



community-based public health

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Cities as Partners in Community-Based Public Health

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Joan M. Twiss, M.A., Director of the Center for Civic Partnerships in Sacramento, California, was invited to write this policy brief because of her many years of experience in promoting city involvement in Community-Based Public Health (CBPH). She has also worked with several of the PPH partnerships and local health departments in building healthier communities and in improving population health.

Former Speaker of the U. S. House of Representatives Thomas P. “Tip” O’Neill said it best, “all politics is local.” PPH has incorporated that sentiment by establishing partnerships throughout California to foster CBPH at the local level. This second issue of *Community-Based Public Health: Policy and Practice* focuses on CBPH efforts accomplished in partnership with cities.

Why Cities?

As the level of government closest to the people, cities are positioned to be responsive to local needs and values. Unlike counties, which are political and administrative units of the state, cities are formed by the petition and majority vote of citizens who want to preserve their community’s character and to enhance the level and array of services available. Cities have the ability to rally broad constituencies, including the business sector and residents, based on civic pride and a sense of place. The nature of local control and the functions of cities make them a logical focus for community engagement and primary prevention by, for example, improving such determinants of health as living conditions, safety and economic opportunities.

Cities provide services in the general areas of public safety, public works (engineering, street maintenance and sanita-

tion) and recreation. Municipal land-use decisions have profound effects on the quality of our lives, such as exposure to industrial toxins, commute times, and opportunities to be physically active.⁽¹⁾ Using zoning powers, cities can work with residents to limit the hours for alcoholic beverage sales and to ensure environmentally safe living conditions, such as lead-free paint in homes. Municipalities can enter joint-use agreements with other agencies to provide space for after-school activities such as computer-based learning and recreational programs. Often one of the larger employers in town, city government can provide a model for the business community by offering such benefits as paid time off for employees to participate in youth mentoring activities or other voluntary community-building activities.

Public health advocacy efforts involving the public sector are often easier at the city level than at higher levels of government for many reasons, including the following:

- 1) The personal values of local officials are more likely to represent those of the community they serve.
- 2) Local policymakers can be more responsive to local interests. The size of their districts is smaller than those holding

This is the second in a series of policy briefs on the various components of Community-Based Public Health (CBPH) and associated issues. The series is being published by the Partnership for the Public’s Health (PPH), a collaboration of The California Endowment and the Public Health Institute.



FIGURE 1: Traditional vs. Healthy City Continuum

	TRADITIONAL		HEALTHY CITY
City Relationship to Neighborhood/Community/ Citizen	Consumer	↔	Client/Partner
City View of Role	Provide services Coordinate/Organize	↔	Stimulate/Link/Convene
Problem-Solving Approach	Identify needs	↔	Identify community resources or organizations already engaged in the issue
Approach to Community	Standardized, Formal One Size Fits All	↔	Informal, Diverse, Situational

Clark, D. Healthy Cities: A Model for Community Improvement. Public Management, November 1998, page 5.

higher office, providing more opportunities for face-to-face contact with constituents. They also have less expensive campaigns, which makes them less dependent on outside contributions and generally more accessible to local constituents.

- 3) Local enforcement often can be achieved through existing codes and licensing.⁽²⁾

Larry Cohen, M.S.W., and his colleagues at the Prevention Institute, cite additional reasons for pursuing local policy:

- 1) It can be tailored to meet the particular needs of individual communities;
- 2) Less bureaucracy means enactment can happen more quickly;
- 3) Local initiatives can be evaluated more easily;
- 4) Smaller-scale successes often provide the impetus for statewide and national change.⁽³⁾

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How City Government Works

Most California cities operate under what is known as the council-manager form of government. The elected city council hires a professional administrator to whom all city departments report.⁽⁴⁾ In addition to preparing the budget, this appointee wields considerable power, including advising the council on policy. Because this individual is likely to have the most authority on the daily operations of the city, his or her leadership style (control vs. facilitative) will have tremendous influence on city-community relations.

