

Planning & Health Terminology Guide for Public  
Health, Environmental Health & Planning  
Professionals in Iowa

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Cross-Sector Collaborations for Health In All Policies  
in Iowa

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## **Foreword**

**This document has been prepared by the project team of the Health in All Planning Policies for Iowa Project. It aims to enhance the conversation and collaboration between the professions of Public Health, Environmental Health and Planning in Iowa, by providing definitions to terminology frequently used by the individual professions. The document also provides examples of cross sector collaborative projects taking place across the State that have a health focus. The Health in All Planning Policies for Iowa Project is supported by the Iowa Cancer Consortium and the Iowa Department of Public Health.**

## **Health in All Planning Policies for Iowa – Project Team**

### **Denise Attard Sacco MPH, CHES**

Denise Attard Sacco is a public health consultant with experience in environmental health regulation, public health education and development planning and control. She received her Bachelor's of Science in Environmental Health (Hons.) from the University of Malta, and her Master's degree in Public Health from Walden University. Ms Attard-Sacco is also a Certified Health Education Specialist. Her areas of interest include projects which utilize the social determinants of health and Health in All Policies as a way to evaluate and bring about changes in health. She has worked in public and environmental health regulation for over 12 years as an Environment Officer with the Malta Environment and Planning Authority (Malta). In the United States Ms Attard Sacco has participated in and provided technical assistance for a number of Health Impact Assessments (HIA) and has worked on community outreach projects such as the Radon Free Homes Initiative with the Iowa Cancer Consortium. She is currently coordinating the Health in All Planning Policies for Iowa project and the Neighborhood Design for Health in the Des Moines 50314 Zip Code project. Ms Attard Sacco serves on the IDPH Active Living Iowa Committee and the AARP DSM Iowa Age-Friendly Community Infrastructure Work Group. She also forms part of the leadership team for the WPHA Health Impact Assessment/Health in All Policies Section, as Communications Officer for the Section.

### **John Peterson P.E., A.I.C.P.**

John Peterson is the CEO and Principal of Peterson Planning Strategies. Peterson Planning Strategies is a community planning and design firm focused on assisting communities in creating plans and policies, then translating them into actionable programs, projects, codes and processes. John is a native of Sioux City, Iowa and obtained his Bachelor of Science degree in Engineering Operations from Iowa State University in 1978. He worked for the City of Ankeny, Iowa following college and served as the Ankeny Planning/Community Development Director from 1985 to June of 2015 when he started his new firm. John is a registered Civil Engineer in the State of Iowa (#10481) and has been a member of the American Institute of Certified Planners since 1985. John is also a past president of the American Planning Association Iowa Chapter (APAIC). He recently received that organizations Distinguished Planner award. John serves at the APAIC Health Liaison and has assisted in adding a "health" sessions track to the past two annual conferences. His latest work is coordinating a APA Plan4Health grant for a physical activity and nutrition project in Linn County, Iowa with the City of Marion and the Hawkeye Area Community Action Program. John has served on the Iowa Department of Public Health (IDPH) Iowans Fit for Life working committee and the IDPH Community Transformation Grant Advisory Committee and now their Active Living Iowa committee. John has also participated as a

speaker in a number of planning and health related webinars and conference sessions connecting and educating planning and health professionals.

**Len B. Novilla, M.D., MPH**

Len Novilla is an Associate Professor in Department of Health Science at Brigham Young University as of 2003. She teaches chronic disease prevention and control at the graduate and undergraduate levels. She has also taught the Maternal and Child Health Issues and Grant Writing classes at the BYU MPH Program and directed the Philippines International Internship Program for the BYU Kennedy Center. Her research interests include the role of the family as a sustaining framework in health promotion and disease prevention; addressing the social determinants of family and maternal and child health and their policy implications; defining the role of the family in addressing health inequities; and focusing on health systems assessment and strengthening within the context of chronic diseases and health disparities. What started as a consultation with the Pan American Health Organization (PAHO) opened opportunities in conducting studies on the impact of the social determinants on the family and on mother and child health. Together with a group of faculty and student researchers, their study entitled, "How Can We Get the Social Determinants of Health Message on the Public Policy and Public Health Agenda? Translating Data into a Social Determinants of Health Information Tool to Inform Policy and Public Health Programs" was selected by the World Health Organization as one of the 28 case studies from around the world that highlighted country experiences on translating the social determinants of health. These case studies were featured in the World Health Organization's website as part of the World Conference on the Social Determinants of Health last October 19-21 2011, in Rio de Janeiro, Brazil.

Len is an elected member of the Alpha Theta Chapter of the Delta Omega National Honorary Society in Public Health. She is a member of the American Public Health Association (APHA)-International Health Section and the Society of Public Health Educators (SOPHE). She currently serves as a commissioner for the Utah Multicultural Commission, appointed by Gov. Herbert last January 2013; Chair of the Health Disparities Advisory Council for the Utah Department of Health Office of Health Disparities Reduction; and as a member of the Executive Committee of the Thrasher Research Fund. She has also served as a member of the Board of Trustees of Timpanogos Regional Hospital and as the former Policy Unit Chair for the Utah Public Health Association (UPHA) Board. Prior to joining BYU, Len was a Senior Research Manager for the Thrasher Research Fund, managing several international and U.S.-based pediatric research grants.

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**Glossary of Planning Terms** <sup>1, 2, 3</sup>

Planning Term	Description
<b>Adaptive Reuse</b>	<ul style="list-style-type: none"> <li>• Converting obsolete or historic buildings from their original use to a new use.</li> </ul>
<b>Annexation</b>	<ul style="list-style-type: none"> <li>• Incorporating a land area into an existing municipality with a resulting change in the boundaries of the annexing jurisdiction. This is the legal process of expanding the boundaries of a municipality and includes several processes, both voluntary and involuntary outlined in State of Iowa Law Chapter 368.</li> </ul>
<b>Brownfield/Greyfield</b>	<ul style="list-style-type: none"> <li>• A Brownfield is an area with abandoned, idle or under-used industrial or commercial facilities where expansion, redevelopment or re-use is complicated by real or perceived environmental contamination.</li> <li>• A Greyfield is an area that is functionally obsolete and prime for redevelopment.</li> </ul>
<b>Building Construction Processes</b>	<ul style="list-style-type: none"> <li>• Most communities have a process for the construction of buildings and/or facilities. Single family homes and duplexes often follow a simpler process than multi-family, commercial or industrial projects.</li> <li>• The small residential project would require a series of permits that include building, plumbing, mechanical and electrical permits and could include sidewalk and driveway/curb-cut permits as well. A plot plan would normally be required showing the location of the home, decks, driveways and sidewalks. This plot plan might also include elevations for finished floors, basement floors and window openings as well as ground elevations for review of proper drainage. Many communities in Iowa use the International Code Council International Codes Series as they relate to the construction of buildings/facilities and local regulations from the communities Zoning Code.</li> <li>• The larger multi-family, commercial or industrial projects would often have a longer approval process that could require approval from the Planning and Zoning Commission and City Council of the community. In addition to building construction plans, these projects often require a site plan</li> </ul>

