

FRESNO



Fresno General Plan Update Healthy Communities

**PRELIMINARY
WORKSHOP
DISCUSSION
DRAFT**

January 2013

Development and Resource
Management Department

City of
FRESNO 

Healthy Communities

Preliminary Workshop Discussion Draft of the City of Fresno General Plan Update

The Healthy Communities chapter is one of the many Elements noted below that when combined will ultimately comprise the Draft Fresno General Plan Update, anticipated to be released as a comprehensive document for public review and formal comments in March - April 2013.

- Urban Form, Land Use, and Design Element
- Mobility & Transportation Element
- Parks, Open Space and Schools Element
- Healthy Communities Element
- Historic and Cultural Resources Element
- Resource Conservation and Resilience Element
- Public Utilities and Services Element
- Noise and Safety Element
- Economic Development and Fiscal Sustainability Element
- Implementation Element
- Housing Element¹

This version of the Healthy Communities Element is a **Preliminary Workshop Discussion Draft of the City of Fresno General Plan Update**, intended for introduction to the public, with a request for public review and comments to be received via emails, letters, and oral presentations as part of a series of workshops with the Fresno Planning Commission and other community engagement meetings scheduled through February - March of 2013.

The Healthy Communities Element of the General Plan presents Fresno's overall approach to building a healthy community. Community health is a broad and comprehensive issue that involves direct and indirect factors that need to be aligned toward common goals, and all the elements of a general plan will support the City's efforts to improve community health. For instance, the concept of "healthy community" includes household income, addressed in the Economic Development and Fiscal Sustainability Element, and environmental health issues, such as air quality, addressed in the Resource Conservation and Resilience Element. This element focuses specifically on subjects not fully discussed in other elements, in particular the relationships between the built,

¹ The City has already updated and approved the Housing Element as required by State law. Although not currently scheduled for preliminary workshop review, the Housing Element will be addressed in the Draft Fresno General Plan Update and the current version is available for public review. Technical amendments to the Housing Element needed for General Plan consistency will be addressed in the Draft Fresno General Plan Update as appropriate. The Housing Element's goals, objectives, policies and programs will be included in the General Plan, with any proposed technical amendments clearly indicated

natural, and social environments and community health and wellness outcomes, such as death, chronic disease, and the effects of drug abuse and crime.

The World Health Organization defines health as the following:

“A state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity. Within the context of health promotion, health has been considered less as an abstract state and more as a means to an end which can be expressed in functional terms as a resource which permits people to lead an individually, socially and economically productive life. Health is a resource for everyday life, not the object of living. It is a positive concept emphasizing social and personal resources as well as physical capabilities.”²

RELATIONSHIP TO GENERAL PLAN GOALS

This Element provides objectives and policies that support a wide range of General Plan goals, in particular the following³:

9. Promote a city of healthy communities and improve quality of life in existing neighborhoods.

Emphasize supporting existing neighborhoods in Fresno with safe, well maintained, and accessible streets, public utilities, education and job training, proximity to jobs, retail services, and health care, affordable housing, youth development opportunities, open space and parks, transportation options, and opportunities for home grown businesses.

14. Provide a network of well-maintained parks, open spaces, athletic facilities, and walking and biking trails connecting the city’s districts and neighborhoods to attract and retain a broad range of individuals, benefit the health of residents, and provide the level of public amenities required to encourage and support development of higher density urban living and transit use.

16. Protect and improve public health and safety.

PLANNING FOR COMMUNITY HEALTH

This element addresses local opportunities for improvement of key factors affecting the health of a community. The specific components include:

- Physical health, or the medical well-being of individuals as seen in rates of disease and death, with special consideration given to disparities in health across populations.
- Environmental conditions, notably air quality, which can enhance or impede health.

² Ottawa Charter for Health Promotion. WHO, Geneva, 1986

³ The commentary in italics following certain goals is not part of the goal itself, but is instead advisory and informational language intended to further discuss and clarify the goal to help guide the objectives of the General Plan.

- Household income, which can affect the financial ability to afford medical care and healthy food, as well as mental and social well-being, and can directly relate to other factors such as safety and access to parks.
- Safety, particularly exposure to violent crime, has direct and indirect impacts on individuals and governments alike, reducing productiveness, opportunities, and quality of life. Crime and lack of income/educational opportunities contribute directly to poor physical and mental health.

There are also indirect contributing factors to health, many of which the City can influence. These include educational attainment, access to parks and recreation, the availability of healthy food, and transportation options.

The health of the Fresno community can be directly measured in the physical health of its residents, as well as quantitative factors that contribute directly to health: environmental conditions, income, and safety. Several social and physical factors can also encourage better community health, or work as obstacles. These factors include educational attainment; access to social services, parks, recreation, and healthy food; affordable housing and transportation options; and youth engagement. Understanding them will help with an evaluation of Fresno's current conditions in regards to public health, with health broadly defined as physical, emotional, and social well-being. Some of these issues, such as the location and programming of public parks, are within the City's ability to plan and improve. Other issues, however, may require broad-based or indirect efforts in consultation with other public agencies and the private sector. All the issues discussed in the Healthy Communities chapter are important to consider in the context of the City's General Plan being comprehensive and reflecting the interdependence of health outcomes with land use, transportation, and other public policies and practices.

PHYSICAL HEALTH

Tracking the age and cause of death of local residents against state and national statistics is one simple way of measuring the physical health of the Fresno community. The prevalence of chronic illnesses and health disparities across demographic lines are other important components of evaluating public health.

AGE AND CAUSE OF DEATH

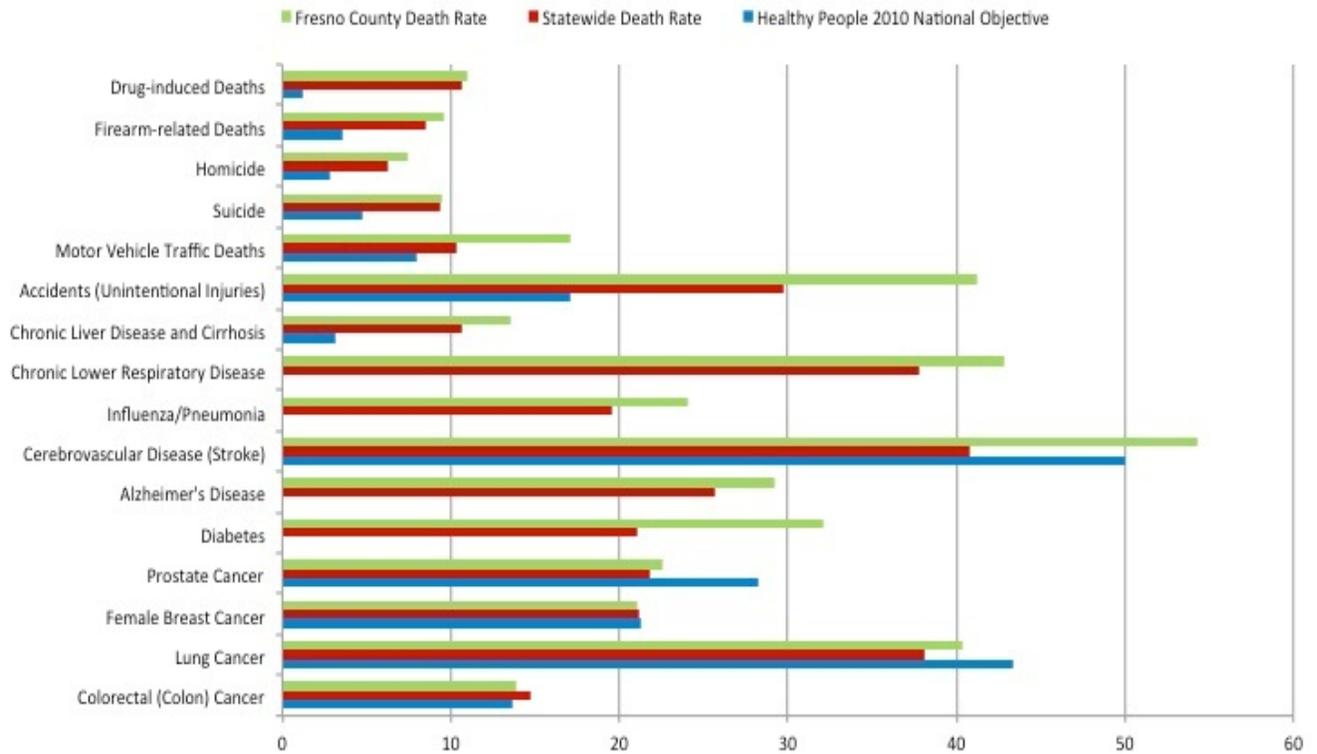
Many health statistics are collected at the county level, so the state of the city's residents must be surmised from that level of data. With 500,000 out of the county's 940,000 residents, the City of Fresno makes up 53 percent of the population discussed in this section.

The median age of death in death in Fresno County, 77.7 years old, is close to that of California (77.9) and the national age (78.2). However, another measure of age of death is years of potential life lost (YPLL) per 1,000 people. This metric computes the estimated number of years of life lost due to premature deaths against a person's theoretical life expectancy. The Fresno County Department of Public Health performed an assessment in 2009 in partnership with the Central Valley Health Partnership Institute and, in an unpublished

report, found the rate of YPLL in the county to be 28.7 years, compared to a statewide rate of 23.1 years. In other words, on average living in Fresno County results in 5.6 more years of lost potential lifespan, per 1,000 residents, than living elsewhere in the state, or 24 percent more lost years. Another study, by the Robert Johnson Wood Foundation using publicly available data for 2005-07, found a similar disparity between Fresno County and the statewide YPLL.⁴

Chart HC-1 below represents the leading causes of death in the county (excluding coronary heart disease and all cancers, which are at a much larger scale), with bars showing by color the rate and causes of death per 100,000 people for Fresno County in comparison to all of California and the entire country, for the years 2006 through 2008.

Chart HC-1: Leading Causes of Death in Fresno County (per 100,000 residents)⁵



Key conclusions are:

- The County's rate of death from cancer is comparable to the state and lower than the national average.

⁴ Robert Wood Johnson Foundation (2011). 2011 County Health Rankings, Fresno, CA.

⁵ Reproduced from Fresno Downtown Neighborhoods Health Impact Assessment, 2011, from California Department of Public Health: County Health Status Profiles, 2006-2008.

- Diabetes is a major cause of death for county residents, both absolutely (fourth highest cause of death) and relatively, killing at a rate 52 percent higher than the statewide average and 43 percent higher than the national average. The county's death rate is one of the worst in California, ranking 56th out of 58 counties. Since diabetes is often created by a lack of exercise and poor diet, these may be major public health issues in Fresno.
- County residents die significantly more (a rate greater than 15 percent higher per 100,000 residents) from Alzheimer's disease, stroke, influenza/pneumonia, chronic liver disease and cirrhosis, unintentional accidents, motor vehicle accidents, and homicide than the statewide and national average.
- Overall, the County ranks in the bottom half (29 through 58) for most causes of death.

CHRONIC DISEASE-RELATED RISK FACTORS

Fresno County ranks quite low in terms of overall health—51st out of 58 California counties for overall health outcomes.⁶ The high rates of death in Fresno County from diabetes, influenza/pneumonia, and chronic liver disease and cirrhosis suggest that notable proportions of local residents may be in poor chronically poor health, as those causes of death tend to be the result of longer term unhealthy living.

Obesity

The US Department of Health and Human Services, through its Healthy People initiative, set national objectives for 2010 of the proportion of the population that is overweight or obese. The target rate for adults was for up to 15 percent of a population to be overweight or obese. In Fresno County in 2005, the rate of overweight and obesity was 57 percent for adults aged 18 to 64 years old, and 65 percent for adults aged 65 and older. Between 2004 and 2009, students in grades 5, 7, and 9, had rates of overweight that rose from 30.6 percent, 32 percent and 27.4 percent to 36 percent, 38.5 percent, and 33.7 percent, respectively.⁷

There is a growing body of evidence relating obesity to the consumption of sugar-sweetened beverages. Over 30 years, the average daily caloric intake has increased by nearly 300 calories. In fact, in Fresno County, 53 percent of 2- to 11-year-olds and 69 percent of 12- to 17-year-olds consume at least one soda a day compared to 24.3 percent children nationwide.⁸

Health Disparities:

Health disparities between different racial and ethnic groups can be striking and create radically different qualities of life. Latinos are a population that, as a whole, often has poor health indicators in relation to other ethnicities. Nearly 50 percent of Fresno's population is Latino/of Hispanic origin.

Latinos experience disproportionately high prevalence of and risk factors for asthma, obesity, HIV/AIDS, teenage pregnancy, suicide, and mental health disorders.

Factors contributing to poorer health outcomes among the Hispanic population include language and cultural barriers, limited access to preventative care, and lack of insurance. In 2008, over 30 percent of Latinos nationwide lacked health insurance.

Source: U.S. Centers for Disease Control and Prevention, Office of Minority Health and Health Disparities, 2012.

⁶ Robert Wood Johnson Foundation (2011). 2011 County Health Rankings, Fresno, CA.

⁷ California Department of Education. (2009-20010; 2004-2005) *California Physical Fitness Report Summary of Results*.

⁸ 2005 California Health Interview Survey

Smoking

In Fresno County, 14.4 percent of adults report being a smoker, higher than the Healthy People 2020 (HP2020) goal of 12 percent.⁹ Smoking prevalence among county youth ages 12 to 17 is 7.2 percent. When looking at the availability of tobacco products, students, in grades 7, 9, and 11, 17 percent, 35 percent, and 49 percent respectively feel that it is easy to obtain cigarettes.¹⁰ Undercover tobacco youth purchase surveys found that 33 percent tobacco retailers in the city attempted to illegally sell cigarettes to minors.^{11, 12} This rate of illegal tobacco sales to minors is higher than the HP2020 target of less than 5 percent. Also, no cities in Fresno County meet the HP2020 target of having adopted local ordinances that prohibit smoking in multi-unit housing.

LOCAL HEALTH DISPARITIES

Also critical to the justification of planning for healthy communities is an understanding of the impact of health disparities. Health disparities are differences in health outcomes (injury, illness, and death) between different groups of people. There is broad agreement in the literature that people who live in more socially and economically disadvantaged areas are in worse health than those living in more prosperous areas.¹³

A 2011 Community Needs Assessment of Fresno, Madera, Tulare, and Kings counties, undertaken by the Hospital Council of Northern and Central California, found several health disparities by race and ethnic group. Latinos make up almost 47 percent of the city population. Compared to whites, Latinos experience higher rates of diabetes, hospitalizations, and mortality, and higher rates of death from motor vehicle accidents. African-Americans, who make up eight percent of the city population, experience higher hospital use and/or death rates for asthma, cancer, cardiovascular issues, diabetes, homicides, hypertension, and motor vehicle accidents than whites.¹⁴

In Fresno County, rates of obesity vary greatly by race, with 38 percent of Latinos compared to 23 percent of Whites, 22 percent of African-Americans, and just 8 percent of Asians. Only 6 percent of African-Americans in the county undertake vigorous physical exercise at least three times per week, compared to 21 percent of Whites, 24 percent of Asians, and 19 percent of Latinos.¹⁵

9 California Health Interview Survey. (2009). *Current Smoking Status-Adults and Teens*.

10 California Healthy Kids Survey, 2007-09, County Results: Main Report San Francisco: WestEd Health and Human Development Program for the California Department of Education.

11 Krenz, V.D. 2010. Brief Evaluation Report: Tobacco Retailer Licensing Policy in Fresno County. American Lung Association.

12 Krenz, V.D. & Allen, 2007. Fresno County Tobacco Prevention Program Final Evaluation Report. California: Fresno County Tobacco Prevention Program.

13 PolicyLink, "Reducing Health Disparities through a Focus on Communities," (2002).

14 Hospital Council of Northern and Central California, *Community Needs Assessment*, 2011.

15 California Health Interview Survey. CHIS 2007 Adult, Teen, Child Public Use Files. <http://www.chis.ucla.edu/>. Updated January 2007. As cited in Fresno Downtown Neighborhoods Health Impact Assessment.

Fresno County has a higher percentage of disabled residents (21.3 percent) than in California as a whole (19.2 percent).¹⁶ This population inherently has greater physical health needs than the rest of the population in the county.

ACCESS TO MEDICAL AND HEALTH-RELATED SERVICES

The medical dimension of health encompasses a range of services including primary care, specialty care, home health care, emergency services, mental health services, long-term care, dental care, and alternative care. Access to health care services is an important determinant of community health, since medical monitoring, advice, and care is often essential to preventing disease and improving poor health. In this context, access refers to physical proximity, as well as socioeconomic access.

Physical access to medical services is intertwined with transportation planning because community members rely on the network of roadways, public transportation services, and walking and biking facilities to get to and from health-related facilities. Looking in **Figure HC-1** at the locations of hospitals, medical clinics, and doctors' and dentists' offices in Fresno, it is quickly apparent that there are underserved areas. In fact, there are no medical facilities west of Highway 99, and only a small number of health services in the southeastern section of the city. Northern and central Fresno has the bulk of the city's medical facilities; these are easily accessible from Highway 41, but also are located far from poorest populations south of Highway 180.

For those families and individuals with the least resources or with physical disabilities that restrict function, public transportation systems are particularly important. To the extent that the General Plan can improve the frequency and reliability of public transportation services to medical and health-related facilities within the city, this would support the wider goal of increasing access. The City does have good transit options for reaching medical care, with FAX service provided to all the hospitals in Fresno and to Valley Children's Hospital in Madera; a paratransit service, Handy Ride, also services the hospitals and other medical facilities in Fresno.

