans that involve and/or fund community and equity partners in both planning and implementation approaches to ensure that these leaders are meaningfully and sustainably engaged, and to assure that equity remains a priority for all Sustainable Regional Development Plans.

Recommendation #4. Operationalize equity principles throughout grantee selection, planning and implementation by incorporating health and equity indicators throughout the Sustainable Communities Planning Grant Program.

Not all communities are created equally when it comes to opportunities for healthy living.xvi Lowincome communities and communities of color have fewer grocery stores that stock healthy fresh foods and are more likely to be unsafe for children to walk to school or play outside. Residents who live in unhealthy environments are more likely to suffer from diabetes, asthma, heart disease, and high blood pressure.xvii These underlying inequities must be addressed to create healthy places for healthy people. Targeting resources to the people and places that are most vulnerable requires knowledge about the challenges that communities face. Nontraditional partners, including equity groups, community leaders, and health departments, bring unique perspective and expertise to these issues.

The SCI can prioritize equity in the grant review and selection process by both including health departments, community health organizations, and other health experts in the grant review and selection process, and by utilizing key community indicators and indicators for the social determinants of health to prioritize regions.

Entities with public health expertise can help to select and track specific indicators of community wellbeing and change. Public health departments, community health organizations, and health experts nationwide have become increasingly adept at identifying and using local-level social determinants indicators to assess the health and equity in communities. The numerous social and environmental factors that influence community health are commonly referred to as the *social determinants of health*. Common social determinants indicators include:

- Economic indicators (median income, poverty rates, local vs. regional cost of living),
- Employment indicators (unemployment rates, workforce characteristics),
- Education indicators (educational attainment, school quality),
- Political indicators (*civic participation*, *voting rates*),
- Environmental quality (air, water and soil),
- Housing indicators (stock, homelessness rates, segregation),
- Transportation indicators (availability of public transit, sidewalks and bike lanes that promote walkability and bikeability, rates of unintentional traffic injuries)

- Community health indicators (*safety, tobacco use, exercise and fitness rates, diet and nutrition, access to healthy foods and opportunities for physical activity and recreation*),
- Social justice indicators (measures of socioeconomic and racial disparities),
- Public health and medical indicators (affordability and availability of services and programs), and
- Violence and safety indicators (perceptions of safety, crime, child abuse, weapons, alcohol outlet density, illegal drug activity, positive adult role models, reentry, recidivism, school attachment and achievement, community supports for parents and families, and job training and placement).

The philanthropic funders and advisors of the Convergence Partnership recommend that the SCI assess a range of social determinants indicators to prioritize communities with greatest need, with emphasis on communities experiencing:

- ➤ High levels of poverty: poverty rates exceeding 30%xviii
- ➤ High levels of unemployment
- High levels of chronic diseases such as diabetes, hypertension, and heart disease

Recommendation #5. Ensure that healthy, equitable, sustainable regions are attainable by providing technical assistance (including tools that promote equity, such as health benefits analyses) to grantees to support interagency, multi-field, multi-sector collaboration both within and across jurisdictions to support the implementation of Sustainable Regional Development Plans.

Meeting housing and transportation goals that protect the environment, promote equitable development, and help to address the challenges of climate change requires collaborative, multi-field, multi-sector approaches at all levels of planning and implementation. However, agencies and departments are entrenched in systems and structures that are deeply siloed; local, regional and state governments face numerous hurdles to overcome disciplinary and political boundaries and bridge gaps in information, capacity and resources.

The SCI should require proposals to clearly state what parties will be engaged in planning and implementation, their roles and relationships, and what structure they intend to use for carrying out work over the course of the grant period. *The SCI should prioritize regions with a successful history of interdisciplinary, multi-field collaboration to reduce barriers to implementation and promote integrated planning and development.* Interdisciplinary planning and implementation can allow Sustainable Regional Development Plans to be more comprehensive in scope and impact, to better leverage resources from the philanthropic sector, and to build from a diverse range of experiences from community and leadership engagement. Further – as outlined in Recommendation #2 – the SCI should prioritize those projects that include collaboration between community leaders, nonprofit organizations and agencies representing multiple disciplines and multiple sectors.

Health benefits analyses (sometimes referred to as Health Impact Assessments or HIAs) are an innovative and cross-disciplinary strategy for assessing the potential population health impacts of a proposed project, policy or other development decision. Health benefits analyses can integrate the expertise of many agencies and fields to determine, document and recommend strategies for reducing harmful health effects, increasing beneficial effects, and reducing health inequities to contribute to healthy, sustainable regions. Given the promise of health analyses to both increase interagency collaboration and address the health and equity needs of regions, the SCI should provide support to build the capacity of regions to carry forth with these and similar activities.

Recommendation #6. Ensure that health and equity are priorities that infuse all aspects of Sustainable Regional Development Plans through outcomes evaluation by identifying, developing, and tracking meaningful and relevant indicators throughout the planning and implementation process.