	<p>which is a detailed set of drawings on all aspects of the project and might include site layout, drainage, parking and walkways, lighting, landscaping, utilities and infrastructure. These plans are often accompanied by traffic and drainage studies and could include lighting studies as well. City staff has several meetings with designers, builders and project owners as the project proceeds through the review process. The requirements that are applied to these projects generally come from the community's Zoning Code, Subdivision or Platting Regulations, Public/Private Infrastructure Regulations and Building Regulations. Many larger communities in Iowa use the Statewide Urban Design and Specifications as their Public Infrastructure Standards. Many City Departments are involved in these large scale project reviews usually including, Planning, Zoning, Building, Engineering, Public Works, Parks and Fire.</p>
<p><b>Complete Streets</b></p>	<ul style="list-style-type: none"> <li>• This concept anticipates that street design accommodates all modes of travel and enables safe access for all users. Pedestrians, bicyclists, motorists, bus riders of all ages and abilities are able to safely move along and across a complete street.</li> </ul>
<p><b>Comprehensive Plan</b></p>	<ul style="list-style-type: none"> <li>• The Comprehensive or General Plan is the foundation for local land use planning. The plan provides a vision for the foreseeable planning horizon- usually 10 to 20 years - and translates a future vision into goals and policies for the physical development of a city or county. All other land use based policies and requirements flow from the comprehensive plan. The comprehensive plan covers all of the land within a jurisdiction and additional land that bears relation to the community's long range vision.</li> </ul>
<p><b>Community Character</b></p>	<ul style="list-style-type: none"> <li>• The image of a community or area as defined by several factors such as built environment, natural features and open space elements, type of housing, architectural style, infrastructure, and the type and quality of public facilities and services.</li> </ul>
<p><b>Community Design/Urban Design</b></p>	<ul style="list-style-type: none"> <li>• The attempt to give form, in terms of both beauty and function, to selected areas or whole cities. Urban design is</li> </ul>

	<p>concerned with location, mass, and design of various components and combines elements of urban planning, architecture and landscape architecture.</p>
<b>Cluster Development</b>	<ul style="list-style-type: none"> <li>• Development in which a number of dwelling units are placed closer together than usual, or are attached, with the purpose of retaining an open space area.</li> </ul>
<b>Mixed Use Development</b>	<ul style="list-style-type: none"> <li>• A property on which/or a building within which various uses like office, commercial, institutional and residential are combined in an integrated development project with significant functional interrelationships and a coherent physical design.</li> </ul>
<b>Neighborhood Plans</b>	<ul style="list-style-type: none"> <li>• A plan that a community may adopt to implement the comprehensive plan in a portion of the community that the community defines as a neighborhood. A neighborhood plan would specify in detail the land uses, public and private facilities needed to support the land uses, phasing of development, standards for the conservation, development, and use of natural resources, and a program of implementation measures, including financing measures.</li> </ul>
<b>New Urbanism</b>	<ul style="list-style-type: none"> <li>• A design philosophy intended to create a strong sense of community by incorporating features of traditional small towns or urban neighborhoods. Compact, walkable neighborhoods with active streets are a key hallmark of new urbanism. The Congress for New Urbanism defines the philosophy according to these principles: “neighborhoods should be diverse in use and population; communities should be designed for the pedestrian and transit as well as the car; cities and towns should be shaped by physically defined and universally accessible public spaces and community institutions; urban places should be framed by architecture and landscape design that celebrate local history, climate, ecology, and building practice.”</li> </ul>
<b>Pedestrian Friendly</b>	<ul style="list-style-type: none"> <li>• A street, neighborhood, or agency that supports, through planning and zoning, the location of stores, offices, residences, schools, recreational areas, and other public facilities within walking distance of each other, and oriented to promote pedestrian access. Such areas also often feature</li> </ul>