Another closely related issue is that of language barriers and overall health literacy. The current operational definition of health literacy used in Healthy People 2010 is: "the degree[s] to which individuals have the capacity to obtain, process and understand basic health information and services for appropriate health decisions." According to the U.S. Department of Health and Human Services, more than 90 million Americans struggle to understand basic health information. In one study in a public hospital, one-third of English-speaking patients could not read basic health materials, more than a quarter could not read appointment slips, and 42 percent did not understand labels on prescription bottles. The 2000 Census counted 20 million people who speak English poorly and 10 million who speak no English at all. In a 2002 report, the



Hospitals such as Kaiser Permanente are mostly located in the northern parts of Fresno.

¹⁶ Fresno County, Council of Fresno County Governments, "Coordinated Human Services Transportation Plan", 2008.

White House Office of Management and Budget estimated the number of patient encounters across language barriers each year at 66 million.¹⁷

A related issue is that Fresno County, along with the entire San Joaquin Valley, experiences a relative lack of medical physicians. The county had 2.0 physicians and surgeons per 1,000 residents in 2005, compared to a rate of 2.6 across California, or 23 percent fewer than the statewide average.¹⁸

OPPORTUNITIES FOR IMPROVEMENT

Many of the physical health issues in this section are being addressed by the County Public Health Department and local health care providers. However, the General Plan puts in place new policies and programs to help provide better access to physical exercise and fresh food, and to invest in efforts to lower the crime rate, in order to reduce the prevalence and impact of preventable disease. This section supports initiatives of The California Endowment in partnering with the communities of central, southeast, and southwest Fresno as part of its Building Healthy Communities campaign.

ENVIRONMENTAL CONDITIONS

Fresno and the San Joaquin Valley as a whole have poor air quality when measured against federal and State guidelines. The area is in nonattainment (fails to meet standards) for federal standards for PM 2.5 (particulate matter less than 2.5 micrometers in diameter) and State standards for 8-hour ozone, PM 10 (less than 10 micrometers in diameter), and PM 2.5. Fresno also is in extreme nonattainment for federal 8-hour ozone standards and severe nonattainment for State 1-hour ozone standards. Ozone is a highly reactive form of oxygen that attacks lung tissue and is particularly damaging to young children and older adults. Reducing the very high levels of ozone and significant concentrations of particulate matter from Fresno's air would be a major step to improving the health of the community.

Local actions and opportunities for improvement in air quality are addressed in the Resource Conservation and Resilience Element.

INCOME AND POVERTY

The San Joaquin Valley is one of the least affluent areas of California. Per-capita income is well below the national average, and poverty, in both urban and rural areas, is a significant problem. Valley residents have among the lowest per capita personal incomes, higher rates of unemployment, and more residents living below the Federal Poverty Level than the average for California as a whole.

¹⁷ U.S. National Library of Medicine, National Institutes of Health, Understanding Health Literacy and its Barriers (CBM 2004-1)

¹⁸ Bengiamin, Marlene, and John Amson Capitman and Xi Change. *Healthy People 2010: A 2007 Profile of Health Status in the San Joaquin Valley*, Central Valley Health Policy Institute, 2008.

According to the American Community Survey, 26 percent of people in Fresno were living in poverty in 2008, significantly higher than the national average of 13 percent. The highest poverty rate (39 percent) was among families with a female head of household and no male present. Thirty-seven percent of related children under 18 were below the poverty level in 2008.

The 2006 Brookings Institution Study lists Fresno as the largest city in the US with the most concentrated poverty, meaning the degree to which it's poor are clustered in high-poverty neighborhoods. **Figure HC-2** shows the distribution of people living in poverty in Fresno in 2005. High poverty neighborhoods, generally defined as areas where more than 40 percent of people live below the poverty line, are in the central and southwestern part of the city including the Edison, Roosevelt and Lowell communities. Some areas within these communities had between 60 and 70 percent of people living below the poverty line in 2000. For example, the Lowell community, located in the Downtown, has a population of nearly 14,000 with approximately 70 percent of individuals living below the poverty line of \$15,219 (the federal poverty threshold for a three-person family in 2004) for a family of three in 2000. Neighborhood poverty increased dramatically on the south and west sides of Fresno between 1980 and 2000, and this disparity has not changed in the past decade. Many factors have contributed to this increase in poverty. Immigrants, for example, are more likely to be poorer than native-born residents. Growth patterns have also exacerbated the concentration of poverty. Housing in the northern part of the city caters to upper-income families, while affordable housing investment has occurred in more distressed neighborhoods.

OPPORTUNITIES FOR IMPROVEMENT

Creating more and better paying jobs in Fresno would help address household poverty; these policy opportunities are addressed in the Economic Development and Fiscal Sustainability Element. Improving the rate of education attainment, a major factor in improving income, is addressed later in this element.

The concentrations of poverty in the central, western, and southern portions of Fresno suggest several opportunities for the City, such as focusing social services in these areas, targeting the development of jobs that pay a living wage in and near these neighborhoods, and dispersing low-income households to more mixed income neighborhoods. It is anticipated a subsequent community plan, such as the proposed Downtown Neighborhoods Community Plan, may further refine strategies to improve household income in these areas.

CRIME AND SAFETY

The cause-and-effect relationships between community design, crime, and public health are difficult to understand, but some general relationships have been found. Notably, both the reality and the perception of safety are indicators of a neighborhood's overall economic and social health. Safety is necessary in neighborhoods in order to foster common values and to improve quality of life. In contrast, crime in neighborhoods creates fear and distrust among residents. Finally, while chronic disease is a major health challenge, many chronic disease

prevention strategies—such as urban design that encourages walking and biking, provision of parks and recreation areas, and attracting grocery stores to neighborhoods—are less effective when fear and violence pervade the environment.¹⁹ Findings about this relationship include:

- Violence and fear of violence cause people to be less physically active and spend less time outdoors, and also alter people’s purchasing patterns, limiting access to healthy food;
- Experiencing and witnessing violence decrease motivation and capability of eating healthfully and being active;
- Violence reduces social interactions that would otherwise contribute to community cohesion; and
- Violence acts as a barrier to investment in community resources and opportunities, including those that support healthy eating and active living.

Fresno has experienced a 32 percent decrease in violent crime between 2001 and 2009, and property crimes, such as burglary, larceny, auto theft, and arson, decreased by nearly 32 percent over the same time frame. However, the city’s crime rate is still much higher than in the surrounding county.

Calls for police service are largely concentrated in the central, southwest, and southeast sections of the city. Those calls that occur in north Fresno are generally along corridors surrounding Highways 99 and 41 and major arterials such as Blackstone Avenue and Herndon Avenue. In 2009, land was purchased for two new district stations to be located at Clinton and Weber (to serve the Central Police District) and Belmont and DeWitt (South East Police District).

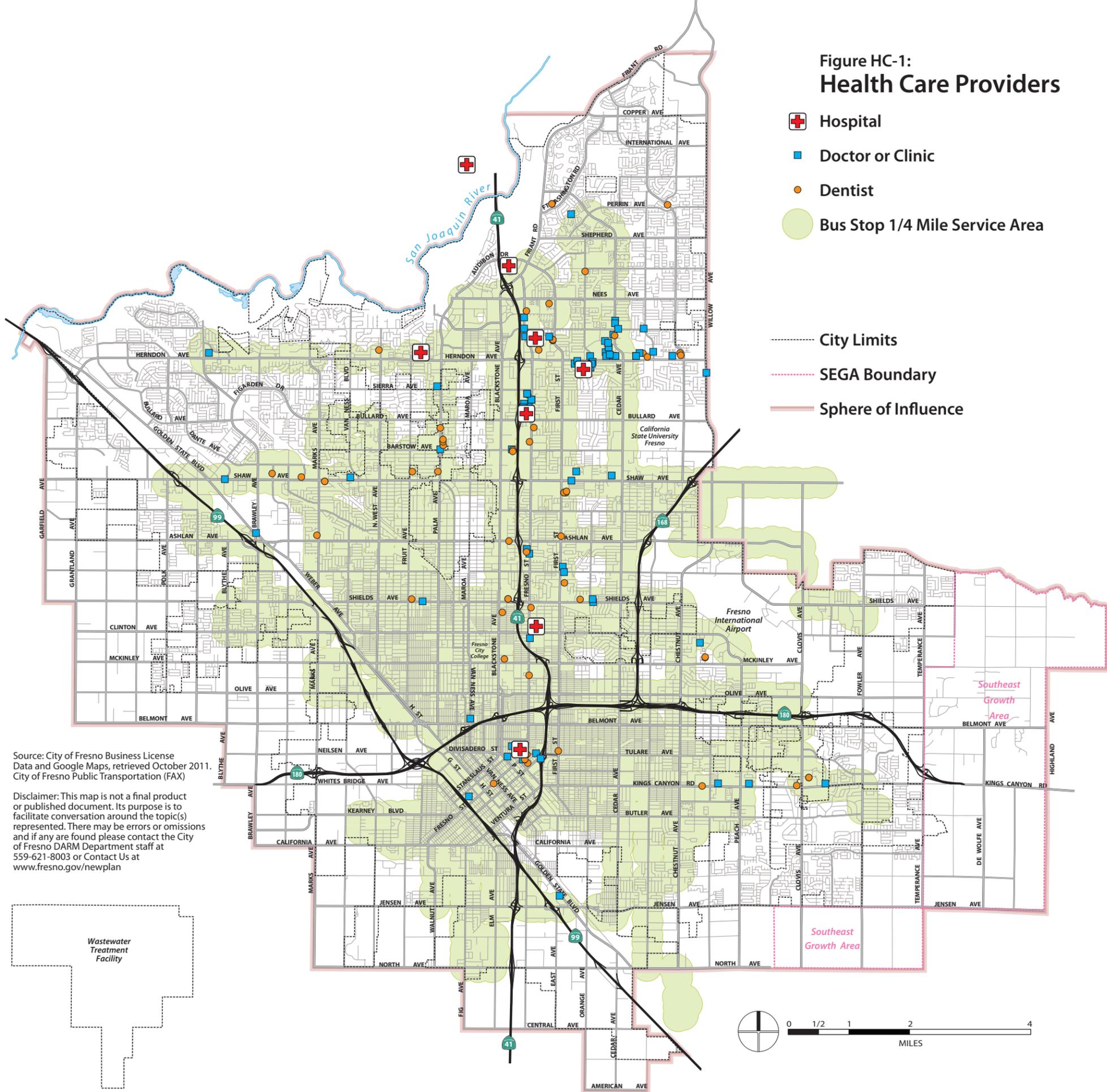
OPPORTUNITIES FOR IMPROVEMENT

The General Plan continues support of the Police Department’s efforts to prevent and investigate crime, as covered in the Public Utilities and Services Element. Target ratios of officers per 1,000 residents will be set as part of the budgetary process. The current ratio is 1.59 officers per 1,000 residents. A viable local approach to crime reduction and increasing perceptions of safety in Fresno communities requires attention to the physical and social environments that either support or deter crime. The physical features, layout, and design of many aspects of neighborhoods can influence crime prevention and other crime-related outcomes, such as neighborhood deterioration and residents’ fear of crime.²⁰ In addition, the physical design of buildings and streetscapes can help to deter crime, a concept known as Crime Prevention Through Environmental Design, or CPTED, is an approach that suggests design policies for new development and opportunities to reinvest in better design for existing neighborhoods.

¹⁹ Cohen, L., et al., “Addressing the Intersection: Preventing Violence and Promoting Healthy Eating and Active Living”, Prevention Institute (May 2010), p 1.

²⁰ Taylor, R. and A. Harrell., “Physical environment and crime,” presented to the National Justice Institute (1996).

Figure HC-1:
Health Care Providers



Source: City of Fresno Business License Data and Google Maps, retrieved October 2011. City of Fresno Public Transportation (FAX)

Disclaimer: This map is not a final product or published document. Its purpose is to facilitate conversation around the topic(s) represented. There may be errors or omissions and if any are found please contact the City of Fresno DARM Department staff at 559-621-8003 or Contact Us at www.fresno.gov/newplan

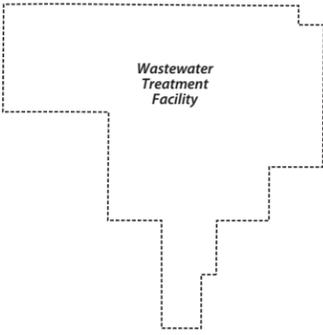
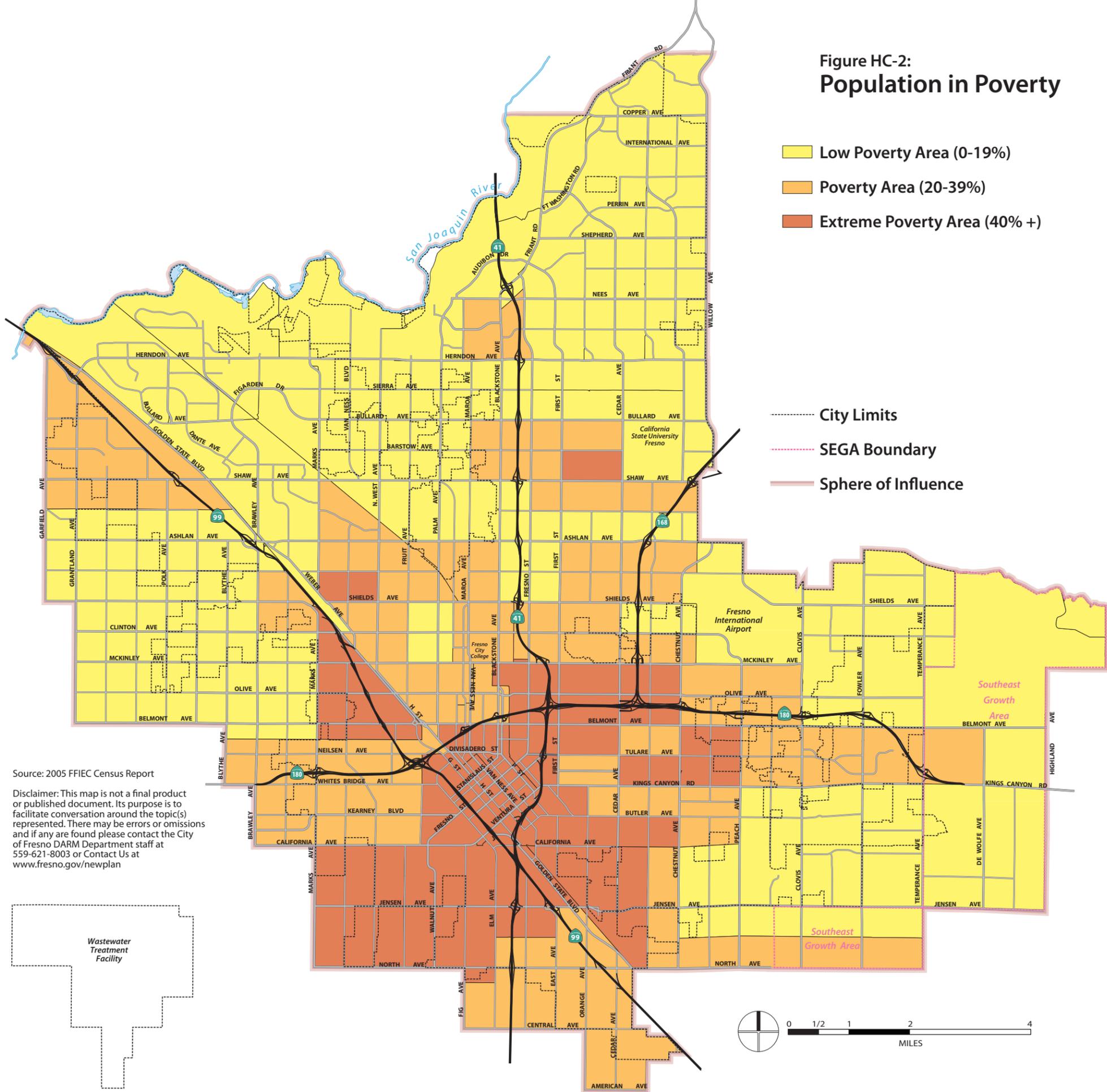
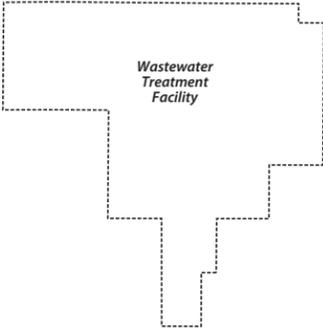


Figure HC-2:
Population in Poverty



Source: 2005 FFIEC Census Report

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EDUCATIONAL ATTAINMENT

In the U.S the poorest communities are usually also those with the highest proportions of people without a high school diploma. This is because low-income communities often have poorer quality educational systems and lack access to basic resources that would improve student performance; poverty also places greater pressure on students to leave school early in order to earn money; and low quality and incomplete education makes it harder to find well-paying employment, increasing the likelihood that these students grow up and continue to live in poverty. A high poverty rate may also relate to the fact that many residents are foreign-born and may have limited English-language skills, precluding them from higher paying jobs.

