



HEALTHY COMMUNITIES DATA AND INDICATORS PROJECT (HCI)

Background

Chronic illness and injury are the leading causes of death and disability in California, and chronic illnesses account for an ever-growing share of escalating health care costs. Major risk factors for obesity, chronic illness, and injury include poor nutrition, sedentary lifestyles, smoking, and alcohol use. Each of these risk behaviors is profoundly influenced by people's social, physical, and economic environments. Chronic illness and injury are also the key drivers of very significant and persistent inequities in health outcomes, including substantial differences in life expectancy and years of potential life lost based on income level and race/ethnicity.

The creation of healthy social, economic, and physical environments that promote healthy behaviors and healthy outcomes requires coordination and collaboration across multiple sectors, including transportation, housing, education, agriculture and others. Statistical metrics, or indicators, are needed to help local, regional, and state public health and partner agencies assess community environments and plan for healthy communities that optimize public health. Currently, there is neither a clearly identified set of indicators nor ready access to data that can be used to plan for healthy communities and evaluate the impact of policy and environmental changes on health.

Goals and Objectives

The goal of HCI is to enhance public health by providing data, a standardized set of statistical measures, and tools that a broad array of sectors can use for planning healthy communities and evaluating the impact of plans, projects, policy, and environmental changes on community health. With funding by the Strategic Growth Council (SGC), the HCI is a 2-year collaboration of the California Department of Public Health (CDPH) and the University of California, San Francisco (UCSF) to create and disseminate indicators linked to the Healthy Communities Framework (on next page). This framework was developed by the SGC Health in All Policies Task Force with extensive public discussion and input from community stakeholders and public health organizations. The framework identifies 20 key attributes of a healthy community through all stages of life, clustered in five broad categories: meets basic needs of all (housing, transportation, nutrition, health care, livable communities, physical activity), environmental quality and sustainability, adequate levels of economic and social development, health and social equity, and social relationships that are supportive and respectful. The main tasks of the project are:

1. Identify a standardized, core set of valid indicators that define a healthy community.
2. Identify methods to construct indicators at different geographic scales (e.g. census tract, zip code, city, county, etc.).
3. Disseminate technical documentation that allows local, county, regional, and state stakeholders to produce indicators.
4. Develop a multi-agency plan for centralized data collection, analysis, and reporting of indicators, and.
5. Create a demonstration website that stakeholders and CDPH can use to pilot test selected healthy community indicators.

The project will build on partnerships with California organizations whose work encompasses public health and health equity, and municipal, regional, and statewide planning. HCI will also coordinate with other SGC-funded data and indicator projects. For more information please send your comments or questions to (HCIOHE@cdph.ca.gov).



Healthy Communities Framework – What is a Healthy Community?

A Healthy Community provides for the following through all stages of life:

► Meets basic needs of all

1. Safe, sustainable, accessible and affordable transportation options.
2. Affordable, accessible and nutritious foods and safe drinkable water.
3. Affordable, high quality, socially integrated and location-efficient housing.
4. Affordable, accessible and high quality health care.
5. Complete and livable communities including quality schools, parks and recreational facilities, child care, libraries, financial services and other daily needs.
6. Access to affordable and safe opportunities for physical activity.
7. Able to adapt to changing environments, resilient, and prepared for emergencies.
8. Opportunities for engagement with arts, music and culture.

► Quality and sustainability of environment

1. Clean air, soil and water, and environments free of excessive noise.
2. Tobacco- and smoke-free.
3. Green and open spaces, including healthy tree canopy and agricultural lands.
4. Minimized toxics, greenhouse gas emissions and waste.
5. Affordable and sustainable energy use.
6. Aesthetically pleasing.

► Adequate levels of economic, social development

1. Living wage, safe and healthy job opportunities for all, and a thriving economy.
2. Support for healthy development of children and adolescents.
3. Opportunities for high quality and accessible education.

► Health and social equity

► Social relationships that are supportive and respectful

1. Robust social and civic engagement.
2. Socially cohesive and supportive relationships, families, homes and neighborhoods.
3. Safe communities, free of crime and violence.

Source: Rudolph L, Sisson A, Caplan J, et al. Health in All Policies Task Force. Report to the Strategic Growth Council. Sacramento, CA: Strategic Growth Council. December 3, 2010 ([/www.sgc.ca.gov/docs/workgroups/HiAP_Final_Report_12.3.10.pdf#page=22](http://www.sgc.ca.gov/docs/workgroups/HiAP_Final_Report_12.3.10.pdf#page=22)).