The Planner's Playbook

A Community-Centered Approach to Improving Health & Equity

ChangeLab Solutions

Contents

Key terms

Community: a group of people who are located in a particular geographic area, or a group of people who share a common identity or characteristic but might not be located in a single geographic area.

Community building: an approach to engaging residents and local organizations in order to improve community functioning and ultimately help residents solve problems and achieve collective goals. Unlike traditional programs and services, which direct interventions to the individual, community building is an engagement process for building social capital and the community's investment in its own future.[1]

Community engagement: a set of activities that government institutions — such as local government agencies — use to engage communities in public discussions or to inform public policy or planning decisions. Common examples include holding public hearings or community workshops, conducting surveys or interviews, and posting notices or flyers in newspapers or other media sources or in common public spaces like libraries or post offices.

Community organizing: mobilizing community residents, other community stakeholders, or diverse population groups to solve common problems or achieve goals collectively.[2]

Community resilience: a community's ability to utilize available resources, assets, and strengths to respond to, withstand, and recover from adverse situations, traumas, and chronic and acute stressors.[3]

Community trauma: pervasive current and historical trauma experienced cumulatively that results from daily stressors, like violence and concentrated poverty, as well as structural disadvantage due to racism and disenfranchisement. Historical trauma — a legacy of racism, residential segregation, and systematic oppression — exacts its toll on residents' emotional and physical well-being. These traumas cause chronic stress and can overwhelm residents' abilities to cope.[4]

Decisionmakers (aka *policymakers*): individuals and governmental bodies comprising government staff, officials, elected representatives, and appointed members who can exercise governmental powers and decisionmaking authority within a city or community. In the realm of planning, these individuals and governmental bodies include city or town councils, planning boards and commissions, county councils, city or town manager, planning director, mayor or county executive, and others.

Equity: just and fair inclusion in a society so that all can participate, prosper, and reach their full potential.[5] Equity is different from equality. Equity involves people having what they need to enjoy full, healthy lives. In contrast, equality aims to ensure that everyone gets the same things, no matter their starting place. However, different groups of people — based on race, ethnicity, gender, immigration status, sexual orientation, or socioeconomic status — may need different types or amounts of resources and supports to enjoy full, healthy lives. Like equity, equality aims to promote fairness and justice, but it can only work if everyone starts from the same place and needs the same things.[6]

In this resource, we also define equity in terms of three dimensions: procedural equity, structural equity, and distributional equity. *Procedural equity* occurs when public decisionmaking processes are transparent, accessible, fair, and inclusive. *Structural equity* is when government institutions and systems have the processes, practices, and policies to operationalize equity in how they function and make decisions. *Distributional equity* occurs when there is an equitable distribution of resources, community burdens, and benefits.

Health: a state of complete physical, mental, spiritual, cultural, and social well-being, not merely the absence of disease or infirmity.[7,8]

Health equity: a state in which everyone has the opportunity to attain their full health potential and no one is disadvantaged in achieving this potential because of social [or economic] position or any other socially defined circumstance.[9]

Health inequities: unjust and avoidable differences in health associated with individual or group-specific attributes (eg, income, education, race/ethnicity) that are connected to social disadvantage and historical and contemporary injustices and that can be minimized through changes to policies, programs, and practices.[10,11]

Inclusion: the act of creating an environment in which any individual or group can be and feel welcomed, respected, supported, and valued in full participation.[12] Inclusion also involves authentically bringing traditionally excluded individuals or groups into processes, activities, and decisions or policymaking in a way that shares power.[13]

Long-range plans (aka *plans*): documents that establish a community's vision or goals and include a set of strategies, policies, and other interventions intended to shape the patterns, design, and function of that community in ways that will meet future needs. Long-range plans typically have planning horizons of 10 to 20 years or more and are generally adopted by a governmental body such as a town or city council, county council, planning commission, or board of supervisors.

Planner: an employee of a local, regional, or state government or agency who engages in the planning, design, or regulation of one or more elements of their community; or a private consultant or researcher who supports that work.

Planning (aka *city and regional planning, community planning, regional planning, urban planning, urban design, long-range planning, land use and transportation planning, advance planning*): the process a planning agency or local government uses to determine how neighborhoods, cities, or counties are organized and the resources available to residents.[14] Plans are produced as an outcome of planning. Planning is also a set of actions that we, as a society, do collectively to shape the pattern, design, and function of human settlements.[15] Planning shapes both the social and built environments of communities. Planning also typically refers to a set of public institutions that are charged with forecasting a community's future needs (eg, land use, infrastructure, systems, social services, economic development) and working together to develop a vision, goals, strategies, and policies to meet those needs. Typical departments that participate in planning include planning, housing, transportation, public works, engineering, community and economic development, building services, redevelopment, parks and recreation, and the city manager's office. Additional agencies that participate in planning include public health, regional planning organizations, county agencies, housing authorities, regional special purpose agencies (such as air and water quality agencies), and community development corporations.

Power: access to resources and decisionmakers as well as the ability to influence others and to define reality for oneself and, potentially, for others. Power is our ability, as individuals and as communities, to produce an intended effect.[16,17]

Priority population (aka *priority community*): a subset of a community that is experiencing social and health inequities, is or has been chronically underserved by systems and institutions, and has been or continues to be marginalized due to poverty, structural racism, or other factors. Priority populations include but are not limited to Black, Indigenous, and other people of color; low-income communities; recent immigrant and refugee communities; LGBTQIA communities; people whose first language is not English; and returning citizens who were previously incarcerated.