Not having a high school diploma is associated with several negative health outcomes. In 2002, 28 percent of adult Americans without a high school diploma lacked health insurance, in comparison to 8 percent of people with at least a Bachelor's degree. More to the point, in 2005, 22 percent of adults in Fresno County aged 18 to 64 had no health insurance, compared to a statewide average of 14 percent.²¹

The rate of educational attainment is not distributed equally across the city. **Figure HC-3** shows the geographic distribution of adults who did not graduate from high school, expressed as a percentage of all adults living in a census tract. The areas of the city with the lowest rates of high school graduates are in central and southwestern Fresno, at times exceeding 53 percent of the adult population. In contrast, northern Fresno has the highest rates of high school diplomas, with more than 88 percent of the population with diplomas in many areas. This distribution is almost identical to the poverty rate, with higher rates of poverty and lower proportions of high school diplomas appearing to correlate. About 20 percent of the adult population in the county are college graduates, compared to 27 percent statewide, and the city and county lag the rest of the state in residents with graduate degrees (6 percent vs. 11 percent). Moreover, about 26 percent of adult residents of Fresno have not graduated from high school, compared with less than 20 percent across the state.

Raising educational attainment is not only critical for health outcomes, but essential to increasing opportunities for jobs and employment as pointed out in the Economic Development and Fiscal Sustainability Element.

OPPORTUNITIES FOR IMPROVEMENT

The City has no control over the local public schools or institutes of high education. It can, however, work with these agencies and with private educational institutions on their location and mission. Opportunities may also exist to partner with neighborhood schools as locations for public services and outreach, which may then encourage greater interest in school and opportunities for adult education and pursuit of a General Education Diploma (GED). Joint use agreements for open space and recreation facilities are discussed elsewhere in this chapter.

²¹ Bengiamin, *et. seq.* 2008.

A factor in the city's low rate of educational attainment may also be its lack of appeal to people with a college degree, especially recent graduates in their 20s. Fresno has a shortage of large private employers that offer career development and high salaries and lacks the walkable mixed-use neighborhoods that can appeal to this population. The City has the potential to develop these assets, however, particularly by leveraging the presence of a major California State University in the city. Possible strategies are discussed in the Economic Development and Fiscal Sustainability Element.

ACCESS TO PARKS AND RECREATION

Exercise is critical to achieving positive health outcomes. Lack of physical activity is a primary risk factor in five of the top ten causes of death in California: heart disease, cancer, stroke, diabetes, and Alzheimer's disease. It is also a primary risk factor for obesity, which itself contributes to the same prevalent causes of death. Recent statistics indicate that almost half of adult Californians (ages 18 and older) fail to meet the national recommended guidelines for physical activity.²² Planners and public health practitioners recognize that community, neighborhood, and transportation system design often influences the extent to which physical activity fits into daily life, with the biggest barriers being long distances, lack of facilities, and safety concerns. When compared with people who were continually sedentary, those who increased their leisure time physical activity had 34 percent lower mortality, and those who were continually active had 45 percent lower mortality. These results did not vary in analyses stratified by obesity and functional limitations.²³

Lack of physical activity is also a significant problem in Fresno County. Only 64 percent of children ages 5 to 17 engaged in vigorous physical activity at least three days per week.²⁴ County students, in grades 5, 7, and 9, lack cardio-respiratory endurance as evidenced by poor results for aerobic capacity. In 2010, two-thirds of students in grades 5, 7, and 9 did not achieve the standards in all six areas of the physical fitness test.¹⁹

Access to and motivation to use physical recreation resources improves rates of physical activity, and the associated health benefits. Studies suggest people who live within walking distance (one-fourth mile) of a park are 25 percent more likely to meet their minimum recommended weekly amount of exercise.²⁵ Public parks also serve as places for physical recreation as well as community anchors that can bolster emotional well-being.

Fresno has about 3.2 acres of parkland per 1,000 residents, compared to 5.0 in Visalia and 13.0 in Sacramento (2.5 acres for neighborhood parks; 2.5 acres for

22 Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Chronic Disease Indicators, Physical Activity Trends for California, 2009.

23 Balboa-Castillo, T. "Physical activity and mortality related to obesity and functional status in older adults in Spain." *American Journal of Preventive Medicine* Vol. 40, Issue 1 (2011).

24 California Health Interview Survey. (2009). *Vigorous Physical Activity At Least 3 Days Per Week*.

25 Frank, L., et al., "Linking objectively measured physical activity with objectively measured urban form: findings from SMARTRAQ", *American Journal of Preventative Medicine*, Vol. 28, Issue 2 (2005).

community parks; and 8 acres for citywide parks, greenways and open space). The city's parks are also not distributed proportionate to the population. **Figure HC-4** shows the location of the parks and open space in Fresno and a quarter-mile radius (walking distance), as well as existing bike trails and routes. Overall, only 40 percent of residential lots in the city are within walking distance of a public park. The northern, generally less dense, areas of the city are well served by parks, open space, and bike routes. In contrast, the central areas of Fresno south of Shaw Avenue and west of Highway 41 have fewer and smaller parks, despite being some of the denser populated portions of the city. Some schools allow unrestricted access to their grounds outside of school hours, which helps provide recreational access in areas with few parks, especially west of Highway 99. Few of the school grounds east of Highway 99 and south of Herndon Avenue are unrestricted.

OPPORTUNITIES FOR IMPROVEMENT

Priorities for this General Plan include (1) to increase the amount of parks and open space available to its residents, and (2) to enhance access to parks and public recreation facilities within the central area of the Fresno for those living in older neighborhoods. While the creation of large parks in the older, denser portions of the city would be difficult, there are vacant parcels in key locations to create mini-parks and pocket parks with a children's playground and a running path. The Parks, Open Space, and Schools Element addresses the amount and location of future parks and partnerships with neighborhoods needed to secure new parks and maintenance resources.

Another strategy that leverages existing assets is to enter into joint use agreements with public schools in underserved areas, as these schools often have outdoor playfields and space and sometimes indoor resources. Many of the areas underserved by parks have schools located in the neighborhood. However, joint use agreements can be obstructed by the need to establish who ensures and pays for security, cleanup, and liability.

ACCESS TO HEALTHY FOOD

In addition to lack of exercise, poor diet is another major risk factor contributing to chronic disease prevalence. In the U.S., obesity and diet-related chronic disease rates are escalating; people are experiencing rising antibiotic resistance as a result of the treatment of farm animals; food, air, soil, and water are being contaminated from chemicals and pathogens related to agriculture; and natural resources such as fresh water and prime farmland are being depleted. These threats have environmental, social, and economic costs that are growing, cumulative, and unequally distributed. These issues all relate to the food system—what we eat and how it is produced.

Obesity is a particularly important concern for the healthy development of children. Childhood obesity has more than tripled in the past 30 years. The prevalence of obesity among children aged 6 to 11 years increased from 6.5 percent in 1980 to 19.6 percent in 2008. The prevalence of obesity among



Farmers' markets are located around Fresno.

adolescents aged 12 to 19 years increased from 5 percent to 18.1 percent.²⁶ Obese youth are more likely to have risk factors for cardiovascular disease, such as high cholesterol or high blood pressure. Children and adolescents who are obese are also at greater risk for bone and joint problems, sleep apnea, and social and psychological problems such as stigmatization and poor self-esteem.^{27,28} Finally, obese youth are more likely than youth of normal weight to become overweight or obese adults, and therefore more at risk for associated adult health problems, including heart disease, Type 2 diabetes, stroke, several types of cancer, and osteoarthritis.

Fresno County children and adults are more overweight, suffer from diabetes and heart disease, are less physically active and have less access to healthy food and recreational resources than their statewide counterparts. According to the 2009 California Health Interview Survey, the percentage of overweight and obese adults was 34.4 percent and 30.2 percent, compared to 33.6 percent and 22.7 percent statewide, respectively.²⁹

In some communities, healthy food access is a big factor in obesity rates, particularly where there are challenges to both physical proximity and affordability. Residents in communities with a more “imbalanced food environment” (where fast food restaurants and corner stores are more convenient than grocery stores) have more health problems and higher mortality than residents of areas with a higher proportion of grocery stores, other factors held constant.³⁰ Likewise, the presence of a supermarket in a neighborhood is linked to higher fruit and vegetable consumption and a reduced prevalence of overweight and obesity.^{31,32} In low-income neighborhoods, the addition of a supermarket has been found to increase residents’ likelihood of meeting nutritional guidelines by one-third.³³

“Food deserts,” defined as large and isolated geographic areas where mainstream grocery stores are absent or distant, are linked to poor food habits and associated negative diet-related health outcomes. The 2007 report “Searching for Healthy Food: The Food Landscape in California Cities and

26 Ogden, C.L., et al. “Prevalence of high body mass index in US children and adolescents, 2007–2008.” *Journal of the American Medical Association*, 303(3):242–9 (2010).

27 Daniels, S.R., et al. “Overweight in children and adolescents: pathophysiology, consequences, prevention, and treatment.” *Circulation*, 111;1999–2002, 2005.

28 U.S. Surgeon General. *Overweight and Obesity: Health Consequences*. Rockville: MD (2001).

29 California Health Interview Survey, 2009:
http://www.chis.ucla.edu/main/DQ3/output.asp?_m=0.7438928

30 Mari Gallagher Research and Consulting Group, *Examining the Impact of Food Deserts on Public Health in Chicago*, 2006.

31 Inagami, S., et al., “You are where you shop: grocery store locations, weight, and neighborhoods,” *American Journal of Preventative Medicine*, Vol. 31, Issue 1 (2006).

32 Sturm, R., and A. Datar, “Body mass index in elementary school children, metropolitan area food prices, and food outlet density,” *Public Health*, Vol. 119 (2005).

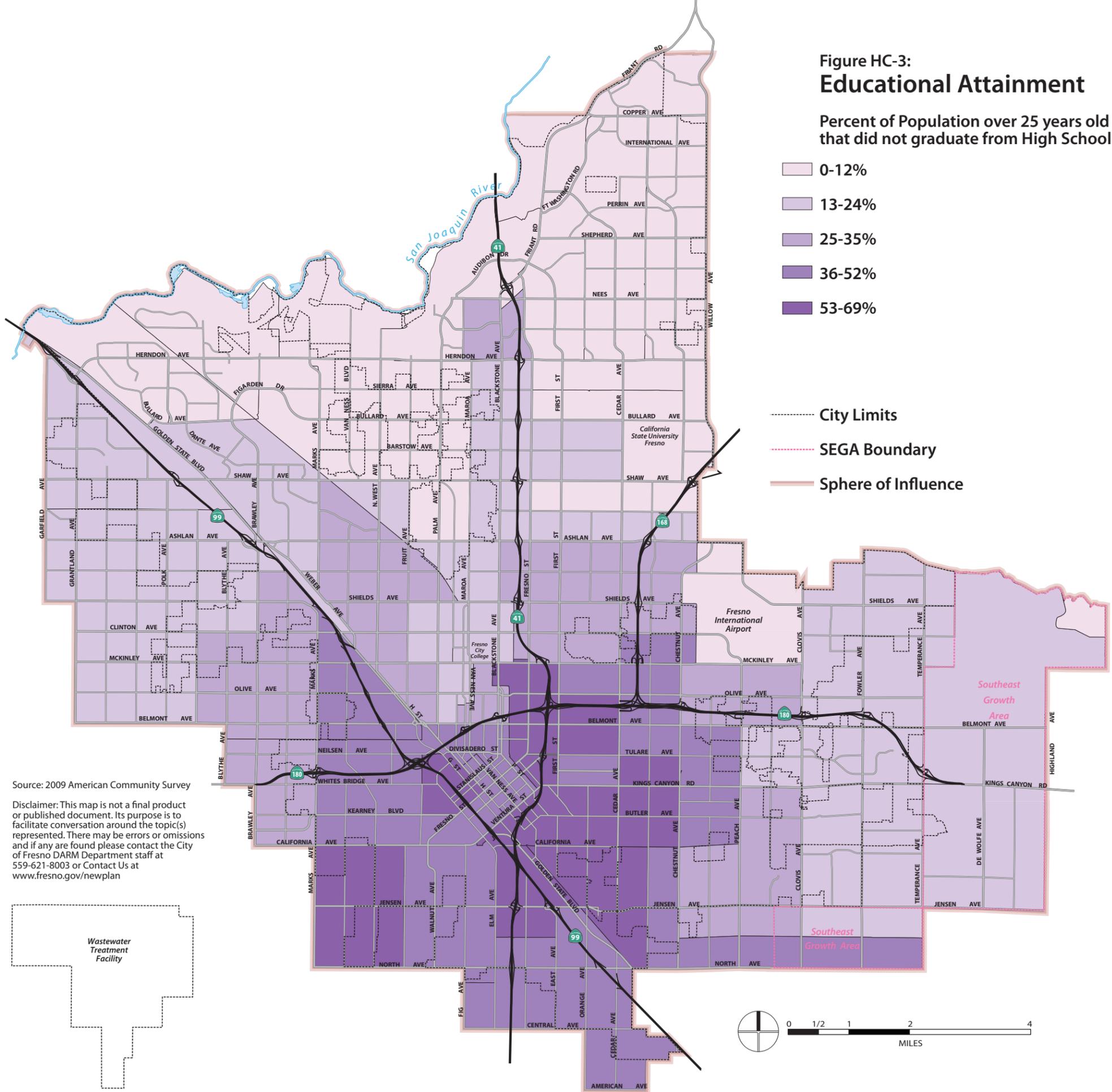
33 Morland, K., et al., “The contextual effect of the local food environment on residents’ diet”, *American Journal of Public Health*, Vol. 92, Issue 11 (November 2002).

Figure HC-3:
Educational Attainment

Percent of Population over 25 years old that did not graduate from High School

- 0-12%
- 13-24%
- 25-35%
- 36-52%
- 53-69%

- City Limits
- SEGA Boundary
- Sphere of Influence



Source: 2009 American Community Survey

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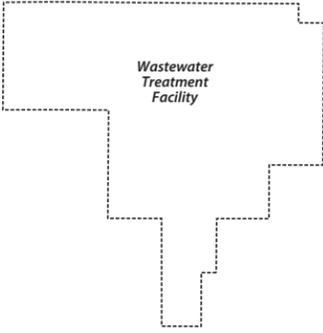
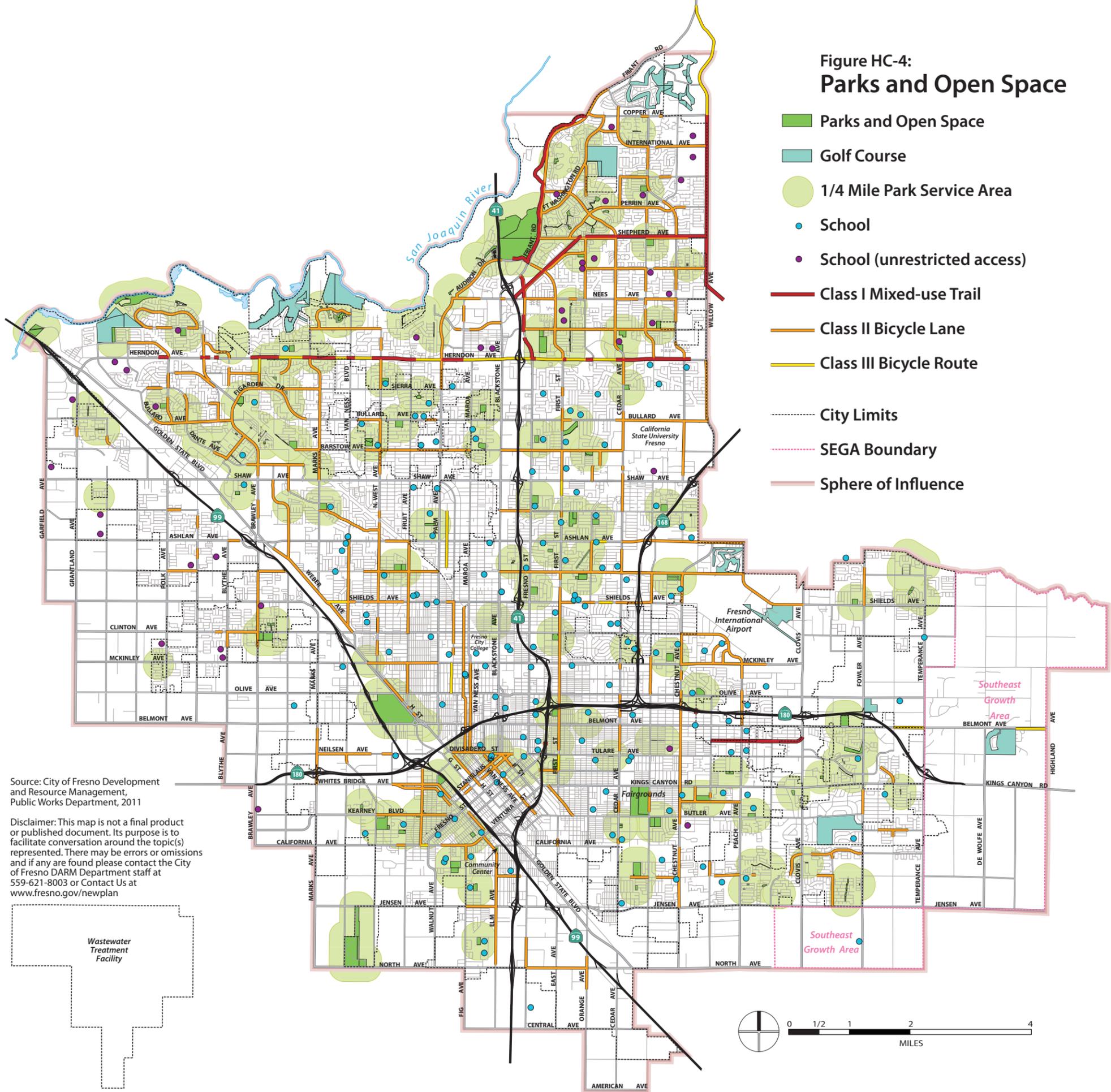


Figure HC-4:
Parks and Open Space



Source: City of Fresno Development and Resource Management, Public Works Department, 2011

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Counties” report found that fast food restaurants and convenience stores were five times more prevalent in Fresno County than supermarkets and produce vendors.³⁴ According to the USDA Food Desert Locator, there are 12 census tracts in the county that are classified as food deserts.³⁵ The distribution of retail food outlets in the county is: 50 percent fast-food restaurants, 34 percent convenience stores, 12 percent supermarkets, 3 percent produce stores, and 1 percent farmer’s markets.³²

Furthermore, 21.6 percent of the population in the county is categorized as “food insecure” compared to 16.6 percent nationwide.³⁶ Fresno County, one of the world’s top producers of fruits and vegetables, exports much of its bounty out of the county. It is not uncommon for produce from Fresno County to be sold to a distributor who ships it out of the county, out of California or out of the U.S. for processing or packaging. The product then finds its way back to Fresno via national supermarket chains at a higher cost.