	<p>narrow streets, street trees, awnings, covered transit shelters, benches, brick paving or other less conventional paving types, sidewalks on both sides of the roadway, and safe street crossings, among other elements.</p>
<p><b>Planned Unit Development (PUD)</b></p>	<ul style="list-style-type: none"> <li>• Land use zoning which allows the adoption of a set of development standards that are specific to a particular project. PUD zones usually do not contain detailed development standards. Those are established during the process of considering proposals and adopted by ordinance upon project approval.</li> </ul>
<p><b>Platting</b></p>	<ul style="list-style-type: none"> <li>• The division of a tract of land into defined lots, either improved or unimproved, which can be separately conveyed by sale or lease, and which can be altered or developed. The process often includes setting aside land for streets, sidewalks, parks, public areas, and other infrastructure needs, including the designation of the location of utilities.</li> </ul>
<p><b>Road Diet</b></p>	<ul style="list-style-type: none"> <li>• A road diet involves converting an existing four lane undivided roadway segment into a three-lane segment consisting of two through lanes and a center two-way left-turn lane. The reduction in lanes allows the roadway cross section to be reallocated for other uses such as bike lanes, pedestrian refuge islands, transit stops, or parking.</li> </ul>
<p><b>Setback</b></p>	<ul style="list-style-type: none"> <li>• The minimum distance required by zoning to be maintained between two structures or between a structure and a property line.</li> </ul>
<p><b>Site Planning</b></p>	<ul style="list-style-type: none"> <li>• A plan, to scale, showing uses and structures proposed for a parcel of land. It includes lot lines, streets, building sites, public open space, buildings, major landscape features – both natural and man-made – and, depending on requirements, the locations of proposed utility lines.</li> </ul>
<p><b>Smart Growth</b></p>	<ul style="list-style-type: none"> <li>• A broad concept that describes the change in community design from post-World War II development principles to development that better serves the economic, environmental and social needs of communities. The U.S. Environmental Protection Agency identified the following ten principles of smart growth: <ul style="list-style-type: none"> <li>– Mix land uses</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>- Take advantage of compact building design</li> <li>- Create a range of housing opportunities and choices</li> <li>- Create walkable neighborhoods</li> <li>- Foster distinctive, attractive communities with a strong sense of place</li> <li>- Preserve open space, farmland, natural beauty, and critical environmental areas</li> <li>- Strengthen and direct development toward existing communities</li> <li>- Provide a variety of transportation choices</li> <li>- Make development decisions predictable, fair, and cost effective</li> <li>- Encourage community and stakeholder collaboration in development decisions.</li> </ul>
<p style="text-align: center;"><b>Tax Increment Financing</b></p>	<ul style="list-style-type: none"> <li>• A tax incentive designed to attract business investment by dedicating to the project area the new property tax revenues generated by redevelopment/development. The increase in revenues (increment) is used by the governing body (city/county) to finance development-related costs in that district.</li> </ul>
<p style="text-align: center;"><b>Traffic Calming</b></p>	<ul style="list-style-type: none"> <li>• A strategic set of physical changes to streets to reduce vehicle speeds and volumes. It refers to the use of street design techniques, such as curb extensions, widened sidewalks, traffic circles and speed humps, to slow and control the flow of automobile traffic.</li> </ul>
<p style="text-align: center;"><b>Transit-Oriented Development (TOD)</b></p>	<ul style="list-style-type: none"> <li>• Moderate- to higher-density development, located within easy walk of a major transit stop, generally with a mix of residential, employment, and shopping opportunities designed for pedestrians without excluding the auto. TOD can be new construction or redevelopment of one or more buildings whose design and orientation facilitate transit use.</li> </ul>
<p style="text-align: center;"><b>Universal Design</b></p>	<ul style="list-style-type: none"> <li>• Design of buildings, products and environments that are usable and effective for everyone, not just people with disabilities. The Center for Universal Design identifies seven principles of universal design: <ul style="list-style-type: none"> <li>- Equitable use</li> <li>- Flexibility in use</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>- Simple and intuitive</li> <li>- Perceptible information</li> <li>- Tolerance for error</li> <li>- Low physical effort</li> <li>- Size and space for approach and use.</li> </ul>
<b>Urban Renewal Area</b>	<ul style="list-style-type: none"> <li>• Means a slum area, blighted area, economic development area, or combination of the areas, which the local governing body designates as appropriate for an urban renewal project. An Urban renewal plan means a plan for the development, redevelopment, improvement, or rehabilitation of a designated urban renewal area, as it exists from time to time. (Iowa Code Chapter 403)</li> </ul>
<b>Urban Sprawl</b>	<ul style="list-style-type: none"> <li>• The spreading of a city and its suburbs over rural land at the fringe of an urban area. Characteristics of sprawl include single-use zoning that often separates housing from jobs and commercial centers; low-density land use focused on single-family homes; and automobile dependent communities with extensive land devoted to parking that often require residents to commute and conduct errands by car.</li> </ul>
<b>Vehicle Miles Traveled (VMT)</b>	<ul style="list-style-type: none"> <li>• One vehicle traveling the distance of one mile. Total vehicle miles are the aggregate mileage traveled by all vehicles. VMT is a key measure of overall street and highway use. Reducing VMT is often a major objective in efforts to reduce vehicular congestion and achieve air quality goals.</li> </ul>
<b>Zoning</b>	<ul style="list-style-type: none"> <li>• The division of a city or county by legislative regulation into areas, or zones (zoning districts) that specify allowable uses for real property and size and placement restrictions (bulk regulations) for buildings within these areas. Zoning is a tool communities use to implement policies of a general or comprehensive plan.</li> </ul>

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## Glossary of Public Health Terminology

Public Health Term	Description
<p><b>Cross-sector Collaboration</b></p>	<ul style="list-style-type: none"> <li>The linking or sharing of information, resources, activities, and capabilities by organizations in two or more sectors to achieve jointly an outcome that could not be achieved by organizations in one sector separately.<sup>1</sup></li> </ul>
<p><b>Cultural Competency</b></p>	<ul style="list-style-type: none"> <li><b>Cultural competence</b> is the ability of an individual to understand and respect values, attitudes, beliefs, and mores that differ across cultures, and to consider and respond appropriately to these differences in planning, implementing, and evaluating health education and promotion programs and interventions.<sup>2</sup></li> </ul>
<p><b>Environmental Justice</b></p>	<ul style="list-style-type: none"> <li><b>Environmental Justice</b> is the fair treatment and meaningful involvement of all people regardless of race, color, national origin, or income with respect to the development, implementation, and enforcement of environmental laws, regulations, and policies. It will be achieved when everyone enjoys the same degree of protection from environmental and health hazards and equal access to the decision-making process to have a healthy environment in which to live, learn, and work.<sup>3</sup></li> </ul>
<p><b>Health</b></p>	<ul style="list-style-type: none"> <li>A state of complete physical, social and mental well being, and not merely the absence of disease or infirmity.<sup>4</sup></li> </ul>
<p><b>Health in All Policies</b></p>	<ul style="list-style-type: none"> <li><b>Health in All Policies</b> is an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts in order to improve population health and health equity. It improves accountability of policymakers for health impacts at all levels of policy-making. It includes an emphasis on the consequences of public policies on health systems, determinants of health and well-being.<sup>5</sup></li> <li><b>Health in All Policies</b> approaches include five key elements:             <ul style="list-style-type: none"> <li>Promoting health and equity</li> <li>Supporting intersectoral collaboration</li> <li>Creating co-benefits for multiple partners</li> <li>Engaging stakeholders</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>- Creating structural or process change.<sup>6</sup></li> </ul>
<b>Health Disparities</b>	<ul style="list-style-type: none"> <li>• <b>Healthcare disparities</b> refer to differences in access to or availability of facilities and services.<sup>7</sup></li> <li>• <b>Health status disparities</b> refer to the variation in rates of disease occurrence and disabilities between socioeconomic and/or geographically defined population groups.<sup>7</sup></li> <li>• <b>Health disparities</b> are not simply differences in health. The term disparity may connote a difference that is inequitable, unjust, or unacceptable.<sup>8,9</sup></li> </ul>
<b>Health Impact Assessment</b>	<ul style="list-style-type: none"> <li>• Health Impact Assessment (HIA) is a combination of procedures, methods, and tools used to evaluate the potential health effects of a policy, program or project. Using qualitative, quantitative and participatory techniques, HIA aims to produce recommendations that will help decision-makers and other stakeholders make choices about alternatives and improvements to prevent disease/injury and to actively promote health.<sup>10</sup></li> <li>• HIA is composed of six steps: <ol style="list-style-type: none"> <li>1. <b>Screening</b> – Determining whether an HIA is needed and likely to be useful.</li> <li>2. <b>Scoping</b> – In consultation with stakeholders, developing a plan for the HIA, including the identification of potential health risks and benefits.</li> <li>3. <b>Assessment</b> – Describing the baseline health of affected communities and assess the potential impacts of the decision.</li> <li>4. <b>Recommendations</b> – Developing practical solutions that can be implemented within the political, economical or technical limitations of the project or policy being assessed.</li> <li>5. <b>Reporting</b> – Disseminating the findings to decision makers, affected communities and other stakeholders.</li> <li>6. <b>Monitoring and Evaluation</b> – Monitoring the changes in health or health risk factors and evaluating the efficacy of the measures that are implemented and the HIA process as a whole.<sup>11</sup></li> </ol> </li> </ul>
<b>Health Inequalities</b>	<ul style="list-style-type: none"> <li>• <b>Health inequalities</b> can be defined as differences in health</li> </ul>