Indicators to measure regional progress over time are not only critical to understanding the impacts of the program over time, but also to help chart the course of the work as it is develops. Final and intermediate outcomes related to health and equity can be measured through quantitative benchmarks and indicators, as well as qualitative approaches. Establishing specific equity and health indicators can serve as an additional incentive for grantees to take seriously and strive to meet overall equity goals. Many of these indicators were outlined in Recommendation #3.

Conclusion

The Convergence Partnership is excited by the opportunities that the HUD/DOT/EPA Sustainable Communities Planning Grant Program presents for communities across the country, particularly those most in need. The Partnership is enthusiastic to share its expertise and wealth of tools and resources in healthy, equitable community and regional planning and development. The Convergence Partnership would welcome the opportunity to discuss these recommendations, share their tools and resources^{xix}, and discuss opportunities for capacity building to further promote sustainable, equitable, and healthy communities and regions across America.

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References

10M (Institute of Medicine). 2005. Preventing Childhood Obesity: Health in the Balance. Washington, DC: National Academy Press

iii PolicyLink, UCLA Center for Health Policy Research, California Center for Public Health Advocacy. April 2008. "Designed for Disease: The Link Between Local Food Environments and Obesity and Diabetes." http://www.policylink.org/site/apps/nlnet/content2.aspx?c=lklXLbMNIrE&b=5136581&ct=6997183. Accessed March 9, 2010.

iv Dolores Acevedo-Garcia+, PhD, MPA-URP and Kimberly Lochner. Residential Segregaion and Health. In: Ichiro Kawachi and Lisa B. Berkman (eds.), *Neighborhoods and Health*, Oxford University Press, 2001.

Krieger J, Diggins D. (2002). Housing and Health: Time Again for Public Health Action. American Journal of Public Health. 92(5):758-768; Breysse PN, Galke W, Lanphear B, Farr N.

The National Center for Healthy Housing. (2003). "The Relationship Between Housing and Health: Children at Risk Workshop. Report on the Workshop (November 7-8, 2002)." Chapter 4. Unintentional Injury of Children in the Home.

v PolicyLink. Why Place Matters: Building the Movement for Healthy Communities. Available at: http://www.policylink.org/site/apps/nlnet/content2.aspx?c=lklXLbMNIrE&b=5136581&ct=6997411. Accessed March 12, 2010.

vi City of Richmond, California. http://www.cityofrichmondgeneralplan.org/. Accessed March 9, 2010.

The Association of Bay Area Governments (ABAG) has been working closely with the Bay Area Regional Health Inequities Initiative (BARHII) to integrate health objectives throughout their regional plan. http://www.barhii.org/resources/downloads/barhii healthy-planning-guide.pdf.

vii Dolores Acevedo-Garcia+, PhD, MPA-URP and Kimberly Lochner. Residential Segregaion and Health. In: Ichiro Kawachi and Lisa B. Berkman (eds.), *Neighborhoods and Health*, Oxford University Press, 2001.

Krieger J, Diggins D. (2002). Housing and Health: Time Again for Public Health Action. American Journal of Public Health. 92(5):758-768; Breysse PN, Galke W, Lanphear B, Farr N.

The National Center for Healthy Housing. (2003). "The Relationship Between Housing and Health: Children at Risk Workshop. Report on the Workshop (November 7-8, 2002)." Chapter 4. Unintentional Injury of Children in the Home.

viii The Convergence Partnership. 2009. Healthy, Equitable Transportation Policy: Recommendations and Research. Available at: http://www.convergencepartnership.org/site/c.fhLOK6PELmF/b.5327643/k.BF0B/Transportation RX.htm Accessed March 12, 2010.

PolicyLink and Prevention Institute. 2009. The Transportation Prescription: Bold New Ideas for Healthy, Equitable Transportation Reform in America. Available at: http://www.convergencepartnership.org/atf/cf/{245a9b44-6ded-4abd-a392-ae583809e350}/TRANSPORTATIONRX.PDF. Accessed March 12, 2010.

The American Public Health Association. At the Intersection of Public Health and Transportation: Promoting Healthy Transportation Policy. Available at: http://www.apha.org/NR/rdonlyres/43F10382-FB68-4112-8C75-49DCB10F8ECF/0/TransportationBrief.pdf. Accessed March 12, 2010.