Figure HC-5 shows the locations where fresh food can be purchased in Fresno: full-service grocery stores and fresh produce markets, with a quarter-mile radius shown for each, which is often a walkable distance; farmers markets; and community gardens. Convenience stores are also mapped, although they may or may not have fresh produce available for purchase. Figure HC-5 also shows the food deserts identified by the USDA that are located within the city limits.

Full service grocery stores and produce markets are actually well distributed around Fresno, with fewer on the city’s edges; the areas west of Highway 99 are largely devoid of grocery options. All of the city’s food deserts are located south of Belmont Avenue, with two west of Highway 99 and one south of the fairgrounds; the fourth one in southeast Fresno is an area under development.

Most city residents would be unable to easily walk to a grocery store though, since their locations are spread out. Only 10 percent of residential land in the city is within walking distance of a grocery store or fresh produce market. Farmers markets are clustered in the Downtown, but distributed in most areas except for central Fresno. The city has few community gardens, and these are mostly located in the eastern areas of Fresno.

Figure HC-6 represents the overlay of healthy food access with parks access. This map reveals that the central areas of Fresno south of Shaw Avenue and west of Highway 41—on both sides of Highway 99—are underserved by grocery stores as well as parks, with fewer and smaller parks than other parts of the city. This quadrant could be considered to be the part of Fresno with the least access to healthy living options. Smaller areas lacking healthy lifestyle access include the neighborhood between McKinley and Highways 41, 168, and 180; the neighborhood immediately west of the fairgrounds; and the area east of Highway 41 between Herndon, Bullard, and Cedar.

34 CA Center for Public Health Advocacy. (2007). Searching for Healthy Food, The Food Landscape in Fresno County.

35 United States Department of Agriculture. (2011). Food Dessert Locator, Fresno County.

36 Feeding America. (2011). Food Insecurity & Food Cost In the US, Fresno County.

What Other Cities are Doing:

Watsonville

General Plan policies focus on obesity, malnutrition, exercise, and food security. The policy framework emphasizes partnerships between the City and local organizations to promote awareness. Farmers' markets that accept the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) coupons and Electronic Benefit Transfer (EBT) cards, and senior citizens' programs are the primary action item.

San Francisco

The City allows farmers markets to take place at parks and schools and requires that they accept EBT.

Seattle, WA and Boulder, CO

Social obstacles can discourage EBT/WIC users from visiting farmers markets, given the personal and public nature of these transactions. In Boulder and Seattle, these barriers are mitigated by allowing customers to exchange cash or EBT/WIC for "Market Bucks" (Boulder) or voucher tokens (Seattle). or at a market

OPPORTUNITIES FOR IMPROVEMENT

The City became involved in healthy food access issues in 2007 when it was approached by several entities seeking to establish farmers' markets. One of these applicants had received grant funding, only to discover that in order to allow a farmers' market on its property, a rezoning was necessary to comply with land use regulations. As a consequence, the City has made the zoning regulations for farmers' markets more flexible. Additional initiatives for farmers' markets are presented in this element, and the concurrent Citywide Development Code update will offer regulations for integrating healthy community concepts into the City's regulations, consistent with General Plan policies and programs.

In addition, urban agriculture and community gardening are on the rise in Fresno and in cities around the country. The term "urban agriculture" refers to the growth or production of food for consumption or sale in and around a city or town. The term "community gardening" can include urban agriculture as well as recreational gardening in a community setting. Urban agriculture and community gardening typically occur on a small-scale in urban and suburban areas, such as in a backyard, school yard, or public community garden.

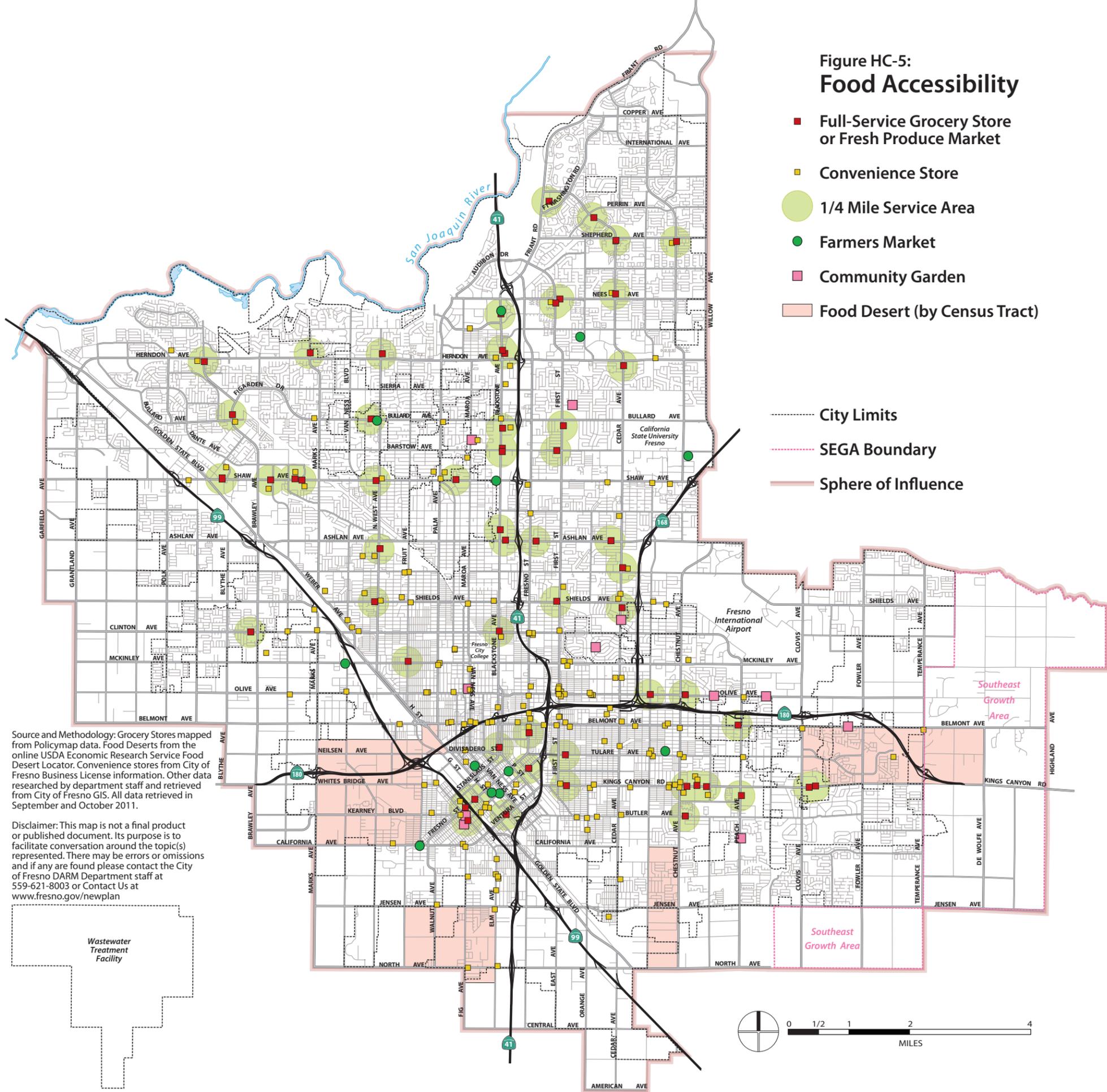
The benefits include:

- Recreational and community-building opportunities for residents;
- Inexpensive access to fresh, healthy produce – which can serve as part of the solution to food deserts and other public health issues related to diet, including obesity;
- Business opportunities for residents to sell goods they grow themselves, e.g. at farmers' markets; and
- Productive use for vacant or underutilized land.

The General Plan reflects the City's recent efforts to commit to several broad strategies to address these issues including

- The 2007 Fresno Green Strategy includes a policy to "encourage all city facilities (including schools) to serve at least 20 percent locally grown and organic foods beginning in 2009." While this policy was intended mostly as an economic development strategy, it has the possibility to improve healthy food access;
- As part of a multi-jurisdictional working group dedicated to improving health by improving the built environment. The City adopted a "Resolution Supporting the Collaborative Efforts of the City of Fresno Planning and Development Department and the County of Fresno in their Efforts to Incorporate Public Health Strategies into Local Land Use, Transportation and Community Design Planning;"
- Additional partnerships with the County include Walkability Workshops in underserved neighborhoods, participation in Farmers Market and Community Garden conferences, and now, work on healthy communities in the General Plan and Code updates; and

Figure HC-5:
Food Accessibility



- Full-Service Grocery Store or Fresh Produce Market
- Convenience Store
- 1/4 Mile Service Area
- Farmers Market
- Community Garden
- Food Desert (by Census Tract)
- City Limits
- SEGA Boundary
- Sphere of Influence

Source and Methodology: Grocery Stores mapped from Policymap data. Food Deserts from the online USDA Economic Research Service Food Desert Locator. Convenience stores from City of Fresno Business License information. Other data researched by department staff and retrieved from City of Fresno GIS. All data retrieved in September and October 2011.

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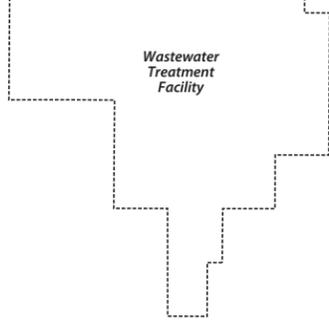
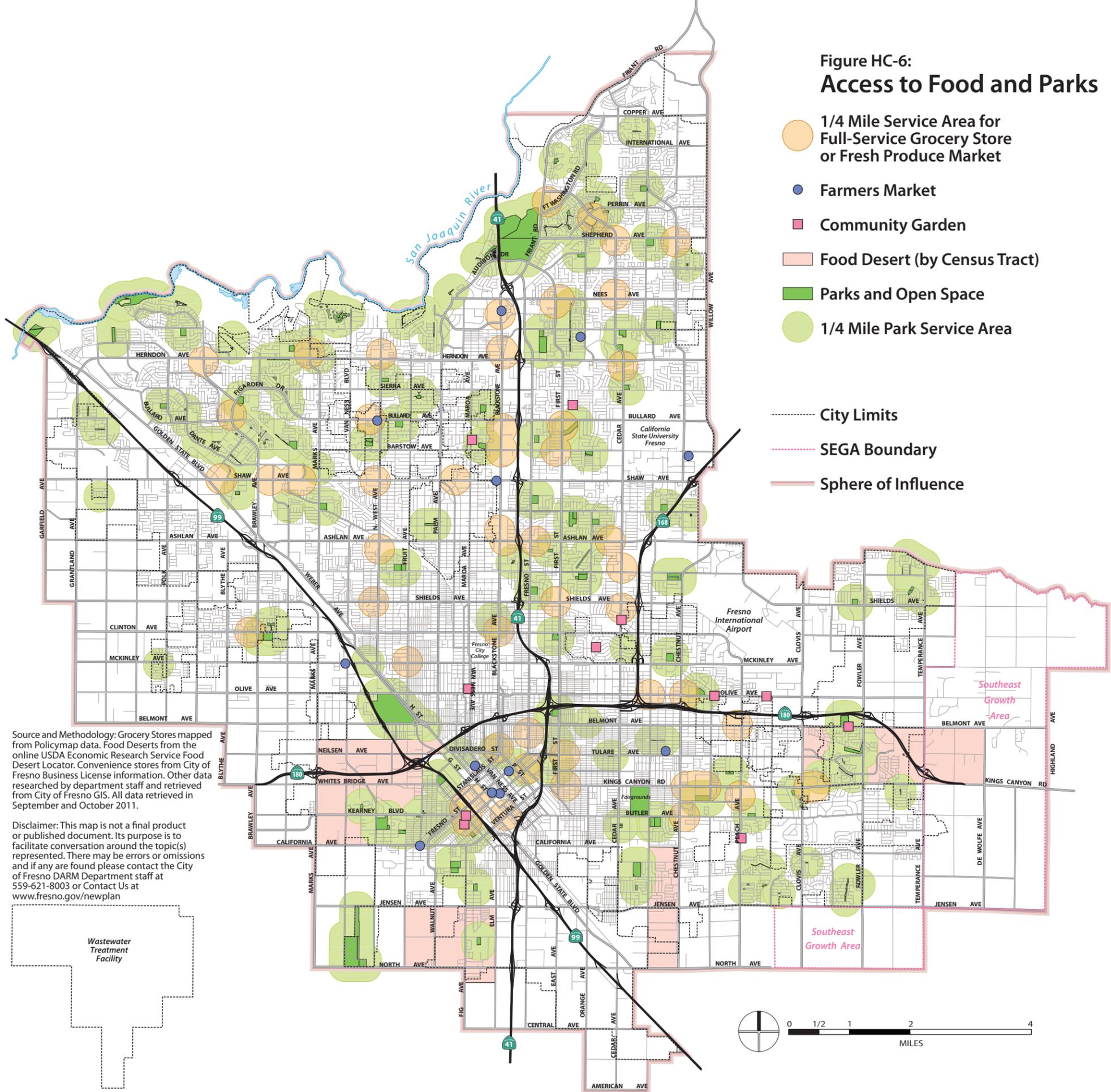
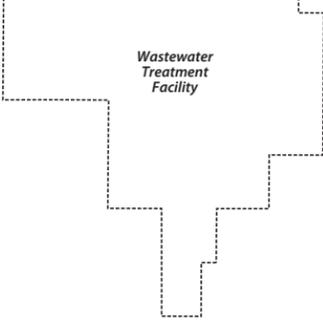


Figure HC-6:
Access to Food and Parks



Source and Methodology: Grocery Stores mapped from Polycymap data. Food Deserts from the online USDA Economic Research Service Food Desert Locator. Convenience stores from City of Fresno Business License information. Other data researched by department staff and retrieved from City of Fresno GIS. All data retrieved in September and October 2011.

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- The City also has been working with The California Endowment in partnership with the communities of central, southeast, and southwest Fresno as part of its Building Healthy Communities campaign.

Also, several successful community gardens are thriving in Fresno and offer a precedent for further expansion. Because of the close ties between Fresno and agriculture, there is significant expertise available to assist new gardeners with getting started. Examples of these resources include Fresno Metro Ministries, the Center for Creative Land Recycling, the Youth Council for Sustainable Communities, and the Fresno Economic Opportunities Commission.

In addition to supporting urban agriculture, farmers markets, and community gardens, the General Plan promotes institutional regional food purchasing, maintenance of local food culture and restrictions on fast food restaurants.

TRANSPORTATION OPTIONS

Transportation system design is related to health outcomes in a number of ways. For instance, while streets are designed to meet safety standards, negligent use by drivers, bicyclists and pedestrians can result in increased collisions or injuries. Statistics have shown traffic collisions and fatalities are substantially higher when vehicles are traveling faster, which naturally occurs on unobstructed and wide multi-lane roads. However, pedestrian injuries can be reduced more than seven-fold by slowing traffic down from 30 to 20 miles per hour, and slowing traffic from 40 to 20 miles per hour can reduce a pedestrian's chance of being killed, if hit by a vehicle, from 85 percent to just five percent. Reasonable road widths can naturally support efforts to reduce vehicle speed. Additionally, there is also a correlation between vehicle miles traveled (VMT) and traffic collision rates. Regardless of speed, the lower the VMT, the less likely there will be a traffic collision. A design emphasis of the General Plan and the Complete Neighborhoods concept is to reduce VMT. Decreasing the VMT also have the added benefit of reducing air pollution, which has a major impact on local health conditions in Fresno.

By exchanging some of those vehicle trips for non-motorized trips, a community can realize health benefits. For instance, there is evidence that for each half-mile walked per day, people are about five percent less likely to be obese (controlling for age, education, gender, and ethnicity). Almost one-third of Americans who commute to work via public transit meet their daily requirements for physical activity by walking as a part of their daily life, including to and from the transit stop.³⁷ This kind of access to routine physical activity is critical for individuals and families who lack the funds to support gym memberships or access to other private facilities.

³⁷ Besser, L. and A. Dannenberg, "Walking to public transit: steps to help meet physical activity recommendations." *American Journal of Preventive Medicine*, Vol. 32, Issue 4 (November 2005).

TRANSIT

Public transit provides a citywide travel option for people who cannot or choose not to drive, and can be a crucial means of accessing health services as well as jobs and education. The Fresno Area Express (FAX) serves about 17.5 million annual passenger trips. **Figure HC-7** shows the location of bus stops in the city and a quarter-mile radius from each, representing a normal walking distance. FAX's service area is fairly extensive, with 60 percent of residential and 94 percent of commercial land in Fresno within walking distance of a bus stop.