Social capital: social networks of people with shared norms, values, activities, and understanding that facilitate cooperation, mutual aid, and social connection within and among group members.[18] Ways to build social capital include engaging in civic activities like volunteering in the community or actively participating in associations and groups — like PTAs, community groups, religious groups, sporting teams, and clubs — or communal activities. Communities with high levels of social capital are likely to have lower crime, higher educational achievement, better health outcomes, and better economic growth.[19]

Social cohesion: the strength of relationships and the sense of connectedness, cooperation, and solidarity among members of a community.[20]

Social determinants of health: the cultural, social, political, economic, ecological, and physical settings and circumstances that affect our health by shaping where and how we live, work, learn, and play. They determine our daily experiences, our physical and emotional well-being, how long we live, and our ability to change the quality and course of our life.[21,22,23,24]

Structural disadvantage: the disadvantage experienced by some individuals, families, groups, or communities as a result of the way society functions (how resources are distributed, how people relate to each other, who has power, how institutions are organized).[25]

Structural racism (aka *systemic racism*): the history and current reality of differential access to goods, services, and opportunities by race. It is structural, meaning that it is often codified in our institutional practices, norms, policies, and laws. Institutions and organizations that produce structural racism include schools, businesses, and government agencies, which adopt and maintain policies and practices that routinely produce racial inequities. Institutional policies, practices, and laws combine to create a system or a societal structure that negatively affects Black, Indigenous, Latinx, and other communities of color and perpetuates racial inequity.[26,27]

Trauma-informed community building: a process that recognizes the impact of pervasive trauma on a community and creates ways to address the resulting challenges to traditional community-building approaches. "Through intentional strategies that de-escalate chaos and stress, build social cohesion and foster community resiliency over time, trauma-informed community building can increase the community's readiness to engage in traditional community building efforts. The outcomes of effective trauma-informed community building are the conditions for sustainable individual and community change."[28]

Introduction

Planning touches all aspects of our lives: how we get to work or school, where we live and what services or resources are available to us in our neighborhoods, what jobs and other economic opportunities are nearby or within our region, the availability and affordability of housing, where our food comes from and how we get it. Whether we live in rural, urban, or suburban areas, large central cities or small towns, planning guides the decisions on how our cities and communities will grow and develop. The plans produced — for example, a comprehensive or general plan, a regional transportation or housing plan, a neighborhood-specific plan, an active transportation plan, or a climate mitigation and adaptation plan — articulate the public's vision and action steps for accomplishing shared goals at regional and local levels. These plans provide the guideposts and establish the parameters for how communities will prioritize competing interests.

However, the ways in which planners and policymakers have planned our communities have not always yielded equitable outcomes.[29,30] In actuality, the planning practices used to develop and implement plans, as well as the plans themselves, have played a central role in creating and perpetuating discrimination that has contributed to growing health inequities along racial lines. Just as planning has been implicated in creating these problems, it should be part of the solution to ensure a just society that embodies our highest ideals and values.

We distinguish the process of developing and implementing plans from the written plans that are created as a result of planning. The planning process shapes the plans. If equity is centered in the planning process, the resulting plan will be more likely to include goals and policies that reflect the diverse perspectives and needs of community members, especially those who have historically faced marginalization. Additionally, equity can be generated not only in the goals and policies included in plans but also in how the plan is created and who is engaged in the process.

To change the current patterns of inequities in health and prosperity in our cities and communities, the planning process must be inclusive and focused on equity. Planners must be willing to go beyond business-as-usual practices to incorporate equity into every phase of planning or even, in some cases, replace current planning practices with ones that center inclusion and change policy and investment priorities in order

To change the current patterns of inequities in health and prosperity in our cities and communities, the planning process must be inclusive and focused on equity.

to redress inequities. To do so, planners need a new set of practices and tools to equitably engage communities in the process of developing plans and to disrupt the patterns of unjust structural disadvantage.

This publication, *The Planner's Playbook: A Community-Centered Approach to Improving Health & Equity*, provides guidance, resources, concrete steps, and examples for planners who wish to center equity in their planning practice, with the aim of producing communities of opportunity and prosperity for all. In this playbook, we maintain that planners and policymakers have the ability and the responsibility to create a roadmap for healthier, more equitable communities.

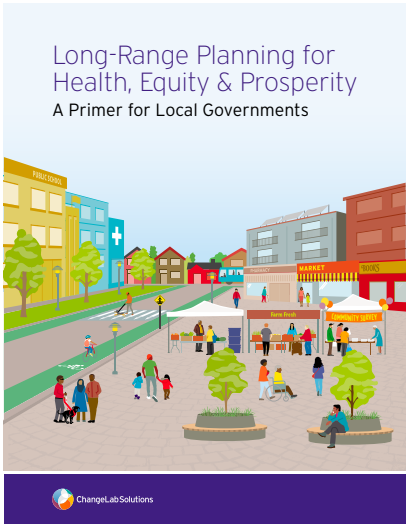
Purpose of this playbook & how to use it

The purpose of our playbook is to provide planners and policymakers with the background and context, resources, community examples, and practical steps to incorporate equity into planning practice. We begin by describing the problem and the need for equity in planning. We then outline potential pitfalls in the conventional planning process that may hinder equity and describe actions that planners and decisionmakers can take to incorporate equity into planning practice. We also present real-world examples of how communities have incorporated the strategies and actions described. A list of key terms has been provided to ensure a shared understanding of concepts and terms used throughout the playbook. We encourage you to review the key terms before reading the rest of the playbook.