	<p>status or in the distribution of health determinants between different population groups. For example, differences in mobility between elderly people and younger populations or differences in mortality rates between people from different social classes.<sup>12</sup></p>
<b>Health Inequities</b>	<ul style="list-style-type: none"> <li>• <b>Health inequities</b> are <i>avoidable</i> inequalities in health between groups of people within countries and between countries. These inequities arise from inequalities within and between societies. Social and economic conditions and their effects on people’s lives determine their risk of illness and the actions taken to prevent them becoming ill or treat illness when it occurs.<sup>13</sup></li> </ul>
<b>Health Lens Analysis</b>	<ul style="list-style-type: none"> <li>• <b>Health Lens Analysis (HLA)</b> is an intersectoral, partnership process drawing on public health research methods.<sup>14</sup></li> <li>• It includes the following five essential elements: <ol style="list-style-type: none"> <li>1. <b>Engage:</b> Establishing and maintaining strong collaborative relationships with other sectors. Determine agreed policy focus.</li> <li>2. <b>Gather evidence:</b> Establishing impacts between health and the policy area under focus, and identifying evidence-based solutions or policy options.</li> <li>3. <b>Generate:</b> Producing a set of policy recommendations and a final report that are jointly owned by all partner agencies.</li> <li>4. <b>Navigate:</b> Helping to steer the recommendations through the decision-making process.</li> <li>5. <b>Evaluate:</b> Determining the effectiveness of the health lens.<sup>15</sup></li> </ol> </li> </ul>
<b>Social Determinants of Health</b>	<ul style="list-style-type: none"> <li>• <b>Social determinants of health (SDH)</b> are the conditions, in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems.<sup>16</sup></li> </ul>
<b>Social Justice</b>	<ul style="list-style-type: none"> <li>• <b>Social justice</b> is founded on the notion of shared responsibility and a strong obligation to the collective good. It also heeds the reality of unequal starting positions;</li> </ul>

	everyone is <i>not</i> born equal. It focuses on social conditions and assured benefits (e.g. housing, education, safety). In relation to public health, this places the focus on controlling hazards and changing the environment to prevent disability and premature death through organized collective action. <sup>17</sup>
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## **Iowa Cross Sector Collaborative Projects with a Health Focus**

### **1. Active Living Iowa Initiative**

This collaboration is composed of the [American Planning Association Iowa Chapter](#), the [Iowa Cancer Consortium](#), the [Iowa Statewide Urban Design and Specifications](#), the [Iowa Department of Transportation](#), [Northeast Iowa Area Agency on Aging](#) and the [Iowa AARP](#). The collaboration's goal is to provide assistance to Iowa communities that are working towards making their communities more walkable and bikeable. This Initiative also provides support to the [Iowa DOT Bicycle and Pedestrian Plan](#) which is due to be released in 2016, and to the [Statewide Urban Design and Specifications](#) (SUDAS) as they release complete streets policy standards.

If you would like to learn more about **Active Living Iowa** please contact **Sarah Taylor Watts**, MPA, PAPHS, **Physical Activity Coordinator at the Iowa Department of Public Health**, at **515.242.6709** or on [sarah.taylorwatts@idph.iowa.gov](mailto:sarah.taylorwatts@idph.iowa.gov)

### **2. Food Access and Health Collaborative**

Previously known as the Iowa Food Access and Health Working Group, the Food Access and Health Collaborative is a collaboration that works towards cultivating a diverse and just food system which eliminates hunger, increases access to nutritious foods and improves the health and well-being of all Iowans. It is comprised of a Leadership Team and nonpaying members. The Leadership Team meets eight times a year and includes any volunteer individuals (general public or agency/business representative) interested progressing the Collaborative's objectives. Members consist of a list serve of likeminded individuals interested in staying informed on the Collaborative's activities and progress. Collaborators include private and public sector representatives.

Projects accomplished by the Food Access and Health Collaborative include [Cultivate Iowa](#), the Civic Action Guide (created for the 2014 elections), and [A Guide for Growing Healthier Iowans](#).

The Food Access and Health Collaborative works towards achieving four main objectives through its programs and activities. These are:

- Learning about and understanding the work of all groups engaged in sustainable and just food system across the State of Iowa.
- Working to engage other groups in conversations about food access and health.
- Utilizing the Collaborative's areas of expertise to provide resources and connections on food access and health through a clearinghouse mechanism.

- Continuing to promote Cultivate Iowa.

To learn more about the work of the **Food Access and Health Collaborative** or if you are interested in joining this Collaborative, please contact **Mr. Cory Berkenes, State Director, Iowa Food Bank Association** on [cberkenes@iowafba.org](mailto:cberkenes@iowafba.org)

### **3. Healthy Homes East Bank**

Healthy Homes East Bank is a collaborative effort that aims to minimize clinic and hospital visits related to pediatric asthma in the East Bank area of Des Moines, Iowa. Neighborhoods targeted by the project include Capitol East, Capitol Park, and the Martin Luther King Jr Park neighborhoods. The program provides services free of charge to eligible families, including home repairs to address the source of allergens and tailored health education outreach on asthma self-management.