The city council establishes policies, enacts and implements ordinances, and oversees government operations. Generally, city council members are elected at-large (vs. by district), on a non-partisan basis. In contrast to county supervisors, city council members and mayors serve on a part-time basis in most cities. The position of mayor in all but the largest cities rotates among councilmembers and consists largely of ceremonial duties. The general plan is a major policy document that establishes how the city will use its land, provide for transportation and housing and ensure the safety of its residents over a multi-year period. How a city chooses to allocate its resources, both those generated locally and those which come from other levels of government such as the Community Development Block Grant, is one of its most important annual policy decisions.

Changing Views About Leadership

Doug Clark, a former California city manager, has developed a model for understanding how cities have traditionally viewed their role, their relationship to the community and how progressive leaders are shifting their thinking to deal with increasingly complex quality of life issues. Four examples from his schematic are provided in Figure 1.⁽⁵⁾

City Relationship to Neighborhood

The Community Learning Center (CLC) in **South San Francisco, California**, grew out of a true partnership between a city and community eager to meet the educational needs of its multi-cultural residents. In 1998, the city held a series of planning



meetings with residents, community-based organizations, neighborhood groups, school principals, and city employees interested in developing a needs assessment survey. Approximately 900 surveys were completed by a community-based organization's representatives, who approached community members in front of churches, stores, schools, and other public places. Next, the city hired staff to develop a program based on the surveys and recommendations from a committee of resident advisors. The CLC, which opened in a public library facility in January 1999, now offers a variety of educational programs for children and adults. The CLC's Participant Advisory Group, made up of people who use the CLC, continues to meet regularly to fine-tune existing programs and develop new programs. The CLC is now part of the South San Francisco partnership established in 2000 with support from PPH.

City View of Its Role

The **Vacaville (California)** Youth Roundtable was convened in 1991 by the city manager, police chief, community services director, school superintendents and representatives of county probation, the faith community and local businesses. The initial purpose of the group was to share information and resources. Over the years, the Roundtable has evolved to include more members and to serve as a "think tank" to develop programs. Collaborative working relationships among the city, education and health care sectors, busi-

nesses, non-profit organizations and volunteers have been instrumental in building successful programs in delinquency diversion, youth recreation and vocational education. The city provides \$20,000 annually, coordinates the Roundtable meetings and provides administrative support. Grants, donations and fundraisers provide additional resources. In 2000, the group issued a comprehensive, asset-oriented Youth Master Plan that has received the support of local governing bodies. The plan covers prenatal development through high school and includes eight major strategies and 30 sub-strategies.⁽⁶⁾

Problem-Solving Approach

When his city ranked fourth highest in the state for age-adjusted heart disease deaths, Ron Loveridge, Mayor of the **City of Riverside, California** was alarmed and highly motivated to do something. Loveridge convened a task force composed of residents and representatives from the county health department, community-based organizations, health care providers, universities, and the school district. In response to the startling statistics, the task force devised a five-year plan to promote and support physical activity, primarily walking. Events are focused in neighborhoods where community members determine the programs appropriate to their environment and circumstances. The Riverside Neighborhood Partnership (an alliance of neighborhood associations) has endorsed the project, and the county health department is providing data and



Building Relationships with City Partners

Policy will work best as part of a comprehensive, integrated strategy. Approaching city officials as partners, along with other community stakeholders, is important. Policy is seldom a starting point. More often, it evolves from a relationship built on trust and incremental successes. The following steps will assist with developing and implementing successful policies.

- 1) **Choose your target audience.** Find out who has an impact on decision-making and, in particular, determine who has responsibility for your issue. In addition to council and staff, numerous citizen boards and commissions make, or advise on, policy directives. Find out who has access to these individuals. Develop an appreciation for relationships (allies and adversaries), relevant history and the political currents.
- 2) **Conduct background research.** Understand how your issue fits within the big picture. Research the council's goals. Review public documents, newspapers, and meeting minutes. Check the city's website. Know where the money goes. Learn the jargon. For example, much of primary prevention

is aligned with community-oriented government/policing and quality-of-life issues.