Our playbook provides planners and policymakers with the background, resources, community examples, and practical steps to incorporate equity into planning practice.

This playbook is primarily intended for planners, decisionmakers, and other practitioners who are directly involved with or influence the development of their local government's plans and policies that shape the pattern, design, and function of their communities. This audience can include practitioners who work in planning, public health, transportation, public works, housing, food systems planning, community and economic development, or parks and recreation. Additionally, community groups, advocates, and other stakeholders who are interested in creating healthier, more equitable communities can use this playbook to identify opportunities to collaborate with local planners and policymakers to achieve community goals.

We also encourage you to check out ChangeLab Solutions' ***Long-Range Planning for Health, Equity & Prosperity: A Primer for Local Governments***. This foundational resource helps planners understand key concepts for promoting health equity through planning practice. It presents a framework for aligning policies that promote health equity across local government departments and provides broad guidance on how to begin incorporating equity into long-range community planning, engagement, investment, and evaluation processes.



Why is equity in planning needed?

Our cities and communities are inequitable. And by many accounts, the disparities are becoming more pronounced.[31,32] Planners and public health practitioners have become increasingly aware of the interconnections between our health and the places we live, work, learn, and play. There is also a growing recognition of how place and the built environment shape economic prosperity as well as social and racial inequities. We know that these inequities did not occur through happenstance. Rather, they are the legacy of laws, policies, and practices that both intentionally and unintentionally hurt low-income people, communities of color, and other marginalized groups by contributing to and perpetuating the fundamental drivers of inequity.[33,34] A detailed timeline on the history of planning policies and practices that drive inequities is included in ***Long-Range Planning for Health, Equity & Prosperity: A Primer for Local Governments*** (starting on page 13).

Inequities did not occur through happenstance. Rather, they are the legacy of laws, policies, and practices that hurt low-income people, communities of color, and other groups by perpetuating the fundamental drivers of inequity.

Layered together, the planning and policy decisions, actions, and practices that have occurred over time have generated cumulative advantages for white people and cumulative disadvantages for Black and brown people and other groups that experience marginalization and disinvestment, such as recent immigrants, LGBTQIA folks, or returning citizens who were previously incarcerated. These stark inequities still reverberate across our society today, reflected in racially segregated neighborhoods of vastly different quality, disparities in opportunities and access to resources and needed services, and inequities in life outcomes and health.[35,36,37,38] These historical harms, which are also described as community traumas,[39] have led to feelings of powerlessness, distrust and suspicion of government, and lack of efficacy and agency.

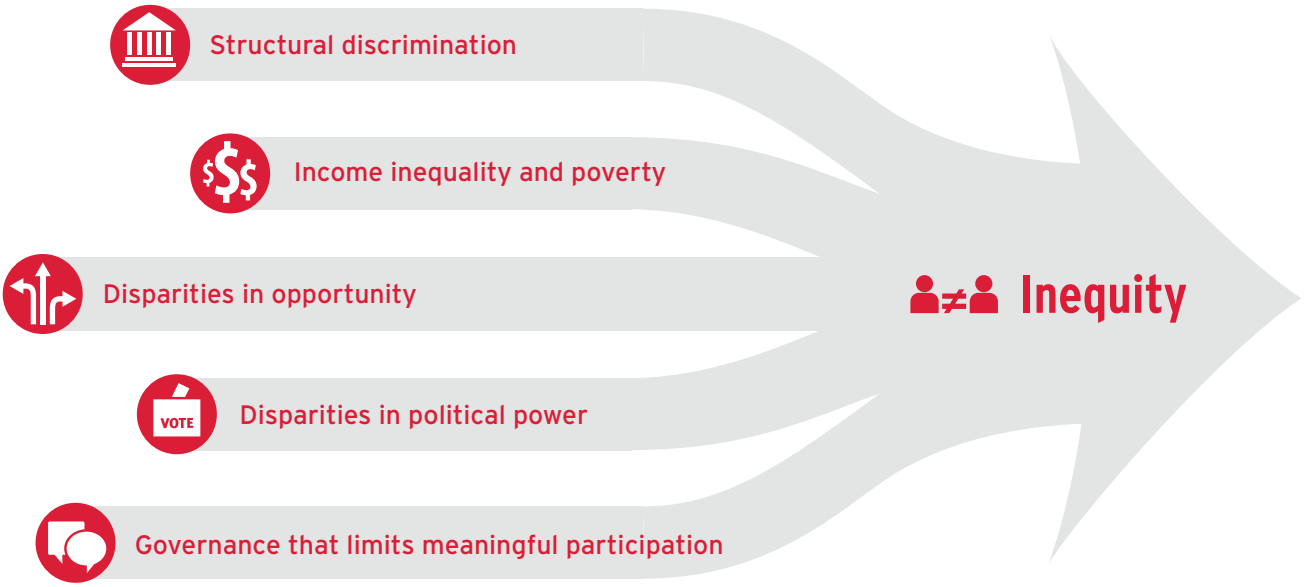
Additionally, while inequities most gravely and disproportionately impact priority populations, inequities affect everyone and are detrimental to all members of a community.[40] For example, research has shown that more unequal societies are more likely to pollute and have poorer environmental quality. Findings suggest that social inequities lead not only to disparities in environmental exposures that disproportionately burden priority populations but also to higher overall levels of exposure to pollutants for everyone.[41]