This collaboration is composed of the [Polk County Housing Trust Fund](#), the [Polk County Health Department](#), [Mercy Medical Center](#), [Broadlawns Medical Center](#), [UnityPoint Health](#), the [City of Des Moines](#), [Viva East Bank](#), the [Mid-Iowa Health Foundation](#), [Visiting Nurse Services of Iowa](#), [Polk County Public Works](#), and the [Des Moines Public Schools](#).

The project is funded by the [BUILD Health Challenge](#), an initiative that encourages communities to build partnerships between hospitals, health systems, community-based organizations, and local health departments to engage in upstream approaches aimed to improve the health of and promote health equity in the communities they serve.

To learn more about this initiative as well as program eligibility please contact **Ms Claire Richmond, Healthy Home East Bank Project Manager** on **515-282-3233** or by email at [crichmond@pcht.org](mailto:crichmond@pcht.org) or visit [Healthyhomeseastbank.org](http://Healthyhomeseastbank.org)

### **4. Healthy People, Healthy Places**

The “Healthy People Healthy Places” Advisory Team (HPPAT) is a partnership among state, county, municipal, academic, business and not-for-profit agencies and organizations, all focused on public health and well-being. The team meets six times a year to share research, discuss partnerships, review initiatives and find ways to advocate for healthy place-making.

Established in 2011, the team works with state, community and business leaders to create a baseline of understanding on how the built and natural environment influence public health and well-being. The power of this effort is in creating a public-private partnership for the research and advocacy of healthy place-making.

Statewide strategic planning, community planning, park planning and site planning/design have been influenced by the Healthy People Healthy Places Advisory Team, which has had three

interns (two graduate students and one current professional) conducting surveys, researching, and writing. The HPHPAT partnered with the [Urban Land Institute](#), [AARP](#), and the [Greater Des Moines Partnership](#) to initiate and help organize a public conference on healthy place-making this last fall at the Botanical Gardens in Des Moines Iowa.

**Vision:** Healthy people, healthy places

**Mission:** Partnering to promote a healthy community, economy and environment

**Methods:** Policy consultation, research, planning and design

The Healthy People Healthy Places partnership has worked on several projects throughout the state of Iowa and beyond. One of the highest impact projects was the Strategic Plan for Iowa State Parks.

### **The Strategic Plan for Iowa State Parks: *Parks to People***

***Parks to People*** was a planning effort that forged partnerships with state, county, and municipal park providers while engaging leaders of industry to chart a course for future investment in parks of significance throughout Iowa. During the planning process, members of the Healthy People Healthy Places Advisory Team facilitated this effort and involved public health professionals from [Des Moines University](#), the [Iowa Department of Public Health](#) and representatives from the [Iowa chapter of AARP](#). These public health professionals, working with the lead consulting firm [RDG Planning & Design](#), the [Governor](#), the Governor's appointed Green Ribbon Commission and members of the [Iowa Parks Foundation](#), worked to develop a Strategic Plan that focused on five emerging themes:

- Connections
- Great Spaces, Great Experiences
- A Lasting Legacy
- Community & Cultural Vitality
- Healthy Parks, Healthy People

This plan was endorsed by Governor Branstad in 2014. It now serves as the catalyst for six (and growing) self-organizing regions in Iowa working – often for the first time - across jurisdictional boundaries with state, county, municipal and industry leaders, creating plans for park investment in the 21<sup>st</sup> Century. At least 15 counties have been engaged thus far.

These regions are each currently using the five themes born out of the *Parks to People* plan.

The end result will be regional and local plans accounting for substantial investment in park, trail, greenways and community improvements. The first regional plan identified \$20 million of commitment required. In each of these planning and implementation efforts, public health and wellbeing are infused into the core of each project.

In 2012 the Iowa Parks Foundation hired RDG Planning & Design, a multipurpose design firm, to lead this statewide strategic planning effort. The Iowa Parks Foundation was originally chaired

by Governor Branstad and former Congressman Neil Smith. While they remain as honorary chairs, IPF is currently chaired by Business Leaders Joe Gunderson and Bob Riley. Other IPF planning committee members include:

- Mark Ackleson, President Emeritus, Iowa Natural Heritage Foundation
- Mark Doll, Doll Distributing
- David Johnson, Meredith Corporation
- Eric Branstad, Matchpoint Consulting
- Onnalee Kelley, Berkshire Hathaway Energy

To learn more about the Parks to People project, please contact **Mike Bell, Landscape Architect**, or **Pat Boddy, Sustainability Strategist**, at **RDG Planning and Design** on **515-282-3141**.

## **5. ISU Community Design Lab - Agricultural Urbanism Toolkit**

The Community Design Lab works to develop and design sustainable and healthy community projects in cities and counties across the state of Iowa. The Community Design Lab is a partnership between the [Iowa State University College of Design](#) and the [Office of Extension and Outreach](#). It encompasses many fields of expertise including landscape architecture, architecture, sustainable agriculture, community and regional planning, and community engagement.

The Community Design Lab works to develop and design sustainable and healthy community projects in cities and counties across the state of Iowa. This is achieved through partnering with communities and organizations, thus providing opportunities to combine local knowledge and design research expertise to create equity and resilience through inclusive, transferable, innovative strategies and tactics.

The work of the Community Design Lab covers three main focus areas. These include: Health and Wellness, Infrastructure and Community Revitalization. Health and Wellness projects focus on public space networks, complete streets, inclusive design, agricultural urbanism, and trail systems. One particular example of such projects is the Agriculture Urbanism Toolkit – a multi-phase process that promotes public interest design for food system development through engagement with community leaders, leading to a holistic design incorporating community values around food.

Infrastructure projects include district energy systems, stormwater management projects, affordable housing projects, community gardens, public markets, and Streetscape systems. One such project is the 6th Avenue Corridor: Des Moines. For this project the Community Design Lab has partnered with the 6th Avenue Corridor Inc., a non-profit dedicated to the promotion and revitalization of the neighborhoods along the avenue. This project focuses on three main areas: building and property assessment, green infrastructure solutions for

stormwater management and environmental health, and parking availability and usage assessment.