BICYCLING

The City of Fresno has a long-standing policy that biking is an important activity for many reasons including exercise and health. The City of Fresno Bicycle, Pedestrian, & Trails Master Plan (BPTMP) which is a standalone plan and is not proposed to be incorporated into the City of Fresno General Plan Update in its entirety, provides comprehensive plans and policies for increasing the miles of bike lane (along roadways) and bike paths (separate rights-of way) available to bike riders. Bicycle safety is a significant concern addressed in the BPTMP, which will be addressed by continuing to build safe bike routes and by education.

WALKING

Walking delivers myriad physical and social benefits. Being able to walk to a job, the store, a park, or simply for recreation provides physical exercise, eliminates travel expenses, and can provide social cohesion and sense of place. While walking is almost always an option, as a practical matter an unpleasant environment or a perception of risk can discourage this activity. For example, walking can be discouraged by the unavailability of sidewalks in certain locations, negligent use of roadways by high-speed automobile traffic, visually uninteresting or unpleasant surroundings, the presence or threat of crime, and long distances between destinations. The City has options for addressing some of these negative factors including through land use designations, development standards, streetscape design, and police services as funding may be available.

Creating additional safe walking and biking routes to schools for children is an important part of the city's circulation system and a priority for this General Plan. Providing these features will allow for physical activity opportunities, help with school attendance, and bolster the role of schools as community resources.

OPPORTUNITIES FOR IMPROVEMENT

The General Plan's transportation and mobility policies are intended to further improve the safety and efficiency of the system for all users; this will promote a better environment for walking, biking and the use of transit. The General Plan also supports opportunities to increase the number of persons who bicycle to work—or bicycle mode split—from just less than one percent of total commuters to work, to a much greater proportion. Completion of the city's planned bicycle lane and path network will make travel around Fresno by

bicycle more feasible. The Mobility and Transportation Element addresses many of these issues.

LIQUOR STORES

The location and prevalence of liquor stores can have a negative effect on neighborhood health. **Figure HC-8** shows the locations of stores that are licensed to sell alcohol for off-site consumption and businesses that can sell for on-site consumption throughout Fresno. In recent public meetings, three interrelated concerns have arisen:

- **Market saturation.** Some neighborhoods feel they have an overabundance of establishments with off-sale or on-sale licenses to sell liquor. As **Figure HC-8** shows, the Downtown and the area immediately east have a larger number of venues for the sale and consumption of alcoholic beverages within a small area than other areas of the city. Blackstone and Shaw Avenues also feature a high concentration of these stores.
- **Fear of crime.** Community members often see a strong relationship between establishments with off-sale or on-sale licenses to sell liquor and rates of nuisances and crime.
- **Danger to schools.** Related to the above point, residents are sometimes concerned when alcohol sales are allowed too close to schools because of the impact on teenage drinking.

The State Department of Alcoholic Beverage Control (ABC) manages the issuance of licenses for the sale of alcoholic beverages. ABC is allowed to deny licenses located in the immediate vicinity of churches and hospitals, within 600 feet of schools and public playgrounds, or within 100 feet of a residence. ABC can also restrict hours of sales. State law limits the number of off-sale beer and wine licenses to no more than one per 2,500 city residents, although there is no restriction on the concentration of licensed establishments within the city.

Currently, alcoholic beverage sales are subject to Conditional Use Permit approval. While this requirement applies citywide, some neighborhoods feel saturated with liquor stores. The City has not developed an independent mechanism for assessing appropriate concentrations of alcohol sales establishments, however, and relies on information from the Police Department and the ABC in their consideration of permit applications. The City of Fresno General Plan and Citywide Development Code updates provide an opportunity for a more nuanced approach to controlling and abating nuisances associated with liquor stores and restaurants through Conditional Use Permit and other land use approvals that consider neighborhood needs and potential impacts and policy guidance would be helpful to achieve this.

SAFE AND AFFORDABLE HOUSING³⁸

Housing can have direct and indirect effects on community health. Physical housing characteristics have been linked directly to several adverse health outcomes. For example, the presence of dampness and mold leads to increased risk of respiratory and other illnesses, while dilapidated and abandoned housing increases the risk of accidental injury among residents and is associated with increased emotional stress. Lead exposure from lead-based paint is one of the largest environmental health hazards facing children throughout the nation, and yet about three-quarters of the nation's housing stock built before 1978 contains some lead-based paint. Population density and overcrowding have also been associated with increased chances of contracting infections and sustaining injury. Based on findings such as these, it follows that well-constructed and managed housing can avoid health problems associated with allergens, neurotoxins, other indoor air quality issues, disease exposure and stress due to overcrowding, and neighborhood safety issues as well.

Not only is there evidence that poor quality housing directly causes negative health effects, but affordable and higher quality housing may have indirect health benefits, too. Affordable housing may improve health outcomes by freeing up resources for nutritious food and health care, and may reduce stress by providing families with greater residential stability, self-esteem, and sense of security and control over their environments.³⁹ Home ownership in general has been associated with reduced morbidity and mortality risk.⁴⁰

To really get at solutions for ensuring housing affordability beyond those already identified in the Housing Element, Fresno may also need to think about factors addressed by other General Plan elements that contribute to the lack of affordability. For example, family budgets must also factor in the cost of transportation when considering where to live. Compact, mixed-use communities with a balance of housing, jobs, and stores and easy access to transit have lower transportation costs because they enable residents to meet daily needs with fewer cars, the single biggest transportation cost factor for most households. So, efforts to increase walkability of neighborhoods, a key theme in this General Plan, may also result in overall increases in affordability for Fresno residents.

OPPORTUNITIES FOR IMPROVEMENT

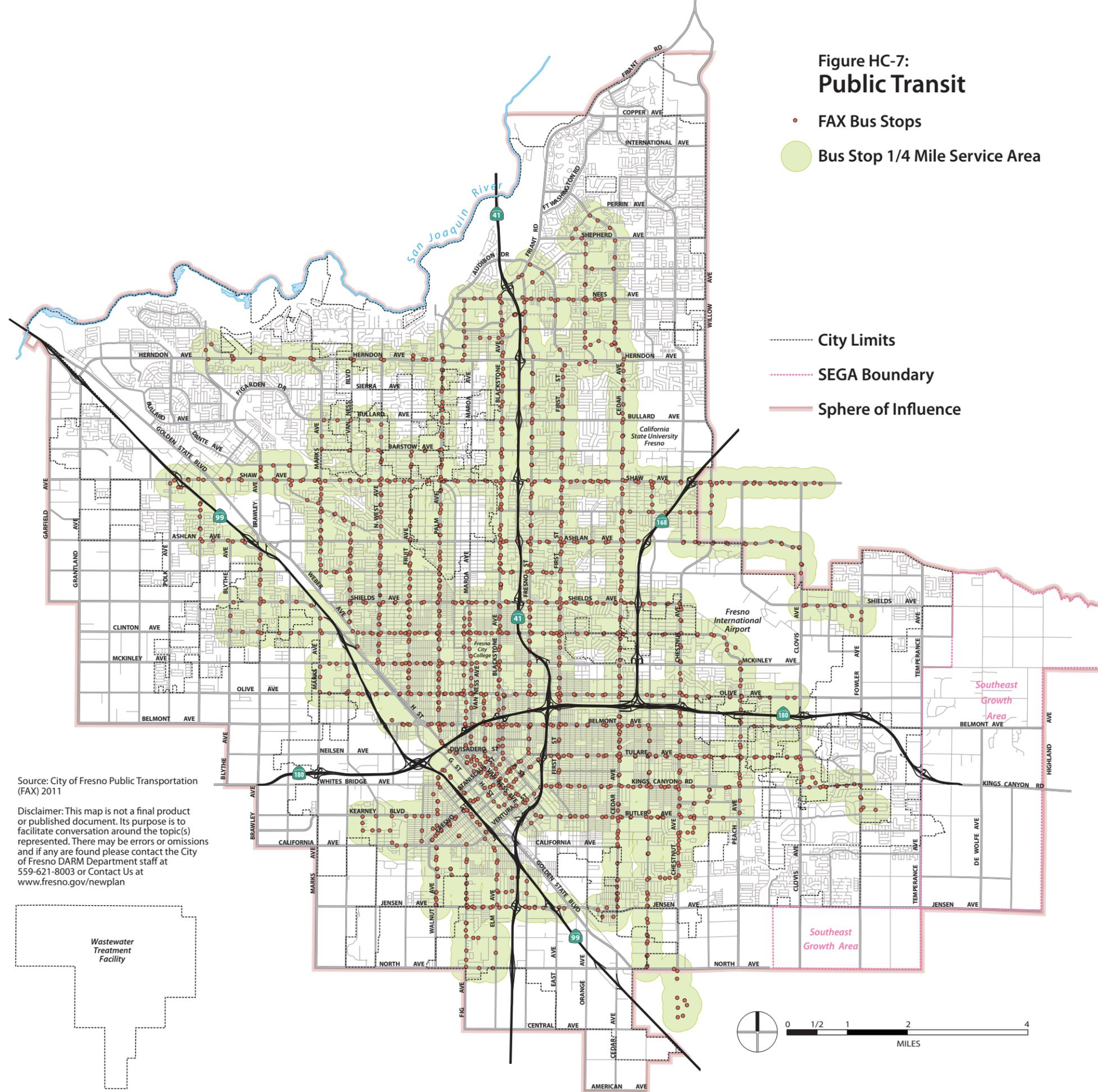
One of the City's primary planning objectives is to address the need for increasing the affordable housing opportunities for low- and moderate-income households; with special emphasis on persons with disabilities, the homeless, large families, persons living in substandard housing, and persons paying rent that exceeds 50 percent of their monthly income. As part of the implementation

³⁸ The Housing Element adopted in 2008 will be placed in an appendix of the Hearing Draft of the City of Fresno General Plan Update when it is available in the spring of 2013.

³⁹ Center for Housing Policy, "The positive impacts of affordable housing on health; a research summary," (2007).

⁴⁰ Filakti, H., and J. Fox, "Differences in mortality by housing tenure and by car access from the opcs longitudinal study," *Population Trends*, 81:27-30 (1995).

Figure HC-7:
Public Transit



- FAX Bus Stops
- Bus Stop 1/4 Mile Service Area

- City Limits
- SEGA Boundary
- Sphere of Influence

Source: City of Fresno Public Transportation (FAX) 2011

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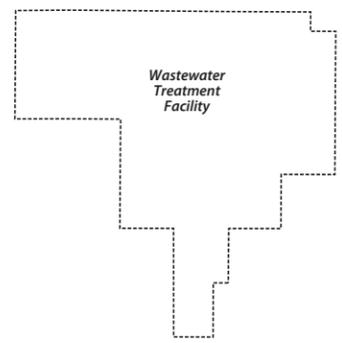
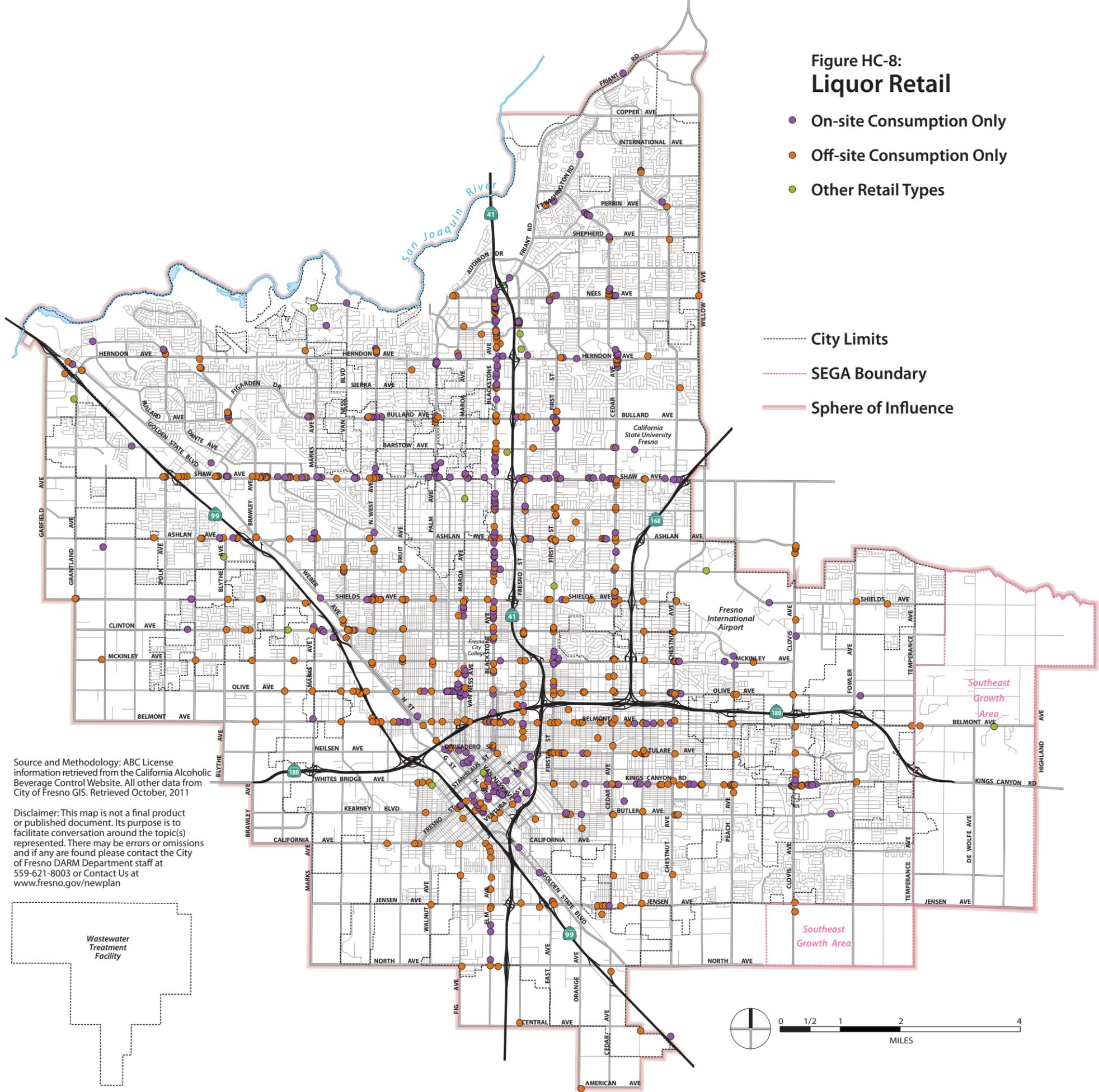


Figure HC-8:
Liquor Retail

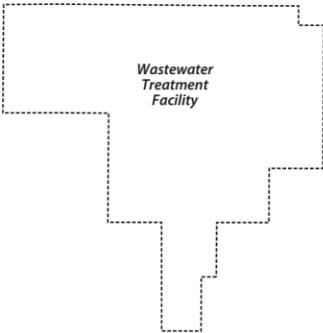
- On-site Consumption Only
- Off-site Consumption Only
- Other Retail Types

- City Limits
- SEGA Boundary
- Sphere of Influence



Source and Methodology: ABC License information retrieved from the California Alcoholic Beverage Control Website. All other data from City of Fresno GIS. Retrieved October, 2011

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of the Housing Element, programs are identified each year to improve both the quantity and quality of the affordable housing stock in the city. Other objectives include upgrading the city's infrastructure needs in low- and moderate-income neighborhoods, initiating programs to reduce crime, undertaking a code enforcement program and reducing homelessness.

The City is already performing well in the creation and rehabilitation of safe, affordable housing. The relatively low cost of land and ample supply of housing in the area also means that the market provides a supply of affordable housing on its own, as well. This Fresno General Plan Update does not include an update to the Housing Element. However, the General Plan does designate areas for higher densities and calls for by-right zoning to implement higher densities in the Citywide Development Code Update consistent with the Housing Element. New policies to improve housing overlap with other issues, such as supporting housing that better serves an aging population and implementing the State's newest building code, the CALGreen Code.

The City's Housing Element has already been approved and is not being comprehensively updated at this time as this work is scheduled to occur after adoption of the Regional Transportation Plan update and the Sustainable Communities Plan as specified under new State regulations set by SB 375. The approved Housing Element's goals and policies are incorporated by reference for the purposes of this Initiation Review Draft. However, technical amendments to the Housing Element needed for General Plan consistency may be proposed in the Hearing Draft of the General Plan as needed. If so, the Housing Element's goals, objectives, policies and programs will be included in the Hearing Draft of the General Plan, with any proposed amendments clearly indicated, so the City Council will be able to consider and act on a proposed General Plan that is complete and internally consistent. Goals and policies developed for the General Plan update are consistent with the approved and current Housing Element.

YOUTH ENGAGEMENT AND EMPOWERMENT

Just as early childhood is a critical period for addressing the environmental contributors to chronic disease and health disparities, so are youth and young adulthood important periods for enabling community members to make good decisions and preventing risk factors that contribute to chronic disease burden and premature mortality in the future.⁴¹

Youth engagement—the meaningful participation and sustained involvement of young people in activities focused outside themselves—can be conceived as part of a larger group of “developmental assets” which may improve youth resilience to harmful choices related to drugs, alcohol, violence, and risky sexual activity, among other things. Youth engaged in structured activities—extracurricular school involvements, community service, organizational work in church or community—have been found to be less likely to use cigarettes, marijuana, hard

41 Dorothy C. Browne, et al., “Minority health risk behaviors: an introduction to research on sexually transmitted diseases, violence, pregnancy prevention and substance use,” *Maternal and Child Health Journal*, Vol. 5, No. 4 (December 2001).

drugs and alcohol, less likely to engage in risky sexual behavior or become pregnant, less likely to engage in violent behavior or be arrested, less likely to drop out of school, and more likely to complete a college degree, than youth who were not engaged in these kinds of activities. There is also evidence that engaged youth are less depressed, have higher self-esteem, are more physically active, obtain higher grades in school, and show a greater commitment to their friends, families, and communities.⁴²

More specifically, involvement in arts and hobbies, as well as participation in youth group activities, may reduce later delinquency. For example, third graders who spent more time in non-sport extracurricular activities were better adjusted in fifth grade, than children who were less involved in these activities. Community service involvement also leads to reduced violence.