The COVID-19 pandemic is laying bare how these past racist and inequitable planning policies and practices still have not been remedied and continue to disproportionally affect the physical, mental,

and economic health of population groups facing marginalization, disinvestment, and health inequities — groups referred to as *priority populations* in this playbook. Black, Indigenous, Latinx, and other communities of color as well as low-income communities have higher rates of COVID-19 infection and death due, in large part, to long-standing structural disadvantages linked to place, race, and wealth.[42] These same population groups will also bear the brunt of the interwoven economic recession and housing crisis the pandemic is causing. The pandemic is worsening racial and health inequities.[43,44] COVID-19 is reshaping and constraining people's choices and how local governments must operate in response. The pandemic presents a critical opportunity to re-examine how cities and communities grow and develop, who they are designed for, and how policies and planning practices can promote healthier and more equitable communities.

Place-based inequities in health and prosperity are rooted in what ChangeLab Solutions calls the *five fundamental drivers of health inequity* (see Figure 1).[45] These drivers shape our places, social environments, and living conditions in ways that make some places healthy and others unhealthy along predictable race and class divides. Because planning policies have played a significant role in institutionalizing and perpetuating these drivers of inequity, planning policies can also be powerful interventions to counteract and dismantle these drivers. In order to address disparities in health and prosperity through planning processes, planners must confront these deep structural drivers of inequity.

Figure 1: Five fundamental drivers of health inequity



FIVE FUNDAMENTAL DRIVERS OF HEALTH INEQUITY

Structural discrimination. Structural discrimination is a discriminatory system of policies, cultural norms, and institutional practices that result in unjust disparities between people of different races, ethnicities, or classes. In addition, multiple dimensions of identity and interlocking systems of oppression — such as those based on race and economic class — shape individual experience. Thus, in order to eliminate structural discrimination, changemakers (eg, planners and policymakers) must apply a systems-based understanding of power to categories of identification such as gender, sexual orientation, social class, and immigration status in addition to race, ethnicity, and economic class.

Income inequality and poverty. Wealth determines whether families and communities can access and afford the basic resources and services that people need to lead healthy lives. At the community level, lack of capital, funding, or investment means fewer health-promoting amenities. At the individual level, less-wealthy families often can't afford stable housing, healthy food, reliable transportation, quality health care, parental support, or other assets that are fundamental to healthy living. Laws and policies play a central role in both concentrating wealth among people who are already wealthy and making it difficult for people who are poor to escape poverty.

Disparities in opportunity. Inequitable access to quality education and economic opportunities creates fundamental barriers to healthy living. These factors contribute to the continued widening of gaps in wealth and health between underserved communities and wealthier ones.

Disparities in political power. Communities and individuals with little political power find it difficult to make their problems and needs visible to government and institutional decisionmakers. Without representative government and meaningful input from people experiencing inequities and marginalization, laws and policies will continue to disproportionately benefit stakeholders who have greater power to participate in and influence legal and political processes.

Governance that limits meaningful participation. Governance can be defined as the process of aligning stakeholders and getting to agreement. Governance structures determine how power is distributed and exercised in decisionmaking that shapes places as well as access to resources and opportunities. Participation, partnerships, and community empowerment are elements of governance structures that promote health equity. A lack of meaningful participation leads to decisions that are based on inadequate and inaccurate information, that lack buy-in from the community members they affect, or that community members are not even be aware of — decisions that ultimately maintain and replicate the status quo, furthering health and social inequities.

What is involved in a planning process?

Before delving into the elements of an equitable planning process, it is helpful to review the conventional planning process and where it typically falls short in advancing equity.

Plans are the primary tool that planners use to carry out their functions; the creation and implementation of plans are key activities of planning professionals. Planning documents and planning policies are typically drafted by local and regional governments. The process of creating these plans typically involves the four phases described in Table 1.

Long-range plans include comprehensive plans, neighborhood or specific area plans, active transportation plans, bicycle master plans, parks and open space plans, and climate action and adaptation plans.

Table 1: Phases of the planning process

Phase	Description
 **Learn & Assess**	The Learn and Assess phase involves identifying and reviewing existing plans, laws, and policies that are relevant to the planning process. This phase also includes conducting baseline assessments of existing community conditions that will inform development of the plan.
 **Envision**	The Envision phase involves producing a community vision for the plan. The plan's vision is used to guide development of the plan, define the goals of the plan, and craft a framework for how the plan will be developed.
 **Plan**	The Plan phase involves crafting the goals, policies, and actions to be included in the planning document. In this phase, the plan is adopted by a governing body such as a planning commission or a city or town council.
 **Act**	The Act phase involves implementing the adopted plan. This phase includes prioritizing actions, funding and financing investments, holding agencies and departments accountable, and monitoring community progress.

