

Recommendation to Include Access to Healthy Food Section in the General Plan

Given the nationwide surge in obesity rates as well as numerous studies revealing the link between the availability of healthy foods, obesity, and chronic illnesses, cities must think proactively about creating neighborhoods that provide adequate access to nutritious food options. As San Jose crafts its land use vision for the next 30 years, the city should include strategies to increase access to healthy food as part of a broader vision to promote community health. The end of this document includes some recommended goals, policies and implementation actions to help achieve this goal.

Link Between Community Health and Access to Healthy Food

An increasing body of evidence is demonstrating the profound impact that land use patterns have on community health, including not just the accessibility of health services and opportunities for physical activity, but also the availability of affordable, nutritious food options. Studies show that individuals who live near supermarkets are significantly more likely to eat recommended amounts of fresh produce¹ and are less likely to be obese² or have a diabetes diagnoses.³ And, not only does the *proximity* of healthy food vendors to a given neighborhood come with health implications, so too does the relative *concentration* of healthy food stores compared to other options. Areas with a higher proportion of fast food restaurants and convenience stores compared to grocery stores and produce markets have been shown to have substantially higher rates of obesity and diabetes, even after controlling for other variables including income, physical activity, age, race/ethnicity, and gender.⁴

Growing Obesity and Chronic Illness

When put within the larger context of health trends, the link between access to nutritious food, obesity and chronic illnesses, reveals a need for action. In less than two decades, obesity in California has more than doubled, climbing from under 10% in 1990 to 23% in 2008.⁵ Locally, San Jose has seen its obesity rate grow to 22%, substantially higher than the 17% rate countywide. All told, 58% of San Jose residents are now above recommended body weight.⁶ These statistics come with major implications for public health, as being overweight or obese substantially increases the risk of a variety of chronic diseases including high blood pressure, diabetes, heart disease and many cancers.⁷

Indeed, as obesity rates have increased, so too has the local prevalence of key obesity-related chronic diseases. From 2000 to 2006, the share of Santa Clara County residents diagnosed with diabetes grew from 5.1% to 6.8%.⁸ In San Jose, from 1990-2004 (the most recent data available), the diabetes mortality rate increased 58%, among the highest increases in large U.S. cities.⁹ Meanwhile, the number of adults in the county with high blood pressure has climbed from 20 percent to a full 25 percent over the past 6 years, while heart disease rates have also been rising.¹⁰ Overall, obesity-related chronic illnesses can be directly tied to 3 of the 5 top causes of hospitalization in the county¹¹ and are linked to the top 3 causes of death.¹²

Even more alarming, weight problems among children are also escalating fast. Currently one-quarter of Santa Clara County's children are overweight. Estimates are that 80% of these children will become obese as adults.¹³ If we continue on our current path, one-in-three children born in 2000 will become diabetic during their lifetime.¹⁴

Best Practices: General Plans Promoting Access to Healthy Foods

In response to these challenges, several California cities have begun including goals, policies, and actions in their General Plans to improve availability of healthy food options. Watsonville's General plan, adopted in 2006, has policies to ensure adequate transit access to grocery stores; to promote access to food assistance programs like Food Stamps and the WIC program; and to encourage neighborhood convenience stores to carry fruits and vegetables by conditioning them at the time of development review.¹⁵

The City of Madera's draft General Plan includes policies and action items to encourage the location of grocery stores, farmers' markets and community gardens in parts of the city with limited access to fresh produce; and to promote grocery stores in Village Centers.¹⁶ Chula Vista has included language promoting access to healthy foods through farmers' markets in its General Plan.¹⁷

The City of Chino is in the process of drafting its General Plan and is considering several policies and actions to increase options for fresh foods including: identifying the parts of the city with limited access to healthy foods, designing economic development strategies to attract healthy food retailers to these neighborhoods, and exploring the creation of a grant program to encourage neighborhood markets to stock fresh produce.¹⁸