- 3) **Arrange a meeting.** Schedule your first visit to introduce yourself and the coalition's work without asking for anything. Don't overlook mayors' and councilmembers' aides. Follow up with a thank-you letter and maintain contact through regular communications. Invite elected officials to speak at your events.
- 4) **Match your issue to your target.** Characterize your work broadly within the context of identified priority areas. Carefully choose who will deliver your message.
- 5) **Find the windows of opportunity.** A mayor may have been recently elected or the police chief might just have been appointed. Early in their tenure is the best time to reach them.
- 6) **Ask coalition members to assist with policy education.** They can do research (on the issue, individuals, etc.), create linkages and meet with policymakers, aides and others who make or shape policy.

program support. The city's Parks and Recreation Department and Geographical Information Systems (GIS) Manager also contribute to the program's implementation. The GIS Manager has developed walking routes and maps for the five priority neighborhoods. The maps will be posted on the City's website. Parks and Recreation Department staff recruit walkers and coordinate the equipment on Walk Days, and they also plan, measure and mark walk routes.

Approach to Community

In 1993, the **City of Savannah, Georgia** established a program to award mini-grants (of up to \$500) to neighborhood groups for locally determined community improvement projects.⁽⁷⁾ Designed by residents in some of the most impoverished areas of the city, grant proposals are reviewed and approved by neighborhood association members. Leadership development, neighborhood beautification and the birth of community development corporations are just a few of the many positive outcomes from the program. Funding comes from the federal Community Development Block Grant program and the city's general fund. This model respects the diversity of neighborhoods while encouraging responsibility and participation. The city's role is to provide financial support to residents for the development of initiatives they deem relevant to their assets and circumstances.

Conclusion

When approaching city officials, it is helpful to remember the four major functions of municipalities that relate to community-based public health. *They include: providing services and programs; convening groups in a civic space for dialogue; partnering or collaborating in either local or regional efforts; and enacting policy.* California's 476 cities are diverse in size, personality and operational styles. Invitations to participate in this work will have equally varied responses. Timing, message and awareness of current context are critical. Nonetheless, cities can be important partners in prevention.

4 For More Information

For the past 13 years, California Healthy Cities and Communities (CHCC) has assisted cities and communities with developing, implementing and evaluating inclusionary, community-driven programs, policies and plans which address environmental, social and economic determinants of health. One key program strategy is to expand the constituency for public health by enhancing the capacity of appointed and elected leaders to view health more broadly and to recognize the unique role they can play in community health improvement. A variety of publications describing local stories is available from CHCC.

Participation in the CHCC Network is open to local governments, non-profit institutions and community-based organizations. An annual conference, quarterly newsletter, listserv and website (www.civicpartnerships.org) link like-minded communities around the state and beyond. CHCC is a program of the Center for Civic Partnerships, a part of the Public Health Institute.

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Websites

Center for Civic Partnerships: www.civicpartnerships.org
Center for Health Improvement: www.healthpolicycoach.org
PolicyLink: www.policylink.org
City County Schools Partnership: www.ccspartnership.org
National Neighborhood Coalition: www.neighborhoodcoalition.org
Center for Budget and Policy Priorities: www.cbpp.org
City of South San Francisco Community Learning Center: www.ssf.net/clc

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About this Series

The policy brief series is part of PPH's commitment to its grantee partners; The California Endowment (that supports PPH); and the larger public health world. Each brief will define terms, identify challenges, share success stories and best practices, indicate issues for policy and systems change, and point towards key sources of further information. We encourage feedback and suggestions from our readers (please email Adele Amodeo at aamodeo@partnershipPH.org).

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