Planners also engage in a set of parallel activities that support the planning process. First, planning documents often address a range of topics that require a similar range of technical expertise for analysis, policy drafting, and implementation (such as housing, transportation, economics, engineering, and environmental science). As a result, planning processes typically involve input from multiple departments, agencies, and institutions as well as external consultants. Coordination and collaboration of these activities are needed throughout the planning process. Second, planning processes usually involve community engagement aimed at gathering input from advocacy groups, stakeholders, and residents of the community.

What are common pitfalls that hinder equity in planning processes?

Long-range plans, such as comprehensive plans, are an expression of a community's values. These documents establish a community's vision and goals, and include a set of objectives, policies, and actions intended to shape the pattern, design, and function of that community in ways that will meet future needs. As a result, these plans — and the systems that support them — play a crucial role in determining access to opportunities for prosperity by directing resources and investments within a community.[46] This crucial role is why it is so important to examine the processes that create these plans. The way a plan is created (ie, what information is collected and analyzed, who is engaged and how, and how goals and policies are crafted) is critical in determining the impact the plan will have on the community. Table 2 describes pitfalls that often impede equity in a conventional planning process.

Table 2: Potential pitfalls that may impede equity in each phase of the planning process

Phase	Pitfalls That May Impede Equity
Learn & Assess	Information used to inform the baseline assessment mostly omits priority populations' understanding of problems, concerns, and priorities. The baseline assessment relies heavily on information that is incomplete or inaccurate, is not representative of community experiences, or cannot be acted on to address structural disadvantage or the needs of priority populations.
Envision	Community outreach processes fail to support engagement with priority communities, resulting in a vision that does not reflect the populations that will be most affected by implementation of the plan.
Plan	Information used to assess baseline conditions and the resulting vision of the plan do not reflect priority populations' experiences, concerns, and priorities, and priority communities are not adequately engaged as part of the planning process; therefore, the plan's goals, policies, and actions run the risk of bolstering the status quo or even creating, exacerbating, or replicating structural disadvantage.
Act	Implementation of the plan does not reflect the concerns and priorities of priority populations and thus may not address the fundamental drivers of inequities or work to improve neighborhood conditions or access to resources and opportunities for the people who are experiencing the greatest inequities and marginalization.

These pitfalls fall into three broad categories: procedural inequity, structural inequity, and distributional inequity. These categories can help planners describe and analyze how a conventional planning process often falls short of achieving equity. These three categories of inequities are interrelated and overlapping, and many pitfalls that hamper equity in conventional planning fit into more than one category.

Procedural inequity: Unfair decisionmaking

Procedural inequities occur when public decisionmaking processes lack transparency, accessibility, fairness, inclusion, and a diversity of perspectives. Priority populations are marginalized or left out of the process altogether. As a result, planners and decisionmakers lack the needed information to make evidence-based decisions that address the most pressing community priorities. When this occurs, plans default to being disproportionately influenced by people and groups with established power and influence. Plans that are shaped in this way run the risk of doing little to address the concerns of the most vulnerable and marginalized communities and often bolster and recreate structural disadvantages in the community.

Procedural inequities are the result of ineffective engagement strategies that lack transparency, accessibility, fairness, and inclusion, leading to unfair decisionmaking.

Existing community outreach and participation requirements for planning typically set a low bar. Despite good intentions and an active effort by many jurisdictions to improve their community engagement approaches, many local planning agencies struggle to make a meaningful difference.[47] Take, for example, public meetings, which are a primary method that planners use to obtain community input. Community planning meetings are often inadequately planned, making it harder for members of priority populations to offer meaningful input. For instance, consider these barriers:

- Meetings are often held at inconvenient times and locations.
- Public meetings often fail to provide food, child care, or adequate translation services — amenities that would encourage and support participation by a wide array of people with differing needs.
- Community members usually are not compensated for their participation, undervaluing their time and contributions to the planning process.
- Jargon and technical language used in meetings are often unfamiliar to a lay audience and do not lend themselves to ease in understanding the material.
- Public hearings usually occur late in the planning process, allowing concerns and opposition among community members to build and making it virtually impossible to address the issues raised.

Barriers such as these can decrease the number and diversity of community members and stakeholders who participate in planning processes. Recent research on planning meetings in the Boston metro area revealed the shortcomings of public planning meetings on topics related to housing. Researchers examined the attendees of planning board and zoning board meetings in 97 cities and towns. They found that attendance at these meetings was skewed toward older men, longtime residents, voters in local elections, and homeowners — demographics that did not reflect the general public. Participants

in these meetings overwhelmingly — and to a much greater degree than the general public — opposed new high-density housing projects that would benefit low-income community members.[48]

The implications of procedural inequities in planning include the following:

- Community needs and challenges as well as planning solutions are defined by people with established power and influence.
- The evidence base for planning policies and actions does not provide a full picture of community conditions and trade-offs between alternative scenarios.
- Priority populations lack trust in government institutions or belief that government works in their interest.

Structural inequity: Unfair governmental or institutional systems

Structural inequity occurs when institutions and systems of government lack the processes, practices, policies, and internal capacity to operationalize equity in how they function and make decisions. This point is important because our governance structures, institutions, and systems determine how power is distributed and exercised in decisionmaking, which shapes neighborhoods and access to resources and opportunities.

Structural inequities are the result of processes, practices, policies, and protocols that cause governments and institutions to act unfairly.

Structural inequity in local government occurs because discussions about equity are not normalized within planning agencies; internal infrastructure to address inequities has not been developed; and staff and leadership do not have the tools or capacity to make conscious decisions to operationalize equity.[49,50] Ultimately, altering these realities means creating long-lasting shifts in how government works and who it works for.