The most comprehensive effort in California to address community health in a General Plan can be found in Richmond. There, the city has drafted a 100 page element covering a wide-range of issues impacting community health. Under the goal of expanding healthy food choices are policies to encourage a wide range of healthy food providers (including full-service grocery stores, farm stands, community gardens, ethnic food markets, edible school yards, and farmers' markets); to support urban agriculture on publicly owned vacant land; to urge local farmers to provide fresh food locally; and to encourage restaurants to serve healthy food options and provide nutritional information to customers. The plan also contains implementation actions to develop an incentive program for liquor stores and ethnic markets in low-income neighborhoods to carry fresh produce and to conduct a detailed assessment of the feasibility of implementing a list of 13 urban agriculture expansion strategies.¹⁹

Current Conditions

In San Jose there is a shortage of available data identifying the neighborhoods in the city with limited access to healthy food, and the extent of those limitations. However, survey

data indicate that many local residents are not eating enough healthy foods. Just 28% of adults in San Jose consume the recommended number of servings of fruits and vegetables per day.²⁰ Meanwhile, six out of ten middle school students surveyed countywide report having consumed fried potatoes and soda in the last 24 hours.²¹ Citywide, fast food outlets and convenience stores outnumber grocery stores and fresh produce markets by a ratio of 4.6 to 1; above the 4.3 to 1 ratio for Santa Clara County, and the 4.2 to 1 ratio for the state as a whole.²² There 13 certified farmers' markets in San Jose, most of which sell produce once a week. Seven of these markets are open year-round; while the rest are seasonal.²³ Currently, there are 19 community gardens located throughout the city covering roughly 30 total acres of land.²⁴

Suggested Goal, Policies, and Implementation Actions

Suggested for inclusion under Quality Neighborhoods:

Access to Healthy Foods

Goal HN-3: Ensure that all residents have sufficient access to healthy food and nutrition choices.

Policies:

- Policy HN-3.1: Encourage the location of full service grocery stores within or adjacent to neighborhoods with limited access to healthy foods. At least TBD% of residents in each urban planning area should live within a 1/2 mile walking distance of a full service grocery store.
- Policy HN-3.2: Work with the Valley Transportation Authority to provide public transit access to full-service grocery stores, farmers' markets and other key healthy food retailers.
- Policy HN-3.3: Encourage all healthy food retailers to accept public food assistance programs such as the Supplemental Nutrition Assistance Program (a.k.a. Food Stamps) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- Policy HN-3.4: Limit the number of fast food restaurants located near schools.
- Policy HN-3.5: Encourage the location of healthy food retail in neighborhoods with high concentrations of fast food outlets compared to full-service grocery stores and fresh produce markets.
- Policy HN-3.6: Expand the production and local consumption of locally grown produce, including promoting the expansion of farmers' markets, new community garden facilities, and other urban agriculture opportunities.

Implementation Actions:

Action HN-3.7: Measure the accessibility of healthy foods as well as the relative concentration of fast food restaurants near schools. Use this data to identify any excessive concentration of fast food retailers in the vicinity of schools and the need for alternative healthy food options.

Action HN-3.8: Measure the accessibility of healthy foods by neighborhood including both the percentage of residents living near full-service grocery stores or fresh produce markets and the relative concentration of fast food restaurants and convenience stores to healthy food retailers. Use this data to identify nutrition deficient neighborhoods in the city.

Action HN-3.9: Develop an economic development strategy to attract full-service grocery stores, fresh produce markets, and other healthy food retailers to low-income and nutrition deficient neighborhoods in the city. Develop an economic development strategy to attract healthy food options near schools.

Action HN-3.10: Explore the potential to develop an incentive program to encourage existing liquor stores, neighborhood markets or convenience stores in nutrition deficient neighborhoods to sell fresh fruits and vegetables. Incentives could include grants to purchase refrigeration units or other equipment necessary to sell fresh produce.