Soliciting youth feedback and input in designing public programming or infrastructure (parks, schools, etc.) that directly serve youth can provide significant benefits to institutions and neighborhoods. Youth are an important constituency when it comes to long-term care of investments (brick and mortar and time), if they help design and build something, they have proven they will take care of it.⁴³

OPPORTUNITIES FOR IMPROVEMENT

Fresno has a Youth Engagement Team (YET) that is a collaborative network of 14 youth serving organizations. The idea is that young people should have a real voice in their communities, with the chance to be advocates for change and to participate in the decision-making process on issues that affect them. Tasks undertaken include researching and documenting local issues, creating campaigns to shift community attitudes, drafting suggestions for and working with local governments to enact policy change, and learning leadership skills necessary to inspire others to get involved. Through the YET work with the Building Healthy Communities campaign, these youth and adult partnerships are currently working to engage youth in policies surrounding transportation, education equity and urban land use. Some of these initiatives and partnerships include:

- **S.U.C.C.E.S.S.** (Students United to Create a Climate of Engagement, Support and Safety), led by Youth Leadership Institute. The goal of SUCCESS project is to ensure equal learning opportunities for all students in the Fresno Unified School District (FUSD) through creating healthy school climates that support positive youth development. Currently, the SUCCESS team is working on recommendations to improve FUSD discipline policies and procedures to ensure problem student behavior is addressed fairly, effectively, and promptly in a way that supports students in continuing their academic achievement. The goal is to measure an increase in school attendance and reduction in the number of school days missed due to suspension and expulsion.

⁴² Centres of Excellence for Youth Engagement, “Youth engagement and health outcomes: Is there a link?” (2003).

⁴³ Comments from leaders at the Fresno Youth Leadership Institute – September 30, 2011

- **Summer Night Lights (SNL)**, led by Fresno Metro Ministries and the City of Fresno Parks, After School, Recreation and Community Services (PARCS). The Summer Night Lights program aims to address youth violence prevention in key neighborhoods in Fresno where youth violence is most prevalent, by offering support services and measuring local violent crime data. SNL will focus on two city parks, Romain Park (745 N. First St.) and Holmes Park (212 S. Fresno St.). The major underlying goal is to reduce the violence in the areas of these two parks, as measured by Fresno Police Department crime data, particularly violent crimes involving youth.
- **Fresno Youth Council for Sustainable Communities**, led by the Center for Multicultural Cooperation. The California Center for Civic Participation, Center for Multicultural Cooperation and the Wangari Maathai Center, have established Youth Councils for Sustainable Communities in Fresno, Sacramento and the Bay Area. The purpose is to make sure youth are not left out of important decisions that will help transform our communities into thriving, healthy places that preserve the environment and provide economic opportunities for all people.
- **Fresno Boys and Young Men of Color**, led by Stone Soup Fresno. Stone Soup Fresno is working to ensure boys and young men of South East Asian heritage are included in local research and policy efforts to improve local health, education and economic outcomes for boys and young men of color.

Furthering the engagement of the Fresno's youth in these civic activities is a cost effective way for the City to reduce crime, increase educational attainment, and improve a number of health indicators (See Appendix C) across all populations. The Fresno General Plan Update includes specific policies to support the YET program and also provides clear opportunities with its own departments, such as PARCS, and expand collaborative efforts with local schools.

BUILDING HEALTHY COMMUNITIES INITIATIVE

The City has been coordinating with community groups to address priorities of residents in South Fresno – generally those neighborhoods south of FWY180. One such group, The California Endowment, has launched a 'Building Healthy Communities Initiative.' The Building Healthy Communities Initiative as currently proposed addresses a broad range of land use and social issues, as indicated by their published community priorities for South Fresno listed below

- Ensure that the built environment is clean, well maintained and conducive to health in ALL city neighborhoods and includes adequate and equitable provision of sewer and water within a reasonably priced homeownership market.
- Establish effective education and job training for area youth that is both academic and trade oriented.

- Ensure that underserved neighborhoods are included in strategies for job creation, including opportunities for home grown business development.
- Actively seek opportunities to create and maintain safe parks of all sizes in every South Fresno neighborhood to provide families with spaces to interact with their neighbors and promote physical activity.
- Create opportunities both public and private for the Downtown neighborhoods that include entertainment, stores (retail, food, clothing etc.), parks, recreation centers and after school programs, especially for youth.
- Acknowledge and address attitudes within the government institutions, economic systems and law enforcement culture toward immigrant and ethnic minority communities that perpetuate inequality.
- Develop a system of transportation that responds to the needs of the most vulnerable sectors of the community, including focused bus routes for specific geographic areas of need and/or particularly vulnerable subgroups (e.g. the elderly, disabled and farm workers).
- Provide accessible healthcare services beyond emergency care.
- Establish an equitable system of public safety that supports community while also reducing crime.

Although these matters are not identified policies of this General Plan, it is a stated policy of this General Plan to coordinate with community groups such as those engaged in The California Endowment Building Healthy Communities Initiative to address community land use priorities.

OBJECTIVES AND POLICIES

The following objectives and strategies establish strategic direction for improving community health. The big ideas, in sum, are to:

- Increase access to medical and health services for geographically underserved areas and populations at greater risk for poor physical health.
- Design new development and redevelopment to promote physical activity, access to fresh and healthy food, and deter crime.
- Continue programs to improve regional air quality.
- Expand access to infrastructure and community programs that facilitate healthy living, such as parks, recreation facilities, bike paths, and community gardens.
- Provide transportation and housing options that are affordable, reliable, effective, and safe.

- Undertake investments in public health that leverage existing assets, partner with other organizations, and are easy and inexpensive to operate and maintain.

Other supporting initiatives, such as urban form, economic development and transportation strategies, are addressed in other elements of the Fresno General Plan Update.

OBJECTIVE

HC-1 Work with neighborhood associations of local residents, businesses, and institutions on neighborhood and community health initiatives.⁴⁴

⁴⁴ There are beginning to be a number of good examples of local resident-based neighborhood associations that include businesses and institutions such as those in the Lowell Neighborhood and the Eldorado Park Neighborhood. Another worth mentioning is the 41 & North Corridor Neighborhood in West Fresno facilitated by Habitat for Humanity as part of its Neighborhood Revitalization Initiative. (NRI).

A major function of the Habitat NRI program is to facilitate holistic neighborhood development using a place-based, assets-based approach. The program launched in 2010 with a planning team of 25 members recruited to provide input, leadership and guidance in the revitalization of a disenfranchised neighborhood in West Fresno. After a two year planning process that included multiple assessments, one on one interviewing and community conversations, the 41 & North Corridor Neighborhood Development plan was created and launched in August 2012. The 41 & North Corridor planning team is a multi-year neighborhood development strategy created using resident generated ideas and priorities. The 41 & North Corridor is a main business and pedestrian thoroughfare located within our focus neighborhood that lies within a 1.5 mile radius. The natural boundaries of the focus neighborhood include 10 blocks boarded by six main streets: Roy St., Almy St., North Ave., Martin Luther King Blvd., Annandale and Elm Streets.

The Mission of the 41 & North strategic planning team is “to empower the residents and businesses in the neighborhood to restore hope, strengthen families, spur economic growth, and create a safe and thriving community for all that call it home”.

The Vision of the 41 & North Corridor is that it is “a safe, clean, neighborhood where residents can raise a family and can be proud to work, live, and play”. *The 41 & North Corridor is a temporary name for the focus neighborhood. The neighborhood youth association is designing a coloring contest where all residents will have the opportunity to vote, re-name / re-brand the neighborhood as part of the revitalization process.

The following goals have been identified as overall neighborhood development priorities:

- Goal 1: Recruit and train residents to be community leaders
- Goal 2: Improve livability and impact quality of life of neighborhood residents
- Goal 3: Maintain quality housing stock for low-income Families, expand Home ownership opportunities and facilitate mixed use development
- Goal 4: Improve pedestrian infrastructure

IMPLEMENTING POLICIES

- HC-1-a **Neighborhood Associations.** Promote the establishment of formal and self-sufficient ‘neighborhood associations’ of local residents, businesses and institutions who are committed to working together and with others in Fresno to achieve the health, safety, recreation, employment, business development, property maintenance and other goals of their neighborhoods⁴⁵.
Commentary: A Council of representatives could help coordinate with the City on setting priorities and obtaining feedback on programs and projects that are implemented.
- HC-1-b **Local Health Workshops.** Work with health providers, schools, churches, neighborhood associations and others to develop and maintain a program of regular health workshops (and mobile health clinics) run by medical service providers and hosted in local neighborhood facilities such as schools, parks, churches, businesses or even parking lots.
- HC-1-c **Childcare.** Encourage public agencies and private sector groups in the provision of childcare facilities in neighborhoods and job centers through new partnerships, incentives, and set aside requirements to provide healthy, secure environments for Pre-K children.
- HC-1-d **Cultural Sensitivity.** Work with providers to ensure that additional health care services are offered in a way that is culturally sensitive and linguistically appropriate for the diverse communities in Fresno.
Commentary: The City should facilitate collaborative partnerships between the Fresno County Health Department, California State University in Fresno, medical professionals, community-based agencies, and service providers, schools, and local agencies.

OBJECTIVE

- HC-2 Create complete, well-structured, and healthy neighborhoods and transportation systems.

⁴⁵ The commentary in italics following certain goals is not part of the goal itself, but is instead advisory and informational language intended to further discuss and clarify the goal to help guide the objectives of the General Plan.

IMPLEMENTING POLICIES

HC-2-a **Healthy Neighborhoods.** Promote the design of "Complete Neighborhoods" whose physical layout and land use mix enable walking to local stores and services, biking, and transit use; foster community pride; enhance neighborhood identity; ensure public safety; are family-friendly; and address the needs of residents of all ages and abilities.

Commentary: Related policies are in the Land Use and Urban Form Element.

HC-2-b **Supportive Housing.** Encourage the availability of group housing facilities, emergency residential shelters, and similar housing arrangements throughout the city consistent with State and Federal law.

HC-2-c **Prevent Crime through Design.** Investigate the applicability of Crime Prevention Through Environmental Design principles and best practices, promoted nationally by many cities and law enforcement agencies, into project review procedures for new development and major renovations.

HC-2-d **Mobility for Carless Population.** Improve mobility for populations that do not have access to a car by connecting all neighborhoods to major destinations, including parks, civic facilities, California State University in Fresno and other educational institutions, employment centers, shopping, and recreation areas.

Commentary: Details and related policies in the Transportation and Mobility Element describe how this can be accomplished with a variety of modes.

HC-2-e **Bike and Pedestrian Network.** Continue to promote alternative modes of transportation through development and maintenance of a citywide pedestrian and bicycle network.

OBJECTIVE

HC-3 Create healthy, safe, and affordable housing.

IMPLEMENTING POLICIES

HC-3-a **Restrictions near Freeways.** Restrict new residential development, schools, and parks within 500 feet of a limited access freeway, in order to reduce exposure to concentrations of toxic air pollutants and noise.

Commentary: Implementing regulations can address the effects of a freeway's vertical alignment—whether it is elevated or depressed—on the mitigation

needed to meet interior and exterior air quality and noise standards for residential development. However, parks and schools within the 500-foot buffer cannot be mitigated to acceptable levels.

Related policies and programs are in the Housing Element. Creation of a Housing Trust Fund may be explored as part of the next Housing Element update.

- HC-3-b **New Drive-Through Restaurants.** Update the Citywide Development Code to include controls on drive-through restaurants in new neighborhoods, pedestrian-oriented infill areas, and other walkable locations in and adjacent to existing residential neighborhoods.

Commentary: This action will help the City achieve the health benefits associated with improved neighborhood air quality through reduced auto-related emissions.

- HC-3-c **Universal Design.** Working with the Building Industry Association, update the Universal Design Standard (Section 11-109 of the Municipal Code) to encourage and facilitate incorporation of universal, lifecycle design principles in new residential design options available to purchasers, to help community members stay in their homes and neighborhoods longer as they age.

Commentary: This idea is central to the concept of creating complete neighborhoods. Lifecycle or universal housing design allows people to live in the same house, and stay in the same community, even as they age and their physical abilities change. Another common term is “visitability,” referring to the desire for friends or family of any age or physical ability to be able to visit the home. A life cycle or “visitable” house includes fixed accessible features (wider doors and halls, open floor spaces, clear traffic patterns, etc.), what many people understand to be “universal design” principles. Lifecycle housing also provides for adaptable features, such as wall reinforcement for later installation of grab bars, or removable base cabinets for future knee space, to accommodate wheelchairs.

- HC-3-d **Housing-related Illness Assessment and Testing.** Support efforts to provide community assessment and testing programs for housing-related illnesses (i.e. blood lead levels, respiratory health, and skin conditions) as funds may be available.

- HC-3-e **Health Services and Housing.** Assist with publicizing programs, locating appropriate sites for clinic services, and helping residents make the connection between County and community-based health services related to housing, and local government resources related to rehabilitation and affordable housing improvements.

Commentary: Grants also can help tie energy efficiency improvements to measures that will remove lead from buildings.

- HC-3-f **Green Standards for Affordable Housing.** Provide appropriate incentives for affordable housing providers, agencies, non-profit and market rate developers to use LEED and CALGreen Tier 1 or Tier 2 standards.

Commentary: The City should publicize the health, environmental, and long term economic and maintenance benefits of applying LEED standards (for New Construction, Existing Buildings, Homes, and Neighborhood Development) and CALGreen Tier 1 or Tier 2 standards to projects in Fresno.

OBJECTIVE

- HC-4 Improve property maintenance.

IMPLEMENTING POLICIES

- HC-4-a **Business Maintenance Standards.** Update property maintenance standards, codes and enforcement provisions specific to businesses.

Commentary: Updated maintenance standards can provide additional enforcement options related to certain types of businesses, such as "corner stores," which due to their nature and location have more significant impacts on a healthy environment including public health, safety and welfare.

- HC-4-b **Local Business Assistance.** Within older neighborhoods, assist local store owners in identifying low-cost solutions to maintenance issues and seek to provide financial assistance to qualifying businesses.

- HC-4-c **Residential Maintenance Standards.** Update residential property management standards, codes and enforcement provisions.

Commentary: This should be complemented by initiating an improvement program in targeted neighborhood areas with high concentrations of substandard and poorly maintained single- and multi-family rental properties.

- HC-4-d **Cooperative Compliance Monitoring.** Work with formal 'neighborhood associations' to monitor and enforce basic property maintenance standards to ensure neighborhood cleanliness and safety, and prevent blight-causing conditions.

OBJECTIVE

HC-5 Promote access to healthy and affordable food.

IMPLEMENTING POLICIES

HC-5-a **Healthy Grocery Incentives.** Amend the zoning regulations to establish incentives for locating healthy food grocery stores at the center of neighborhoods and to increase communitywide healthy food access:

- Establish definitions and standards for “healthy food grocery stores” in order to ensure that businesses meeting that description have access to incentives developed with them in mind. Criteria could require the store to: (1) dedicate at least 50 percent of retail space for a general line of food and non-food grocery products intended for home preparation, consumption, and use; (2) dedicate at least 30 percent of retail space for perishable goods that include dairy, fresh produce, fresh meats-poultry-fish, and frozen foods; and/or (3) dedicate at least 500 square feet of its retail space for fresh produce;
- Provide flexibility for existing neighborhoods with corner stores and markets to meet the intent of a healthy grocery store, but with a lower square footage of produce area;
- Study suitable sites that could be developed as healthy food grocery stores (with a focus on neighborhood areas with little or no access);
- Encourage expedited permit processing as resources are available for healthy food grocery store development;
- Leverage City staff time as resources may be available and as funding may be available to help potential new healthy food grocers to consolidate parcels and/or make necessary improvements; and
- Allow for “alternative” grocery stores that use less space, require less parking, and focus on the day-to-day needs of nearby residents.

HC-5-b **Food Assistance Awareness.** Encourage local agencies and community groups to increase community awareness of and participation in existing federal food assistance programs, such as the Women, Infants, and Children (WIC) nutrition program and the Supplemental Nutrition Assistance Program (SNAP, formerly food stamps).

HC-5-c **Refrigeration Assistance for Local Stores.** Work with philanthropic and community institutions to create a revolving fund granting zero-interest loans to neighborhood convenience stores for the purchase of refrigeration and other fixtures necessary to allow for the sale of fresh produce.

HC-5-d **Work with Farmers Markets.** Encourage local agencies and community groups to work with farmers' markets to accept WIC and EBT and as resources and time are available provide technical assistance to enable this requirement, such as providing an exchange or voucher system.

HC-5-e **Healthy Food Procurement.** Consider a healthy food purchasing and vending policy for City facilities and operations that commits the City to selecting healthy, well-balanced meals and snacks for City-sponsored activities, meetings, and facilities.