Community Revitalization projects examples include economic revisioning, identity articulation, disaster recovery and mitigation, implementation strategies, and community collaborations. One particular example is the Waukon Works project. For this project the Community Design Lab partnered with the Waukon Works Team to develop a strategic vision for Waukon, Iowa. This strategic vision is composed of six key goals as follows: Increase community engagement, sustain and grow the economy, revitalize downtown, improve built and technological infrastructure, build upon and retain existing strengths and assets, and promote Waukon as an attractive destination.

To learn more about the Community Design Lab and their work please visit their website at <http://research.design.iastate.edu/communitydesignlab/> or contact:

- Co-Directors: **Carl Rogers** ([rogersc@iastate.edu](mailto:rogersc@iastate.edu)) and **Nadia Anderson** ([nanderso@iastate.edu](mailto:nanderso@iastate.edu))
- Agricultural Urbanism: **Courtney Long** ([court7@iastate.edu](mailto:court7@iastate.edu))
- Design Fellow: **Chad Hunter** ([cahunter@iastate.edu](mailto:cahunter@iastate.edu))

## **6. Northeast Iowa Food & Fitness Initiative**

The Northeast Iowa Food & Fitness Initiative (NEIFFI) is a regional collaborative of community members and organizations working together to create greater access to healthy, locally grown foods and active living opportunities in Northeast Iowa. The NEIFFI serves more than 100,000 people across six counties.

The collaborative is composed of a number of core partners including the [Iowa State University Extension & Outreach](#), [Luther College Center for Sustainable Communities](#), [Northeast Iowa Community College](#), [Upper Explorerland Regional Planning Commission](#), and the [Community Foundation of Greater Dubuque](#).

The major funder providing long-term backbone support for policy, system and environmental policy changes that address access to healthy food and physical activity is the [WK Kellogg Foundation Food & Community Program](#). Supporting partners include a diverse representation of regional public schools and early childhood providers, producers, the [Iowa Food Hub](#), the [Iowa Bicycle Coalition](#), Public health, and the [Northeast Iowa Funders Network](#), [Northeast Iowa Business Network](#) and many other community partners.

The NEIFFI's work focuses on following four key strategies

- **School Wellness and Outreach.** Under this strategy area the NEIFFI partners with schools to

establish district-wide wellness policies and practices that support healthy living of children, families and community members focused on the **increased access to:** healthy food in schools - including creating procurement policies that allow for geographical preference of local foods in schools – and physical activity – before, during and after the school day.

- **Early Childhood.** Work in this strategy focuses on ensuring that caregivers and parents of children from birth to age five have the opportunities and resources to provide health-promoting food and active play for children within their charge. Activities include regional Head Start and Early Childhood programs, Farm to Preschool programs, grocery store tours and interactive cooking demonstrations for parents and families, community outreach via the distribution of informative newsletters, as well as integration of increased physical activity in this setting.
- **Food systems.** This strategy focuses on ensuring that local, health-promoting food is available and affordable in all communities, neighborhoods and institutions across the region. This includes investing in new and existing food producers, with capacity building and networking, as well as the development of aggregation, storage and distribution capabilities for local foods in schools, worksites and institutions. The work of the Iowa Food Hub is advancing the procurement of local food and increasing access for schools and communities in this region.
- **Active Living/Safe Routes to School.** This strategy focuses on engaging and educating people to use the natural and built environment for physical activity, play and active transportation, with an emphasis on children and their families. A priority area in the long-term is the development and maintenance of infrastructure that supports walking and bicycling to and from schools, the operation of Walking School Buses, participation in safety events such as bike rodeos and community-based Safe Routes to School coalitions across the 6 county region of Northeast Iowa.

To learn more about the **Community Design Lab and their work** please visit their website at <http://www.iowafoodandfitness.org/> or contact **Ann Mansfield** at [mansan01@luther.edu](mailto:mansan01@luther.edu) or **(563) 382-2949**.

## **7. Partnership for Better Health**

The Partnership for Better Health (PBH) is a network of health care organizations, providers, advocates and consumers dedicated towards lowering the cost of care through prevention, intervention and innovation. The PBH works to educate the public, inform policy makers and engage political candidates about the need to invest in health to save on health care.

**PBH partners include 66 Iowa organizations and these are:** The [ALS Association Iowa Chapter](#); the [Alzheimer’s Association Greater Iowa Chapter](#); the [American Cancer Society](#); the [American](#)

[Diabetes Association](#); the [American Federation of State, County and Municipal Employees \(AFSCME Iowa\)](#); the [American Heart Association](#); the [American Lung Association in Iowa](#); the [Arthritis Foundation Iowa Chapter](#); [AstraZeneca](#); the [Brain Injury Alliance of Iowa](#); [Broadlawn Medical Center](#); the [Clean Air for Everyone Citizens Action Network \(CAFE\)](#); the [Community Health Charities of Iowa](#); the Community HIV/Hepatitis Advocates of Iowa Network (CHAIN); the [Cystic Fibrosis Foundation of Iowa](#); the [Des Moines Area Community College](#); [Des Moines University](#); the Des Moines Women Heart; the [Easter Seals of Iowa](#); the [Epilepsy Foundation of North Central Illinois, Iowa and Nebraska](#); the Family Planning Council of Iowa; the [Free Clinics of Iowa](#); [GlaxoSmithKline](#); the [Iowa Academy of Nutrition & Dietetics](#); the Iowa Alliance for Retired Americans; the Iowa Alliance of YMCAs; the [Iowa Association of Area Agencies on Aging](#); the [Iowa Association for Health, Physical Education, Recreation and Dance \(IAHPERD\)](#); the [Iowa Bicycle Coalition](#); the [Iowa Biotech Association](#); the [Iowa Cancer Consortium](#); the [Iowa Care Givers Association](#); [Iowa Chiropractic Society](#); the Iowa Counties Public Health Association (ICPHA); the [Iowa Family Caregiver](#); the [Iowa Farmers Union](#); the [Iowa Nurses Association](#); the [Iowa Occupational Therapy Association \(IOTA\)](#); the [Iowa Osteopathic Medical Association \(IOMA\)](#); the [Iowa Pharmacy Association](#); the [Iowa Physical Therapy Association](#); the [Iowa Primary Care Association](#); the [Iowa Public Health Association](#); the [Iowa Rural Health Association](#); the Iowa State Grange; the [Iowa Tobacco Prevention Alliance](#); the [Leukemia and Lymphoma Society, Iowa Chapter](#); the [Live Healthy America](#); the [Live Healthy Iowa](#); the [Lupus Foundation of Iowa](#); [Mercy Medical Center](#); the [Meridian Health Plan](#); the [National Federation of Independent Business](#); the [National Multiple Sclerosis Society, Upper Midwest Chapter](#); the [Palmer College of Chiropractic](#); the [Polk County Medical Society](#); the [Positive Iowans Taking Charge](#); the [Prevent Blindness Iowa](#); the [State Hygienic Laboratory at The University of Iowa](#); [Stroke Detection Plus](#); the [Susan G. Komen for the Cure – Iowa Affiliate](#); [UnityPoint Health](#); the [University of Iowa College of Public Health](#); the [US Too Greater Quad Cities Prostate Cancer Support Group](#); the [Visiting Nurses Services of Iowa](#); [Wellmark Blue Cross and Blue Shield](#).