- ix Frank LD, Schmid TL, Sallis JF, Chapman J and BE Saelens. 2005. Linking Objectively Measured Physical Activity with Objectively Measured Urban Form. *American Journal of Preventive Medicine* 28(2005):117-125.
- D. Avecedoo-Garcia et al., john a powell, "Race and Space," Brookings Review, Fall 1998.
- x K. Atwood, GA Colditz, and I. Kawachi, "From Public Health Science to Prevention Policy: Placing Science in its Social and Political Contexts," *American Journal of Public Health* 87 (1997): 1603-6.
- S. Macintyre, S. MAciver, and A. Sooma, "Area, Class and Health: Should We Be Focusing on Places or People?" *Journal of Social Policy* 22(1993):213-34.
- xi PolicyLink. February 2010. Healthy Food, Healthy Communities: Strategies to Improve Access to Fresh, Healthy Food and Transform Communities. http://www.policylink.org/site/apps/nlnet/content2.aspx?c=lkIXLbMNIrE&b=5136581&ct=8020083. Accessed March 9, 2010.
- xii By collecting data on the populations and locations at greatest risk for violence and injuries, identifying the reasons why there are increased rates of violence and what factors protect communities from violence, and developing and using evidence-based strategies and programs at the individual, family, community, and societal levels. For instance, schools can reduce violence by 15% in as little as six months through universal school-based violence prevention efforts. Ref: Hahn R. Effectiveness of Universal School-Based Programs to Prevent Violent and Aggressive Behavior. Am J Prev Med 2007;33(2S):S114–S129.
- xiii Also, by keeping residents healthy, this will increase employee productivity in the workplace and decrease associated rates of absenteeism (pattern of not coming to work) and presenteeism (pattern of coming to work with illness and not functioning at full capacity).
- xiv USDA Economic Research Service. Access to Affordable and Nutritious Food: Measuring and Understanding Food Deserts and Their Consequences. Report to Congress. Washington, DC: U.S. Department of Agriculture, 2009. Available at http://www.ers.usda.gov/Publications/AP/AP036/AP036.pdf.

ii L.D. Frank, M. Andresen and T.L. Schmid, "Obesity Relationships and Community Design, Physical Activity, and Time Spent in Cars," American Journal of Preventive Medicine 27, no. 2 (2004): 87-96, http://www.act-trans.ubc.ca/documents/ajpm-aug04.pdf

xv PolicyLink. Achieving Policy Impact: San Diego's Market Creek Plaza. Available: http://www.policylink.org/site/c.lklXLbMNJrE/b.5160109/k.BE43/San Diego Market Creek Plaza.htm. Accessed March 12, 2010.

MOP - Metro Organizations for People. Accessed: December 18, 2009. Available at: http://mopdenver.org/.

Community Coalition: Building A Powerful Voice in South LA. Accessed: December 18, 2009. Available at: http://cocosouthla.org/.

Pastor M, Dreir P, Grigsby JE, Lopez-Garza M. (2000). Regions that Work: How Cities and Suburbs Can Grow Together. Minneapolis: University of Minnesota Press.

xvi PolicyLink. Why Place Matters: Building the Movement for Healthy Communities. Available at: http://www.policylink.org/site/apps/nlnet/content2.aspx?c=lklXLbMNIrE&b=5136581&ct=6997411. Accessed March 12, 2010.

xvii Frumkin H. 2003. Healthy Places: Exploring the Evidence. American Journal of Public Health 93(9): 1451-6.

PolicyLink. Why Place Matters: Building the Movement for Healthy Communities. Available at: http://www.policylink.org/site/apps/nlnet/content2.aspx?c=lklXLbMNIrE&b=5136581&ct=6997411. Accessed March 12, 2010.

xviii Widely accepted definitions of concentrated poverty include poverty rates of or exceeding 30 percent. Jargowsky, Paul A. 2003. Stunning Progress, Hidden Problems: The Dramatic Decline of Concentrated Poverty in the 1990s. Center on Urban and Metropolitan Policy. Washington, DC: The Brookings Institution.

xix Convergence Partnership Tools available at

http://www.convergencepartnership.org/site/c.fhLOK6PELmF/b.3917599/k.7472/Strategies_and_Tools.htm

Policy Briefs

Promising Strategies for Creating Healthy Eating and Active Living Environments (pdf) offers a comprehensive and cross-cutting review of policy, strategy, and program recommendations to realize the vision of healthy people in healthy places. Prevention Institute developed this document for the Convergence Partnership after conducting extensive research and numerous interviews with diverse stakeholders and constituencies. *Promising Strategies* provides a menu of options for various audiences to advance or expand environmental change and policy strategies.

The **Strategies for Enhancing the Built Environment to Support Healthy Eating and Active Living (pdf)** -- the first of four policy briefs authored by Prevention Institute for the Convergence Partnership -- is part of a larger strategy to identify high impact approaches that will move us closer to our vision of healthy people in healthy places.

Tools

The <u>Transportation & Health Toolkit</u> is a collection of documents that illuminates how health and transportation intersect and demonstrates how effective transportation policies can improve the health of communities and their residents. These informative tools can help health advocates better understand transportation issues and their related health connections, and help inform transportation advocates on the importance of health in their work. Created by researchers and experts in the fields, this overview highlights the connections between transportation and health, and the benefits of healthy transportation options. Click on the Toolkits link, on the left, to read more.

Making the Case and Getting Underway: A Funder Toolkit to Support Healthy People in Healthy Places is designed to assist foundation program and executive staff who want to create exciting new partnerships and grantmaking efforts that result in improved health outcomes in communities. This tool allows foundation staff to make the case for the important focus on multi-field partnerships focused on environmental and policy change as a critical level for healthy individuals. This tool includes two ready-to-go powerpoint presentations: an informational resource or as the basis of a presentation describing the value of environmental change for various audiences; and a rationale for foundations to expand their existing approaches and generate new partnerships to achieve healthy people in healthy places.