Commentary: Fresno can improve residents' diets by exercising their "market participant" power—the power to buy and sell goods and services. By adopting healthy procurement, or purchasing, policies, Fresno can provide healthier food to community members and make a positive impact on community health.⁴⁶ One formulation of this kind of policy would be to apply nutrition standards consistent with the Dietary Guidelines for Americans to all food sold (meal menus, vending machines) within City facilities. Such nutrition standards may also be applied to food sold on public school campuses during the regular school day if school districts chose to participate in this program.

HC-5-f **Food Policy Council.** Encourage community-based groups to create a Fresno Food Policy Council, to be coordinated with the Mayor's initiative – the Fresno Food Expo—and the Fresno County Food System Alliance (FSA) to study the food system as a whole and recommend changes to food policy that increase access.

Commentary: The Fresno Food Policy Council should include stakeholders from many sectors of the food system, e.g., anti-hunger and food justice advocates, educators, employees of non-profits involved in food system reform, government officials, farmers, grocers, chefs, business people, food processors, and food distributors. Opportunities for youth involvement in the work of the Council should also be provided.

HC-5-g **Urban Agriculture.** Promote a full range of urban agriculture activities, including farmers' markets, farm stands, community gardens, on-site garden produce market stands, and urban farms and encourage associations to support these activities. Under this policy, the City will undertake the following:

⁴⁶ Public Health Law and Policy, NPLAN, "Understanding Healthy Procurement: Using Government Purchasing Power to Increase Access to Healthy Food" (2011)

- Amend the zoning ordinance and streamline permitting procedures to include provision for Community Gardens, On-site Garden Produce Market Stands and Urban Farms that allow sale of foods grown locally.
- Permit community gardens as land uses allowable by right under the following conditions:
 - On vacant residentially zoned lots under two acres in size through the filing of an agreement with the City between a recognized community group and the land owner; and
 - On developed land operated and owned or leased by a community institution such as a church, community center or school.
- Consider a policy of reduced planning application and plan check fees for urban agriculture projects.
- Make publically available an inventory of City-owned surplus land that could be used for urban agriculture.
- Continue to allow and promote community gardens in City-owned parks.
- Encourage community gardens to be planned within walking distance of high-density residential areas to compensate for the reduced amount of open space in these areas.
- Allow small livestock of adult size at or below 25 pounds as appropriate and defined by the Citywide Development Code.

Commentary: These provisions would supplement the availability of fresh produce in the city while encouraging social cohesion, supporting local farmers, and reducing greenhouse gases.

OBJECTIVE

HC-6 Improve access to schools and their facilities for the community.

IMPLEMENTING POLICIES

HC-6-a **Safe Routes to Schools.** Continue to improve the conditions for youth walking and bicycling in the areas surrounding schools by working with the Unified School Districts (USD) of Fresno USD, Clovis USD, Central USD, Sanger USD, and Washington Union USD, as well as California State University in Fresno, to implement a safer routes to school program. As funding is available prioritize identified safer routes to school infrastructure improvements in annual transportation improvements budgets.

Commentary: The program should identify schools and neighborhoods where the program is most needed, and engage local residents in safer routes to school workshops. This will enhance students' health and well-being, ease traffic congestion near schools, and improve air quality and community members' overall quality of life.

- HC-6-b **Site Schools Away from Major Roads.** Work with all school districts operating in Fresno and private and charter schools to locate and design new school sites so they are located and accessed away from major street intersections and major streets.

Commentary: Ideally, elementary schools should be sized and sited in the middle of residential neighborhood areas accessed by connector or local-collector levels streets, and not along major streets.

- HC-6-c **Work with Districts on Facilities Agreements.** Work with school districts to promote the use of schools as community-wide facilities. Help broker agreements between recreation organizations and school districts.

Commentary: To make these agreements viable, the City will need to resolve issues over security, maintenance, liability, fees, and other contractual obstacles with all the public school districts operating within the city.

- HC-6-d **New School Strategies.** Advocate for school siting standards that allow smaller neighborhood schools, allow new schools to be constructed in existing urbanized areas, and design schools to be focal points of community life.

OBJECTIVE

- HC-7 Establish priorities and mechanisms for park facilities improvements linked to effectiveness and improving health.

IMPLEMENTING POLICIES

- HC-7-a **Prioritization System for Parks Improvements.** Link park facility improvement priorities to a ranking system keyed to public health and safety and recreational goals, prioritize gaps in local park service areas (especially in the areas west of Highway 99, south central and southeast Fresno) and respond with options for pocket parks and other walkable open space amenities.

Commentary: The best options may involve joint use and improvement of ponding basins and school-owned land.

HC-7-b **Performance-Based Capital Improvements.** Based upon the health and recreation goals ranking system as one of several ranking systems the City may use, establish a performance-based priority system for capital improvements.

Commentary: Unlike traditional capital improvements programs, a performance-based priority system establishes a ranking scale that measures each component (e.g., pool, court, bench, or trail) of its system against the scale related to public health. For example, it might be a one-to-three scale in which one is below expectations, two indicates that the component can meet its intended function for a given period of time, and three means that it exceeds expectations. A performance-based park planning approach can take the conversation beyond “How many acres are there?” to “How well are the parks serving the community?”

HC-7-c **Funding Mechanisms for Open Space Maintenance.** Work with formal ‘neighborhood associations’ to establish communities facilities districts or other citywide financing mechanisms to generate funds for maintenance of new parks and open space, or to improve the level of maintenance of existing facilities based upon neighborhood needs and priorities.

Commentary: Options may include a voter-approved sales tax initiative for park maintenance and related needs.

HC-7-d **Integrated Pest Management.** Consider formulating and implementing an Integrated Pest Management Program to reduce the use of pesticides at City-owned parks and landscape areas.

OBJECTIVE

HC-8 Reduce crime and nuisances in the future that may be associated with high concentrations of establishments with off-sale or on-sale licenses to sell liquor and encourage conversion of such establishments to other uses where feasible and appropriate.

IMPLEMENTING POLICIES

HC-8-a **Retail Conversion.** Assist community groups seeking conversion of establishments with off-sale or on-sale licenses to sell liquor to other retail that better meets community needs. Give priority to the conversion of those within a quarter-mile of schools and parks.

Commentary: General forms of assistance or support could include priority processing, reduced permit or plan check fees and technical assistance on marketing to potential tenants.

HC-8-b **Crime and Nuisances.** Assist community and neighborhood groups seeking to reduce crime and nuisances they associate with high concentrations of establishments with off-sale or on-sale licenses to sell liquor through Police Department consultations, other available services, and programs such as Neighborhood Watch.

OBJECTIVE

HC-9 Support programs, leadership, and opportunities for Fresno’s youth.

IMPLEMENTING POLICIES

HC-9-a **Out-of-School Youth Programs.** Encourage public agencies and community-based organizations to work with the Fresno Unified School Districts (USD), Clovis USD, Central USD, Sanger USD, and Washington USD to support the development of a unified and central student leadership entity for out-of-school time in Fresno including the development of citywide standards.

Commentary: This student leadership entity should:

- *Define and promote a public image and message on the youth development approach;*
- *Create and engage in activities that build the field of youth development;*
- *Promote broad-based support and facilitate connections to schools and community resources;*
- *Coordinate data collection and accountability measures;*
- *Develop and increase access to resources;*
- *Organize and convene stakeholders; and*
- *Develop programs and learning communities through technical assistance and consultation.⁴⁷*

HC-9-b **Youth Leadership Program.** Working with the Youth Leadership Institute, Center for Multi-Cultural Communication, or other youth-oriented community organizations, design and seek funding for a youth leadership program led by the City of Fresno Parks, After School, Recreation and Community Services Department to involve youth directly in planning for services and programs.

⁴⁷ Hall, G., et al., “How after-school programs can most effectively promote positive youth development as a support to academic achievement: A report commissioned by the Boston After-School for All Partnership.” Wellesley, MA: Wellesley Centers for Women, National Institute on Out-of-School Time, (2003).

Commentary: Involvement can yield contact with caring adults, and youth leadership creates innovation in programming and facilities and helps young people shape the future of their communities. Enabling and valuing the contributions of young people is critical to keeping them involved.

- HC-9-c **Job Training, Apprenticeships, and Placement.** Work with the Workforce Investment Board, or other interested organizations, businesses, schools, and residents to create an expanded youth job development partnership, helping connect local businesses to teens for after school and summer work, volunteer positions, and other skills development opportunities.
- HC-9-d **Youth Master Plan.** Work with local youth groups and organizations to seek adequate funding for City staff time, consultants, and participating neighborhood and community organizations to formulate a Fresno Youth Master Plan based upon appropriate youth goals related to land use, transportation and housing and other General Plan Elements.

WORKSHOP DISCUSSION DRAFT

APPENDIX A - DEFINITION OF TERMS AND CONCEPTS - FRESNO GENERAL PLAN HEALTHY COMMUNITIES ELEMENT

Activity Center: A type of urbanized development that can occur at multiple scales based upon its planned density, intensity, and location. They include a close proximity of buildings with mixed land uses and are typically integrated with and connected by multiple modes of transit including walking, biking and public transit, providing a single destination where people can live, work, and shop. *An umbrella definition for a variety of types of activity centers (should also be defined) such as Regional, Urban, Neighborhood, Suburban, etc. which are characterized based upon the intensity, location, and mix of uses.*

Bus Rapid Transit (BRT) and BRT Corridor priority transit routes, pedestrian activities and linkages, “high frequency transit”. Will define

City of Fresno or City: Refers to the municipal entity and its functions as a government entity. Use of the term “city” typically refers to the area, population or activities occurring within the Fresno Plan Area.

Citywide: References to “Citywide” are in relation to a characteristic, regulation or other factor that occurs within the incorporated boundaries of the City of Fresno while “citywide” may refer to occurrences within the Fresno Planning Area (FPA).

Citywide Development Code: Refers to the proposed City of Fresno Municipal Code, Chapter 15, Citywide Development Code which is proposed to be the new planning, zoning and development implementing code.

Climatized Plants: will define

Community Plan: A refinement of the general plan for a component geographic area of the general plan. A community plan shall advance the provisions of the general plan to a more precise level of detail and shall contain goals, policies, maps, and standards that implement the recommendations of the general plan. A community plan shall contain those plan elements which are essential to the implementation of the general plan and may contain additional components, including specific plans, which are necessary to the development of the goals, policies, and standards for the community plan area. A community plan shall be adopted, amended, or repealed by resolution of the Council.

Community Facilities District: will define

Complete Neighborhood and “elements” of, Neighborhood, District, mixed-use urban districts, compact neighborhoods, suburban areas, transit-oriented mixed use corridors, Mixed Use Urban Corridors, activity centers, community centers, neighborhood centers, residential districts, main street, multi-modal corridors and centers, Holistic Neighborhood Planning-“Adopt development regulations that require ‘major’ new subdivisions be designed as compact pedestrian and transit-oriented communities” (UF-14-1, S-134, s-135)

Criteria pollutants: will define

Density and Intensity: General description of land use characteristics where Residential Density or Density generally refers to the ratio of residential dwelling units to acre (43,560 square feet) of land which is calculated by dividing the number of existing or proposed residential dwelling units by the area of the subject property.

Intensity generally refers to the relative magnitude of the use or activity which may occur upon a given property or area of land and is typically reflected by the ratio of building area to land area calculated as floor area ratio (i.e. the building area divided by the land area). Intensity may also be measured by other characteristics such as the rate at which the uses of a property generate demand for water consumption, demand for wastewater disposal or generates demand for travel such a private vehicle, public transportation, bicycling or walking.

Drought-Resistant Plants: will define

Environmental justice: will be defined

Fresno-Clovis Metropolitan Area (FCMA) and Fresno Metropolitan Area: These terms have been used in the past to refer to one or both of the City of Fresno and the City of Clovis and the immediately surrounding environs the boundaries of which were defined by US Census Tracts. This term was widely used in the past and referred to a geographic area previously defined by the US Census Bureau. The Fresno Metropolitan Area was referred to and the boundary depicted in Exhibit 4 of the Amended and Restated Memorandum of Understanding between the County of Fresno and the City of Fresno January 6, 2003. The area included within the FMA is larger than the SOI and the FPA.

Fresno's City Limits: Refers to the incorporated boundaries of the City of Fresno.

Fresno Production-Consumption Region: will be defined

Fresnans: Refers generally to persons living within the City of Fresno's planning area.

General Plan: Use Municipal Code Definition 12-105-G-6.1: Shall mean an integrated, internally consistent, comprehensive, and long-range set of goals and policies for the general physical development of the city and any land outside the city's boundaries which bears relation to the city's planning. The general plan shall include diagrams which identify the general locations and types of land uses that are consistent with the goals and policies of the plan. The general plan and its recommendations shall address physical, social, economic, environmental, design, and public service delivery system issues that have a bearing on the growth and change of the city. The general plan shall contain the mandatory elements prescribed by State Planning and Zoning Law (Title 7, Division 1, commencing with Section 65000, of the California Government Code), which may be combined where appropriate. The general plan may also include any other elements or address any other subjects which, in the judgment of the Council, are needed for the appropriate physical development of the city.

Goal: A goal is a general direction-setter. It is an ideal future end related to the public health, safety or general welfare. A goal is a general expression of community values and, therefore, may be abstract in nature and is generally not quantifiable or time-dependent.

Objective: An objective is a specified end, condition, or state that is an intermediate step toward attaining a goal. It should be achievable, and preferably measurable.

Policy: A policy is a specific statement that guides decision-making and indicates a commitment of the local legislative body to a particular course of action to accomplish goals and objectives.

Implementation Measure: An implementation measure is an action, procedure, program or technique that carries out general plan policy. (State of CA, GP Guidelines, OPR)

Green building rating system: will be defined.

Green technology: will be defined

Greenways: Greenways is a long, narrow piece of land, where vegetation is encouraged, which is managed for public recreation and slow travel.

Groundwater: will be defined

Growth or Urban Growth Area: Urban growth is development of properties over a period of time with uses and improvements which are intensive and urban in character. Urban growth areas are typically specifically defined geographic areas within which urban development may be managed through the application of policies and implementation measures to assure that commensurate urban public facilities and improvements are provided as necessary to accommodate the planned development.

Healthy Communities strategy: will define

Healthy People: Healthy People 2020 is a 10-year agenda for improving the Nation's health. It is a multiyear process that reflects input from a diverse group of individuals and organizations. More information can be found at <http://www.healthypeople.gov/2020/default.aspx>

Higher-intensity development: will define

Infill or Urban Infill Area: Infill or urban infill areas typically refers to properties and improvements which are largely vacant, underdeveloped or developed with uses and structures which are antiquated or harmful given the site's location and surrounding uses. Infill development typically refers to the reuse or redevelopment of such properties to accommodate activities which are more viable and compatible with the location and surroundings.

Infill opportunity areas and Infill Priority Zone: General or specifically defined geographic areas for which policies and implementation measures are established to promote development or planned land uses.

"Leap frog" development: will define

Lighting and Landscaping District: will define

Low Impact Design: will define

Low-Intensity Agricultural Activities: will define

Master Plan or Master Planning (S45), master public facility plan, Sub-area Master Planning for BRT transit corridors and growth areas designed (designated) by the General Plan to include urban design principles (page 3-21,S126) (page 3-22,S127 & S128 requiring Master Plans and Sub-Area Master Plans), subsequent specific or master plans, (page 3-5, S23, 24)"subsequent specific plans for identified growth areas and certain larger infill areas are subsequent projects", "precise development plan" to be allowed by Development Code (page 3-32). To be defined in glossary.

Sub-area Master Plan: Typically refers to a land use and circulation plan refinement for an area which is 160-acres or less in size and provides for a mix of land use proportionate to those identified by the Fresno General Plan Land Use Diagram and is prepared and adopted as provided by the City of Fresno's Development Code.

Mixed-Use: A development type consisting of a diversity of both residential uses and nonresidential uses, which may include but are not limited to office, retail, public, or entertainment, in a compact urban form with a strong pedestrian orientation.

Vertical Mixed-Use: A development that contains at least one multistory mixed-use building.

Horizontal Mixed-Use: An integrated mixed-use development consisting of adjacent residential and non-residential uses.

New Urbanist principles: will define

Passive Water Storage: will define

Parkway: will define

Planning Area: Referred to as the Fresno Planning Area (FPA) which is the geographic area defined by the boundary depicted in FGP Land Use Element Figure 2. It is consistent with the expanded SOI boundary depicted by the Amended and Restated Memorandum of Understanding between the County of Fresno and the City of Fresno, January 6, 2003 with the addition of the entirety of the Fresno-Clovis Regional Wastewater Reclamation Facility. The FPA includes properties which are within the City of Fresno incorporated boundaries as well as those which are located within the unincorporated area.”

Renewable energy: will be defined

Riparian: will define

Solar power: will be defined.

Special Purpose Recreation Facility: will define

Specific Plan: Use Municipal Code Definition 12-105-S-20.1: shall mean a precise plan or redevelopment plan based on, and consistent with, the general plan and the community plan within which it is located, and shall contain precise land use designations, regulations, programs, and legislation that are required for the systematic implementation of the general plan and community plan.

Sphere of Influence (SOI): The City of Fresno’s SOI is defined as the geographic area within the boundaries depicted by the Fresno General Plan Land Use Diagram, Figure -, which are consistent with the boundaries as approved by the Fresno Local Agency Formation Commission (LAFCo) as of September 1, 2012. The expanded SOI boundary as identified by the Amended and Restated Memorandum of Understanding between the County of Fresno and the City of Fresno, January 6, 2003 includes the remaining portion of the 2025 Fresno General Plan’s North Growth Area which has not been included within the LAFCo approved SOI as of September 1, 2013.