### **PBH Focus Areas**

- **Health Care Reform.** The PBH's goal under this focus area is to address lowering the cost of health care through prevention, intervention and innovation. Activities include outreach to and providing educational opportunities for candidates that seek or hold political office on the importance of investing in prevention, intervention and innovation opportunities as a means to improve health outcomes for all Iowans. In this respect the PBH works to educate and inform all candidates regardless of political affiliation. The PBH also provides training opportunities for its partners on grassroots advocacy and the skills required to engage in effective communication with policy makers.
- **Policy Collaboration.** The PBH supports policies that will address the growing epidemic of chronic disease, including those that empower individuals to actively manage and improve



their health by providing them with the tools and incentives to succeed, and policies that support public and private research and encourage partnerships to fuel medical advances in prevention and treatment of chronic diseases, to name a few. **The PBH also provides support to its partner organizations for community programs and events that address chronic disease prevention.**

- **Outreach and Building Healthy Communities.** This is achieved by providing educational outreach through participation in events such as the Iowa State Fair, Rebalancing Health Care in the Heartland, Hy-Vee Triathlon and Quad Cities Marathon, to raise awareness about chronic disease and personal health. It has also partnered with several States, including Wisconsin, North Carolina and Pennsylvania, to spread the message beyond the borders of Iowa.

To learn more about the Partnership for Better Health and their work please visit their website at <http://partnershipforbetterhealth.org/> or email [partnershipforbetterhealth@gmail.com](mailto:partnershipforbetterhealth@gmail.com). PBH can be reached by telephone at **515.471.1954**.

## **8. Planning Healthy Iowa Communities**

Planning Healthy Iowa Communities is a collaboration of the [Iowa Public Health Association](#) (IPHA) and the [American Planning Association Iowa Chapter](#) (APA-IA) that dates back to 2010. Representatives of the two organizations have worked together on a number of initiatives related to active living, healthy food and promoting Health in All Policies (HiAP). HiAP identifies how decisions in multiple sectors or policy areas affect health, and how better health can, in turn, support the goals of these sectors. Public Health is a key partner in APA-IA efforts as represented by the IPHA and supported by the American Planning Association Planning and Community Health Center. Outreach efforts specifically target other physical design and health related organizations.

The most recent collaboration represents an effort to bring together a variety of statewide organizations to assist in encouraging healthy community design and healthy food by expanding on the work of two supported projects in Linn County. These include a physical activity project for Marion, Iowa and a healthy foods project for food pantries in Cedar Rapids supported by the [Hawkeye Area Community Action Program](#) (HACAP). This new work is being funded by a grant from the [American Planning Association](#) and the [American Public Health Association](#) Plan4Health collaboration.

The City of Marion project will create Active Living Standards, Active Transportation Standards and Biophilic Design Standards for the City. The project will create a template which can be used by other communities, accompanied by specific applications for the City of Marion. The Hawkeye Area Community Action Program project will develop a Food Pantry Directors'

Training Manual as a resource for use across Iowa and the U.S. to assist in combating food insecurity through healthier food choices for families using food pantries. The HACAP project also includes specific training for food pantry directors in Cedar Rapids, Iowa and a food access element that will map area food pantries to analyze their accessibility to community members in need.

The Plan4Health grant-funded projects serve residents of Marion, Iowa, Cedar Rapids, Iowa and potentially all of Linn County. The Statewide Collaboration between APA-IA and IPHA could ultimately reach across Iowa.

The collaboration goals specific to the two projects in Linn County are to provide active living options as the first choice for the residents of Marion and to provide healthier food options for residents of Cedar Rapids. The Statewide Collaborations seek to create a common collection of tools and resources that can be used and shared by other statewide organizations in expanding Health in All Policies.

To learn more about the **Planning Healthy Iowa Communities** initiative, please contact **Mr John Peterson, Founder and CEO of Peterson Planning Strategies, APA-IC representative on 515-401-0485** or at [ankpetej@gmail.com](mailto:ankpetej@gmail.com), or **Ms Jeneane Moody, Executive Director IPHA on 515-491-7804** or at [iowapha@gmail.com](mailto:iowapha@gmail.com)

## **9. Regional Collaboration with Community Health Initiatives/Efforts Focused on Healthy Eating and Physical Activity**

This collaboration is being led by the **NE Iowa Food and Fitness Regional Leadership Council** and core partners including the [Iowa State University Extension & Outreach](#), [Luther College Center for Sustainable Communities](#), [Upper Explorerland Regional Planning Commission](#), [Northeast Iowa Community College](#), and the [Community Foundation of Greater Dubuque](#). Additional project partners include NE Iowa schools in the six counties - School wellness, school nurses; the NE Iowa Early Childhood community - HeadStart classrooms and nurses; NE Iowa Public Health offices and eight Community Hospitals across 6 counties.

Planning efforts conducted by the Northeast Iowa Food & Fitness Initiative (FFI) over the past 18 months as part of its work to sustain its efforts beyond the initial backbone funding provided by the of W.K. Kellogg Foundation (2016), have highlighted the importance of engaging regional community health stakeholders including: school nurses, public health and community hospitals in an ongoing collaborative effort to increase access to local, healthy food and physical activity for children, families and community members in the Northeast region of Iowa.

Feedback received from community members during community forums conducted in the Spring of 2015 to update communities and broaden engagement in FFI's efforts, revealed that

more communication and outreach was required to broadcast the Initiative's work and its positive impacts on health. A need to recruit additional stakeholders was also recognized.

In addition, results from the Summer 2015 School BMI project conducted as part of the FFI, and in which ten schools from Northeast Iowa participated, revealed that children's BMI (Preschool and K-8) remains above the national average - 40% of K-8 children are overweight or obese, 20% are obese. This will have significant long term health implications for children living in the Northeast region of Iowa.