The implications of structural inequities in planning include the following:

- Local government agencies and decisionmakers lack the tools, resources, or know-how needed to operationalize equity in their day-to-day activities and decisionmaking processes.
- Local government agencies, planners, and policymakers are unable to equitably engage the community, especially groups that have traditionally been left out of planning discussions.
- Local government agencies, staff, and decisionmakers create and reinforce existing patterns of marginalization and disinvestment and other distributional inequities.

Distributional inequity: Unfair distribution of resources, burdens & benefits

Distributional inequities occur when planning policies result in the inequitable distribution of resources, community burdens, or benefits. This type of inequity often results from procedural inequities and/or structural inequities.

Distributional inequities are the result of goals, policies, and actions that produce unfair distribution of resources, community burdens, or benefits.

Often, existing patterns of investment and disinvestment are reinforced or exacerbated. Affluent neighborhoods are also high-resource areas with readily available and accessible health-promoting resources, amenities, and services such as healthy housing, parks and open spaces, active transportation facilities, full-service grocery stores, quality schools, and health care services. In contrast, low-income neighborhoods of color are more likely to experience disinvestment and neglect and to lack access to health-promoting resources. Low-income communities of color are also more likely to host many hazardous and intensive land uses, such as heavy industrial manufacturing facilities and congested highways, that increase the risk of exposure to environmental pollution, toxins, and other hazards.[51,52] In turn, differences in neighborhood quality, combined with the legacy of racial residential and economic segregation, lead to racial inequities in health and life outcomes.[53]

In the planning process, planning decisions that affect land use, community design, housing, transportation, and economic and community development often maintain, reinforce, or exacerbate existing distributional inequities in infrastructure investments and access to neighborhood resources and services. Many contributing factors, such as inadequate community engagement, result in procedural inequity or a lack of robust data to inform planners and policymakers as they adopt and implement planning decisions. However, the root causes of distributional inequity are structural.

Public and institutional policies, practices, organizational culture, and norms are usually well established to maintain the status quo and rarely challenge the way society functions, how resources are distributed, who in our communities benefit the most, and who is harmed as a result. Local agencies often lack sufficient understanding and capacity to operationalize equity in their decisionmaking. In addition, entrenched moneyed interests in the private sector often have outsize influence on local policy and planning decisions. Those in power often lack incentive to question or challenge the fundamental underpinnings that drive structural disadvantage.

The implications of distributional inequities in planning include the following:

- Patterns of community disinvestment, marginalization, and racial segregation are reinforced.
- Neighborhoods differ in quality and access to opportunity and prosperity along race and class lines.
- Differences in neighborhood quality lead to stark social and health inequities.

Avoiding & addressing equity pitfalls in planning processes

Equity is multidimensional, and it is accomplished through all three types of equity: procedural equity (for example, through inclusive community engagement); structural equity (for example, through institutionalizing equity in local government operations); and distributional equity (for example, by ensuring that planning goals and policies result in equitable distribution of community benefits and burdens).

Procedural equity, structural equity, and distributional equity create fertile soil in which healthy and equitable communities can grow.

How can you, as planners and decisionmakers, advance procedural equity through planning? Inclusive and equitable community engagement is the cornerstone of procedural equity and the foundation of an equitable planning process. This playbook discusses the importance and benefits of inclusive community engagement and outlines actions that planners and decisionmakers can take to ensure robust public participation in the planning process.

How can local planning agencies and city officials work toward structural equity? This playbook highlights actions that planners and decisionmakers should take to operationalize equity through their own internal agency-related policies, procedures, and practices and through the development of planning goals and policies that address governance structures and processes in long-range plans.

How can you, as planners and decisionmakers, foster distributional equity through the development of planning goals and policies? Although not meant to provide a silver bullet to solve the dilemma of distributional inequity, this playbook showcases steps that planners and decisionmakers can take to disrupt business-as-usual planning tactics that result in distributional inequities. By outlining steps that support inclusive community engagement through all phases of planning, actions that center priority populations in the development of planning goals and policies, and strategies that prioritize implementation where the need is greatest, this playbook provides many tools, considerations, and community examples for planners.

Procedural equity, structural equity, and distributional equity create fertile soil in which healthy and equitable communities can grow. And each category presents an opportunity to make planning processes more equitable.