Transit Village, Transit Oriented Development (TOD), TOD Activity Center, TOD Corridor & major TOD corridor, Major Corridor. Will define

Urban and urban area: Areas characteristic of, or constituting a city or more intensively developed community generally comprised of moderate and higher density residential development (i.e. three or more dwelling units per acre although urban areas often include estate sized lots ranging from one to five acres in area) together with office, retail commercial development, industrial, public and institutional uses. The intensity of such uses typically require the provision of public services and infrastructure including water supply system, sewage collection and treatment system, roadways and other improvements for motor vehicle and non-motorized travel, public transit, and police and fire suppression safety services.

Urban Form or Urban Design: urban form and design is concerned with the location, mass, and design of various urban components and combines elements of urban planning, architecture, and landscape architecture.

Urban Use, Commercial Use, Residential Use, agri-business or agricultural business uses versus general agricultural use. Will define if necessary but these are typically generic term at a plan level but would be specifically defined in the development code.

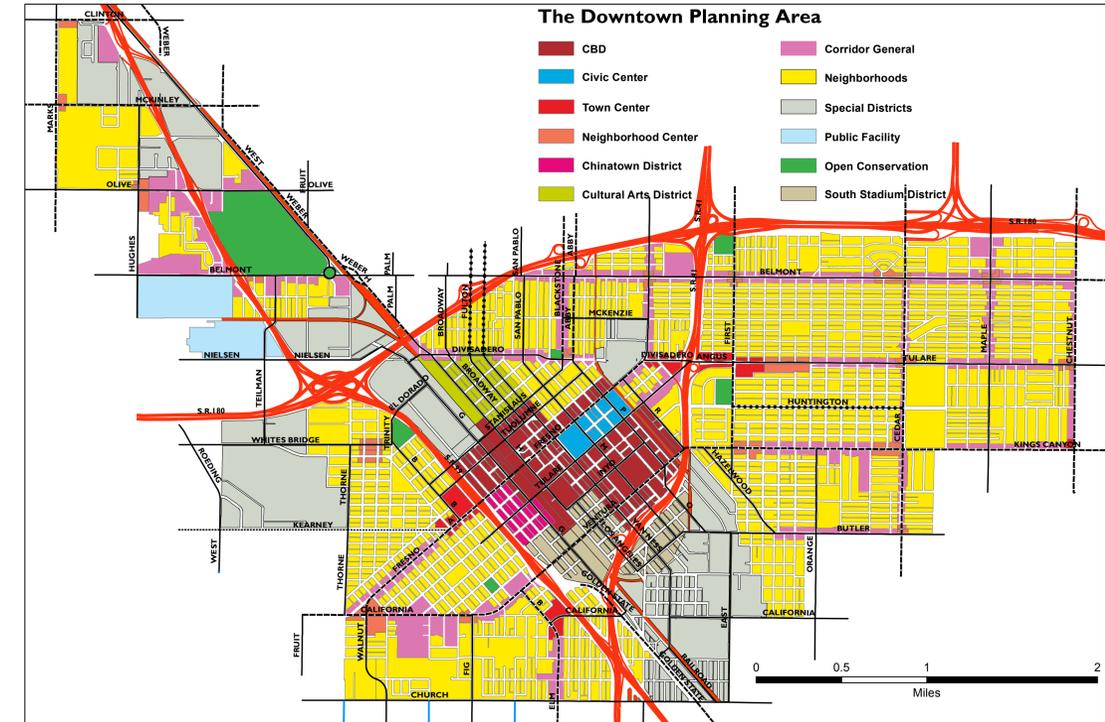
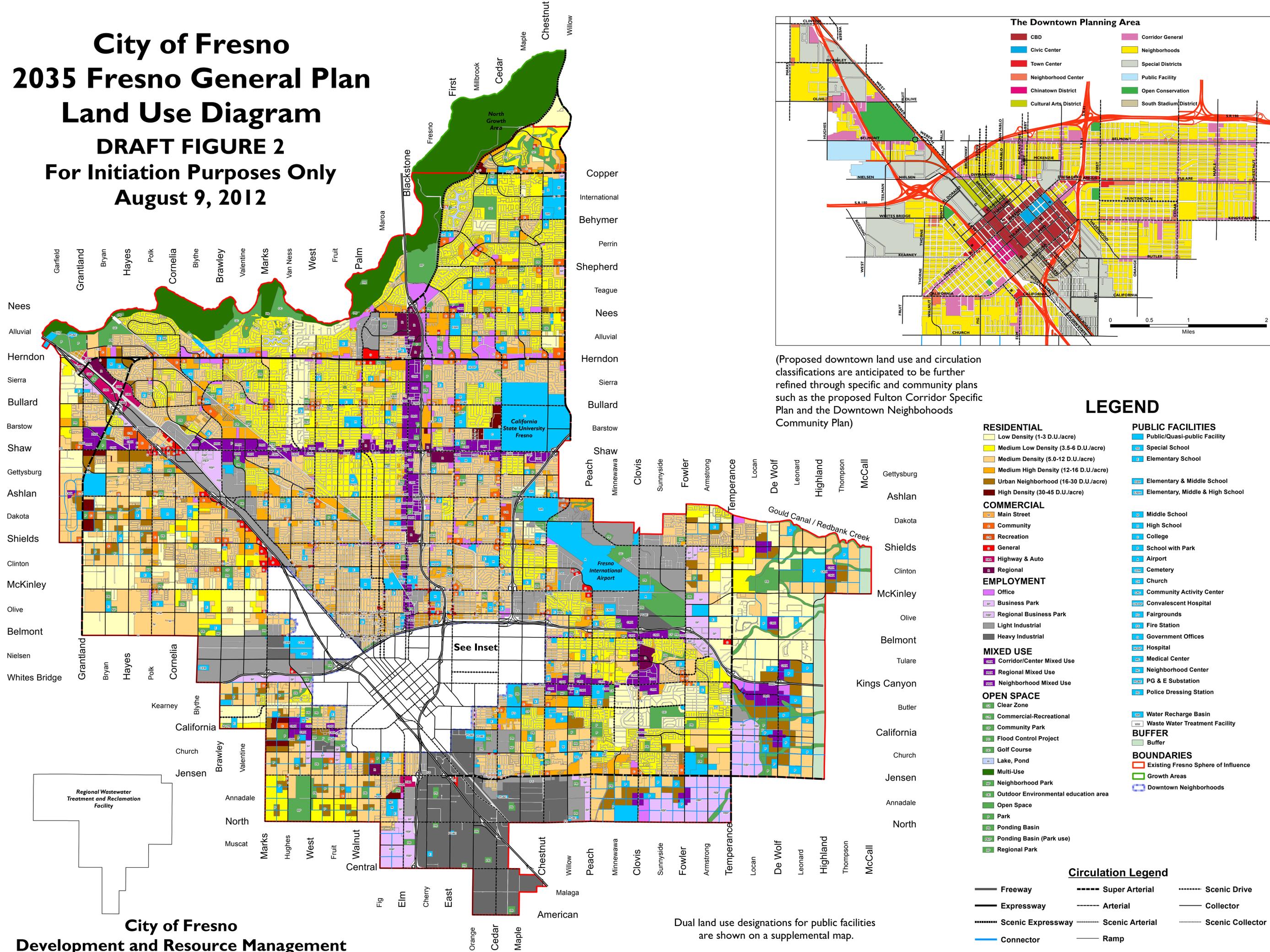
Zoning Ordinance and Zoning Regulations: Presently City of Fresno Municipal Code, Chapter 12, Articles 1,2,3, and 4.5 comprise the “Comprehensive Zoning Ordinance” and can be referred to as “Zoning Ordinance of the City of Fresno”. The present Zoning Ordinance and many other Articles of Chapter 12 will be repealed and replaced by updated Code provisions. Use of these terms should be in reference to old implementing tools to be replaced.

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**APPENDIX B - LAND USE DIAGRAM - FRESNO GENERAL
PLAN**

City of Fresno 2035 Fresno General Plan Land Use Diagram

**DRAFT FIGURE 2
For Initiation Purposes Only
August 9, 2012**



(Proposed downtown land use and circulation classifications are anticipated to be further refined through specific and community plans such as the proposed Fulton Corridor Specific Plan and the Downtown Neighborhoods Community Plan)

LEGEND

- RESIDENTIAL**
 - Low Density (1-3 D.U./acre)
 - Medium Low Density (3.5-6 D.U./acre)
 - Medium Density (5.0-12 D.U./acre)
 - Medium High Density (12-16 D.U./acre)
 - Urban Neighborhood (16-30 D.U./acre)
 - High Density (30-45 D.U./acre)
- COMMERCIAL**
 - Main Street
 - Community
 - Recreation
 - General
 - Highway & Auto
 - Regional
- EMPLOYMENT**
 - Office
 - Business Park
 - Regional Business Park
 - Light Industrial
 - Heavy Industrial
- MIXED USE**
 - Corridor/Center Mixed Use
 - Regional Mixed Use
 - Neighborhood Mixed Use
- OPEN SPACE**
 - Clear Zone
 - Commercial-Recreational
 - Community Park
 - Flood Control Project
 - Golf Course
 - Lake, Pond
 - Multi-Use
 - Neighborhood Park
 - Outdoor Environmental education area
 - Open Space
 - Park
 - Ponding Basin
 - Ponding Basin (Park use)
 - Regional Park
- PUBLIC FACILITIES**
 - Public/Quasi-public Facility
 - Special School
 - Elementary School
 - Elementary & Middle School
 - Elementary, Middle & High School
 - Middle School
 - High School
 - College
 - School with Park
 - Airport
 - Cemetery
 - Church
 - Community Activity Center
 - Convalescent Hospital
 - Fairgrounds
 - Fire Station
 - Government Offices
 - Hospital
 - Medical Center
 - Neighborhood Center
 - PG & E Substation
 - Police Dressing Station
 - Water Recharge Basin
 - Waste Water Treatment Facility
- BUFFER**
 - Buffer
- BOUNDARIES**
 - Existing Fresno Sphere of Influence
 - Growth Areas
 - Downtown Neighborhoods

Circulation Legend

- Freeway
- Expressway
- Scenic Expressway
- Connector
- Super Arterial
- Arterial
- Scenic Arterial
- Ramp
- Scenic Drive
- Collector
- Scenic Collector

Dual land use designations for public facilities are shown on a supplemental map.

APPENDIX C - SELECTED KEY HEALTH INDICATORS FOR FRESNO - FRESNO GENERAL PLAN HEALTHY COMMUNITIES ELEMENT

Table 3-7 below from the Fresno General Plan Update Healthy Communities Working Paper offers a selection of health indicators which could be monitored in Fresno for purposes of evaluating progress toward healthy community goals and objectives.

TABLE 3-7: SELECTED KEY HEALTH INDICATORS FOR FRESNO

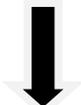
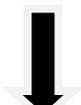
<i>Selected Key Health Indicators</i>	<i>Baseline Condition</i>	<i>Desired Direction</i>
General Health Indicators		
Infant mortality	For Fresno County between 2005-2007 infant mortality was 6.4 per 1,000 live births (Asian/Pacific Islander 5.8, Black 16.8, Hispanic 6.1 and White 5.4)	
Cancer mortality	For Fresno County between 2006-2008 deaths due to all cancers was 127.8 (Age-adjusted 160.7) per 100,000 population	
Diabetes mortality	For Fresno County between 2006-2008 crude death rate due to diabetes was 25.5 (Age-adjusted 32.1) per 100,000 population	
Heart disease mortality	One of the top 10 causes of death in California and top 7 in Fresno County. The 2007-2009 age-adjusted death rate from coronary heart disease was 142 in Fresno County compared to 100.8 per 100,000 population the target set by HP2020. Fresno County is ranked 48 out of 58 California counties for deaths attributed to heart disease. 2007-2009 age-adjusted death rates due to stroke was 51.3, higher than the HP2020 target of 33.8 per 100,000 population.	

TABLE 3-7: SELECTED KEY HEALTH INDICATORS FOR FRESNO

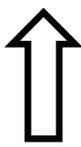
<i>Selected Key Health Indicators</i>	<i>Baseline Condition</i>	<i>Desired Direction</i>
Rates of obesity and overweight among adults and children	<p>For Fresno County in 2005, the percentage of the population that was overweight: Ages 18-64 = 57% Aged 65+ = 65%</p> <p>In the County in 2009, the percentage of overweight children was: Grade 5 = 36% Grade 7 = 38.5% Grade 9 = 33.7%</p>	
Access to Medical-Related Services		
Number of healthcare providers	<p>Number of Physicians in 2010: Primary Care 671 General/Family Practice 271 Internal Medicine 253 Pediatricians 147 Obstetricians/Gynecologists 82 General Surgeons 89 Psychiatrists 75 Specialists 917 Total Physicians 1588 Dentists 474 Hospitals 14 Short-term General hospitals 11 Ambulatory Surgical Centers 19 Community Mental Health Centers 0 Federally-Qualified Health Centers 18</p>	
Index of Medically Underserved (IMU); Health Professional Shortage Area (HPSA) designation	<p>IMU for Fresno is 82.6, national medium is 74.7 HPSA designation is Yes</p>	
Income and Education		
Proportion of population in poverty	25 percent in 2010 and see Figure 2.	

TABLE 3-7: SELECTED KEY HEALTH INDICATORS FOR FRESNO

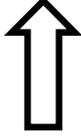
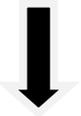
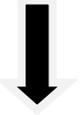
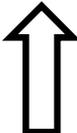
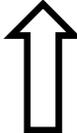
<i>Selected Key Health Indicators</i>	<i>Baseline Condition</i>	<i>Desired Direction</i>
Educational attainments among persons 25 or older	In 2009, of the Fresno population of 268,184 people over the age of 25: 25.6% have no high school diploma; 23.4% have a high school diploma; 23.3% have some college; 21.3% are college graduates and 6.4% have graduate degree. See Figure 3.	
Crime and Perceptions of Safety		
Violent crime rate (number of violent crimes, including murder, forcible rape, robbery, aggravated assault, and simple assault, per capita)	In 2010, there were a total of 3,034 violent crimes committed in Fresno. With the population being 495,913 people for the year, the violent crime rate equals 612 per 100,000 people. (murder rate 9, forcible rape 14, robbery 206, and aggravated assault 383 per 100,000)	
Property crime rate (number of property crimes, including theft, burglary, motor vehicle theft, and arson, per capita)	In 2010, there were a total of 24,607 property crimes committed in Fresno. With the population being 495,913 people for the year, the property crime rate equals 4962 per 100,000 people. (burglary rate 1061, larceny 2953, motor vehicle theft 918, and arson 30 per 100,000)	
Vehicle accident rate (number of injury and non-injury vehicle accidents per capita)	In 2010, the City of Fresno reported 2,951 collisions. This included 1,206 injury collisions and 27 fatalities (249 injuries per 100,000 residents). In 2009, Fresno City total fatal and injury vehicle accidents 270 per 100,000 people. Fresno County total fatal and injury vehicle accidents 536 per 100,000 people.	
Access to Healthy Food		
Percent of residential parcels within 1/4 mile network distance of a supermarket or healthy grocery store	10 percent, or 11,873 residential parcels	

TABLE 3-7: SELECTED KEY HEALTH INDICATORS FOR FRESNO

<i>Selected Key Health Indicators</i>	<i>Baseline Condition</i>	<i>Desired Direction</i>
Number of farmers' market days held in the Planning Area annually	See Figure 5. In 2010, there were 7 Farmers Markets and 3 Neighborhood School Produce Stands (CCROPP) in Fresno	↑
Acres of active community garden or orchard in the city	See Figure 5 In 2010, there were 13 Community Gardens in Fresno	↑
Access to Park and Recreation Facilities		
Percent of residential parcels within 1/4 mile network distance of a public park	In 2010, 40 percent, or 47,760 parcels	↑
Acreage of park land per 1,000 residents	In 2010, 3.2 acres per 1,000 residents	↑

TABLE 3-7: SELECTED KEY HEALTH INDICATORS FOR FRESNO

<i>Selected Key Health Indicators</i>	<i>Baseline Condition</i>	<i>Desired Direction</i>
Access to Active Transportation and Public Transit		
Ratio of miles of shared use paths and bike lanes to miles of streets maintained by the city (excluding limited access highways)	<p>In 2010, there were 134 miles of paths and bike lanes (14 miles of Class I Bike Paths, 113 miles of Class II Bike Lanes and 7 miles of Class III Bike Routes) taken from Table 2.1 of the Traffic Divisions Bicycle, Pedestrian, & Trails Master Plan, 2010.</p> <p>1,600 miles of streets (400 miles of Major Streets which are Collector/ Arterial/ Expressway and 1,200 miles of Local/ Residential) and 91 miles of streets shared with Fresno County. Source: Public Works Dept., Pavement Management System Workshop for the City Council on 7/23/2009</p> <p>Ratio is 1 mile of bike lane or path to every 12 miles of paved road in the City.</p> <p>Public Works Dept Director's (Patrick Wiemiller) Page on City dept. web site states that the department maintains 3,700 lane miles of streets which would make the ratio more like 1 bike/path lane: 30 street lanes</p>	
Ratio of miles of paved sidewalks to miles of streets maintained by the city (excluding limited access highways)	<p>In 2010, the Department maintains 3,000 linear miles of sidewalks. Ratio is then 3,000 miles of sidewalk to 3,700 lane miles of streets which equals 1:1.23</p>	
% of residential and commercial parcels within 1/4 mile network distance of a bus stop	<p>In 2010, 60 percent of residential parcels and 94 percent of commercial parcels</p>	

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