Community hospitals are currently preparing to address the shift in reimbursement changes with the Affordable Care Act in 2016 and the requirement for the Community Benefit in addition to initiating community health needs assessment processes for 2016. Discussions held between the FFI and county public health departments and community hospitals in August and September 2015 have identified that there is interest in regional collaboration to address childhood and adult obesity focused on access to and promotion of healthy food and physical activity. As a result the FFI in collaboration with the **Luther College Center for Sustainable Communities** shall be convening and hosting a regional meeting for school nurses, public health, community hospitals, FFI Core partners and the FFI Regional Leadership Council to explore the interest, potential and readiness for regional collaboration. This meeting is due to be held on December 2<sup>nd</sup> 2015 at Luther College.

To learn more about the plans for regional collaboration, please contact Ann Mansfield - on behalf of FFI Leaders & Core Partners - at [mansan01@luther.edu](mailto:mansan01@luther.edu) or **(563) 382-2949**.

## **10. Regional Nutrition and Physical Activity Networking**

This initiative is a collaboration between the [Iowa Association of Regional Councils](#), the [Iowa Department of Public Health](#) (IDPH) and individual Councils of Government. The initiative's goal is to create regional nutrition and physical activity networks, with an emphasis on physical activity and access to fruits and vegetables. This is being achieved through enhancing collaboration between communities and councils of governments, and by encouraging communities to implement at least one strategy for physical activity and one for nutrition. Objectives at the local community level include the creation of local steering committees, setting up of asset mapping processes, and drafting and implementation of action plans. The implementation of these action plans is funded by the IDPH.

To learn more about this program or to become engaged in your local initiative, please contact **Marybeth Foster, Executive Director, Iowa Association of Regional Councils**, on **515-777-0487** or at [mbfoster@iastate.edu](mailto:mbfoster@iastate.edu) or visit [www.iarcog.com](http://www.iarcog.com)

## 11. Sun Safety & Minor League Baseball

The **Iowa Cancer Consortium** has partnered with a number of **Iowa's Minor League Baseball Teams** to promote and encourage protective behaviors from sun/ultraviolet exposure at stadiums during spring and summer minor league baseball games. Project partners include, the [Iowa Cancer Consortium](#), [the Iowa Cubs](#), the [Cedar Rapids Kernels](#), the [Clinton Lumber Kings](#), the [Burlington Bees](#), the [Quad-Cities River Bandits](#), the [Iowa Department of Public Health](#), the [Mercy Cancer Center](#) (Des Moines), the [Iowa Health System](#) (Unity Point Health) (Des Moines), the [Helen G. Nassif Community Cancer Center](#) (Cedar Rapids), the [Hall-Perrine Cancer Center](#) (Cedar Rapids), the [Mercy Medical Center](#) (Clinton), the [Medical Associates](#) (Clinton), and the [Genesis Health System](#) (Davenport).

In addition to providing sunscreen, many teams have partnered with local medical centers to provide further sun-safety educational activities including a free skin cancer screening day at the ballpark, sun-safe activities for youth, and as well as sun-safe giveaway items.

To learn more about this program as well as possible future collaborations please contact **Ms Allie Bain, Outreach Specialist at the Iowa Cancer Consortium** on **319-335-4609** or by email at [abain@canceriowa.org](mailto:abain@canceriowa.org) or visit <http://canceriowa.org/SunSafetyMinorLeagueBaseball.aspx>

## 12. The Health Promotion and Chronic Disease Control Partnership

This partnership is a CDC cooperative agreement which provides funds for the following projects

- **I-Walk – Iowa Walkability Program**

I- Walk, which is administered by the [Iowa Department of Public Health](#) (IDPH) and [Iowa State University Extension and Outreach](#) (ISUE), assists community coalitions in their implementation and evaluation of community walking plans. The program, which started as a Safe Routes to School data collection and planning pilot project in 12 Iowa schools in 2010, employs mapping technologies and global positioning systems (GPS) to map walking routes to various community destinations including schools. The program also assists communities to identify and address walkability barriers and hence make their neighborhoods more pedestrian friendly. To date 43 I-Walk projects have been conducted across Iowa. In 2016 the IDPH and ISUE shall be providing technical assistance to 2 Iowa Area Agencies on Aging (AAAs) to implement I-WALK walkability assessment results. The AAAs shall be responsible for coordinating local workshops to revisit their final I-WALK report, together with Iowa State University Extension and Outreach (ISUE), key city officials and decision makers. I-WALK final reports and GPS maps will be utilized to identify specific implementation goals. Policy implementation will also be highly encouraged. The

IDPH and ISUE shall also be providing communities with ongoing assistance as they implement identified goals.

To learn more about the **I-Walk** project, project partners and communities that have been engaged through this program please access the following weblink

<http://www.i-walk.org/>

- **Walking clubs**

The IDPH is contracting with 4 Iowa Area Agencies on Aging (AAAs) to coordinate Fresh Conversations walking clubs with the goal of increasing the number of older adults in Iowa that engage in walking. The program will partner and work with the [Supplemental Nutrition Assistance Program \(SNAP\) Education](#) program and the AAAs, to organize coalitions and volunteers to implement walking clubs for a minimum of 20 days.

- **Implementation of Complete Streets Policies**

The IDPH is partnering with and providing funds for the Des Moines Metropolitan Planning Organization (MPO) to conduct educational outreach on and to encourage the adoption of complete streets policies in 17 cities and four counties (Dallas, Madison, Polk and Warren counties) that form part of the Des Moines MPO. Through this project the IDPH shall be providing active living workshops for the MPOs organization staff and members on design standards guidelines for complete streets and facilities that are suitable for bicyclists and pedestrians. This project is also being funded by the [Wellmark Foundation](#). Additional project partners include the [Polk County Health Department](#) and the [Dallas County Health Department](#), and as well as the city and county administrative departments that fall within the MPOs jurisdiction. To learn more about this project and the adoption of complete streets policies, please visit <http://dmampo.org/complete-streets/>

If you would like to learn more about the **Health Promotion and Chronic Disease Control Partnership** and associated projects please contact **Sarah Taylor Watts**, MPA, PAPHS, **Physical Activity Coordinator at the Iowa Department of Public Health**, at **515.242.6709** or on **sarah.taylorwatts@idph.iowa.gov**