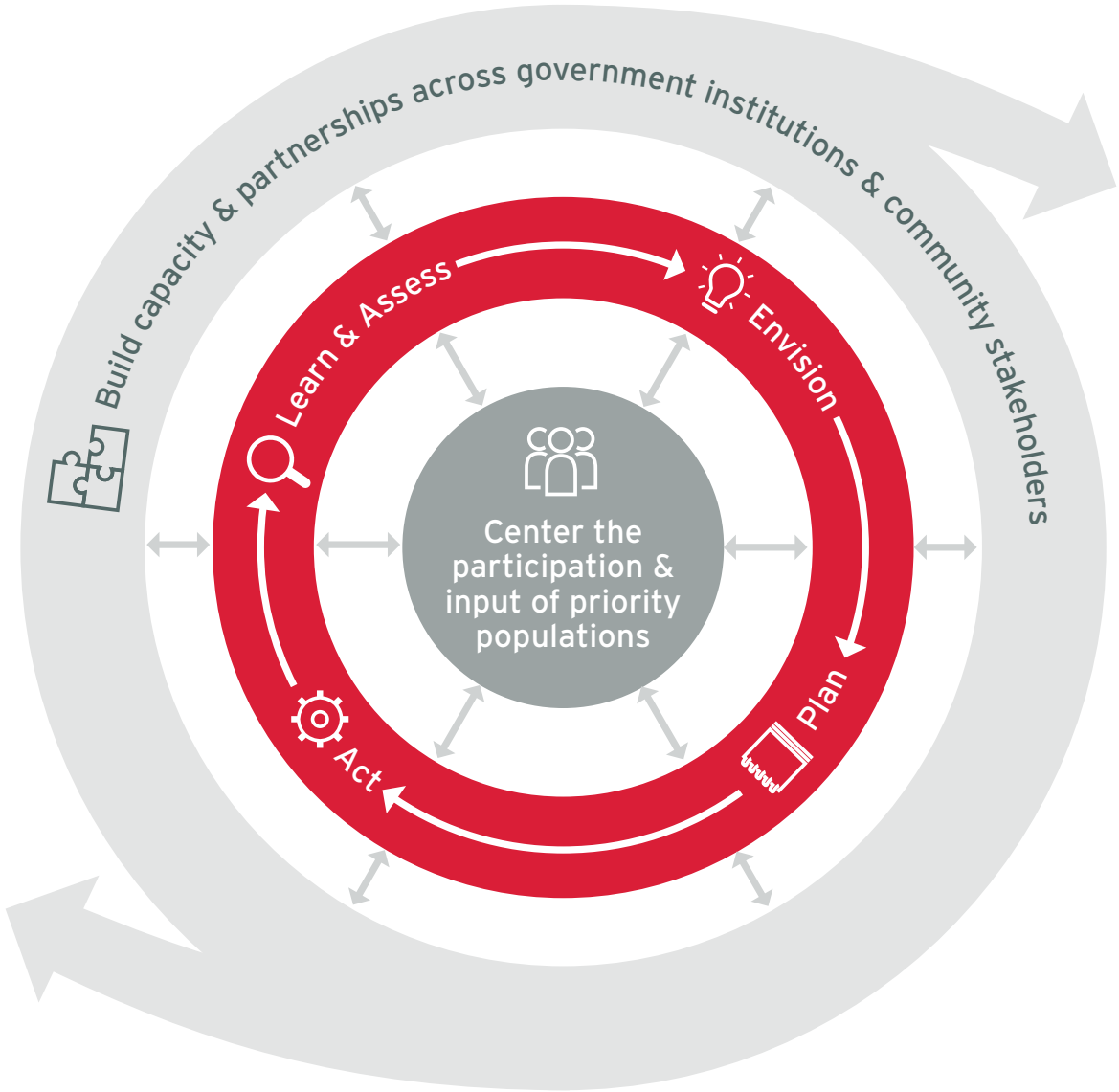
How can you make your planning process equitable?

An equitable planning process increases the likelihood that plans and the process of creating them will advance community health and equity. An equitable planning process can be accomplished through a three-pronged approach:

1. Center the participation and input of priority populations in the planning process
2. Build capacity and partnerships across government institutions and community stakeholders
3. Apply an equity approach to each phase of the planning process

Figure 2 shows how these three elements work together to create an equitable planning process. Participation of priority communities is at the center and informs every phase of the planning process. To achieve equitable outcomes, planners and policymakers involved in the development of long-range plans need to operationalize institutional practices, policies, and procedures that address the fundamental drivers of inequity, as we mentioned earlier in this guide. Planners also need to build their capacity to engage in inclusive community engagement with priority populations — a process that will require unlearning stereotypes and misperceptions of community members and adopting new techniques and approaches aimed at building lasting relationships.

Figure 2: Elements of an equitable planning process



1. Center the participation & input of priority populations in the planning process

Public participation is the bedrock of an equitable planning process, and it's essential to fostering healthy, equitable communities. Inclusive and equitable engagement allows community members, especially those who have traditionally been left of out of planning conversations, to provide input and offer considerations to influence the development of plans, which improves the plans and helps ensure community buy-in, aiding their adoption and implementation. Benefits of inclusive community engagement include the following:

- Priority populations have enhanced self-efficacy, social capital, community capacity, and empowerment.[54,55,56,57] Feeling a sense of control over one's destiny is an important social determinant of health and well-being.[58]
- Priority populations have increased engagement in public conversations and discussions on issues and policies that affect them.
- Increased government accountability and transparency leads to greater opportunities for trust between government institutions and priority populations, facilitating increased buy-in and support for the plan.
- Priority populations improve their knowledge of the planning process and how to influence it.
- Planners and decisionmakers increase their understanding of the trade-offs involved in planning decisions. Planning and policy decisions are less likely to be based on flawed or incomplete information and more likely to respond to pressing community needs and desires.
- Decisonmakers are more apt to make planning decisions based on the best available information, resulting in more-equitable outcomes.

To ensure inclusive community engagement in the planning process, you as planners and policymakers should strive to accomplish two prerequisites:

Acknowledge and learn from past actions. You will be better able to address the root causes of community problems in the planning process when you recognize and acknowledge the role that government institutions, laws, and policies have played in generating social inequities and maintaining the status quo. Learn from these past actions and work to reverse the inequities.