Action HN-3.11: Identify potential sites for full-service grocery stores in low-income and nutrition deficient neighborhoods.

Action HN-3.12: Identify potential new locations for farmers' markets in low-income and nutrition deficient neighborhoods, including joint use opportunities on publicly-owned land.

Action HN-3.13: Maintain an inventory of available vacant or underutilized land owned by the city or other public entities that could be used for food production.

¹ Morland, K et al. The Contextual Effect of the Local Food Environment on Residents' Diets: The Atherosclerosis Risk in Communities Study. *American Journal of Public Health*. Nov. 2002.

² Morland, K et al. Supermarkets, Other Food Stores, and Obesity. *American Journal of Preventive Medicine*. April 2006.

³ Auchincloss, A et al. Neighborhood Resources for Physical Activity and Healthy Foods and Their Association with Insulin Resistance. *Epidemiology*. January 2008.

⁴ Babey, Susan, Diamant, Allison, Hastert A. Theresa and Goldstein, Harold "Designed for Disease: The Link Between Local Food Environments and Obesity and Diabetes," UCLA Center for Health Policy Research, 2008.

⁵ United Health Foundation. National Health Rankings, 2008. <http://www.americashealthrankings.org/2008/pdfs/ca.pdf>

⁶ Santa Clara County Public Health Department, Behavioral Risk Factor Survey and Martin, Lori. Santa Clara County Public Health Department: Nutrition and Wellness Unit. Presentation to Envision 2040 Task Force on March 24, 2008.

⁷ Santa Clara County Public Health Department, Behavioral Risk Factor Survey.

⁸ Santa Clara County Behavioral Risk Factor Survey. Note: The actual share of diabetic residents is likely closer to 10%, as estimates suggest that just 70 percent of those with diabetes are clinically diagnosed.

⁹ Big Cities Health Inventory 2007. Note: San Jose's 58% increase in its diabetes mortality rate was the 16th largest increase among the 54 large cities under analysis.

-
- ¹⁰ California Health Interview Survey, UCLA Center for Health Policy Research.
- ¹¹ Santa Clara County Public Health Department, Patient Discharge Database 2007
- ¹² State of California, Department of Public Health, Death Records.
- ¹³ 2007 Quality HEDIS (Healthcare Effectiveness Data and Information Set) Studies & Styne, Dennis. "Childhood and Adolescent Obesity: Prevalence and Significance." *Pediatric Clinics of North America*, Vol 48, Number 4, August 2001
- ¹⁴ Los Angeles Times. "One in Three Born in 2000 Are Likely to Become Diabetic, CDC Estimates." June 15, 2003.
- ¹⁵ City of Watsonville, California. General Plan: Watsonville Vista 2030. Chapters 3, 6, and 10. June 2006.
- ¹⁶ City of Madera, California. Draft General Plan Update: Chapter 6: Health and Safety Element. (draft as of November 13, 2008).
- ¹⁷ City of Chula Vista, California. Chula Vista: Vision 2020. Chapter 5: Land Use and Transportation Element. Dec. 13, 2005.
- ¹⁸ Conversation with Nicholas Liguori, Principal Planner, City of Chino, California. Note: A draft of the General Plan is scheduled to be publicly available in January 2010.
- ¹⁹ City of Richmond, California. Draft General Plan 2009. Element 11: Community Health and Wellness.
- ²⁰ Santa Clara County Public Health Department, Behavioral Risk Factor Survey and Martin, Lori. Santa Clara County Public Health Department: Nutrition and Wellness Unit. Presentation to Envision 2040 Task Force on March 24, 2008.
- ²¹ Santa Clara County Behavioral Risk Factor Survey 2005-06.
- ²² California Center for Public Health Advocacy.
- ²³ California Federation of Certified Farmers' Markets.
- ²⁴ San Jose Department of Parks, Recreation, and Neighborhood Services. San Jose Community Gardens website. <http://www.sjcommunitygardens.org/>