Build trust with the communities you serve. Community members are experts on their own lived experiences, and their experiences and perceptions should be valued and made more visible. Center the participation of priority populations in the planning process, and focus

on their strengths and resilience rather than only on their challenges or deficits. You as planners and policymakers must build trust with the communities you serve; they should have confidence that you will work in good faith and fulfill your commitments. First, you must listen to and learn from priority populations. Then, when appropriate, respond with urgency, and consistently take reliable actions for credible, authentic reasons.

Inclusive community engagement throughout the planning process

Community engagement is not a one-time activity or a single step in the planning process. It must be ongoing, occurring in every phase of the planning process. The objective of your engagement approach will vary with the process. And the activities and tools you use to engage community members should also vary accordingly.

Community engagement is not a one-time activity or a single step in the planning process. It must be ongoing, occurring in every phase of the planning process.

Community engagement also is not monolithic. The continuum of public participation shown in Table 3, adapted from the International Association of Public Participation,[59] describes different levels of community involvement and influence in planning or decisionmaking processes. The continuum provides a flexible framework for understanding the varying levels and types of engagement that can be employed. Different levels can be used at different times or even simultaneously, depending on the circumstances and the objectives of each phase of planning.

Within each of these levels, different strategies can be employed by planners to engage community residents and other groups. The continuum can help planners consider how strategies can be tailored to ensure equitable community engagement. Each level (Inform, Consult, Involve, Collaborate, Empower) articulates a public participation goal and promise to the public. Table 3 also provides example strategies and describes what is needed on the part of local government to achieve each level.

You as planners and decisionmakers should strive to engage your community by using strategies that increase levels of participation and delegate more control and decisionmaking authority to community members.

Table 3: Levels of community participation, engagement, and power

Increasing community participation and control

	Inform	Consult	Involve	Collaborate	Empower
Goal	To provide balanced and objective information in a timely manner	To obtain feedback on analysis, issues, alternatives, or decisions	To work with community members to make sure that their concerns and aspirations are considered and understood	To partner with the community in each aspect of decisionmaking; to share leadership and decisionmaking	To place final decisionmaking in the hands of the community
Promise	"We'll keep you informed."	"We'll listen to you and acknowledge your concerns."	"We'll work with you to ensure that your concerns and aspirations are directly reflected in the decisions made."	"We will look to you for advice and innovation and incorporate your input in decisions as much as possible."	"We will implement what you decide."
Example strategies	One-way communications from government planning agencies to the community, such as outreach at meetings (updates and fact sheets) and media releases	Focus groups, interviews, surveys and questionnaires, public comments, testimonies at public hearings	Two-way communication between government planning agencies and the community – for example, through community advisory boards, legislative hearings, community workshops, or charrettes	Co-facilitated meetings and participatory decisionmaking – for example, through advisory boards; coalitions and partnerships; Health in All Policies initiatives; participatory budgeting initiatives; or Community-Based Participatory Research (CBPR)	Community-directed planning, community leadership development, community-hosted forums, Community Owned and Managed Research (COMR)
What is needed on the part of planners and decisionmakers?	• Use of platforms – such as email lists, websites, social media, mailers, posters, flyers – to disseminate information widely • Community meetings or other events hosted by decisionmakers to share information or provide updates to community members	• Two-way communication channels between local government and community members • Flexibility and willingness to adjust projects or initiatives based on input or feedback received from community members	• Flexibility and willingness to adjust plans based on feedback received • Resources (time, materials, skills, expertise) to support long-term engagement	• Structural strategies that normalize and operationalize equity • Commitment to co-designing projects or initiatives with community members • Buy-in and commitment of local government leadership • Staff training in cultural humility, managing group dynamics, consensus building, etc	• Structural strategies that normalize and operationalize equity • Buy-in and commitment of local government leadership • Commitment to sharing decisionmaking power or giving decisionmaking authority entirely to the community • Commitment to having a community-driven process, even if the outcome is uncertain in the beginning

Adapted from Core values, ethics, spectrum – the 3 pillars of public participation. International Association of Public Participation website: **iap2.org/page/pillars**.

Sustained engagement with community members can turn into strong community partnerships over time. Investments of resources, time, and attention in engaging community groups and residents will be needed to create, maintain, and nurture these connections.

Additionally, it is important to understand that different community stakeholders require different supports and strategies in order to adequately participate in the planning process. It's incumbent on you as planners and policymakers to adapt your engagement strategies to meet the needs of community members, community groups, and other stakeholders and to provide a multitude of opportunities to participate. You will need to be committed to the goals of engagement and be flexible, persistent, and willing to learn and adapt through trial and error.

Inclusive community engagement strategies

In inclusive community engagement, community members should feel welcomed and valued when they participate in the planning process. They should trust that the ideas and experiences they share will be considered and incorporated to the extent possible. When planning for community engagement, consider the experiences of the populations you wish to engage, the concerns or challenges they may have in participating, and ways that you can mitigate those barriers. A community engagement process should benefit all the stakeholders involved.

Here are some strategies that planners and policymakers can use to build partnerships with community members:[60]

Ensure that institutional leaders are committed. Community engagement requires time and resources. The leaders of your agency or department must be prepared to support community partnerships as a central facet of how the plan will be developed. Securing institutional buy-in and leadership support leads to greater sustainability and success over time. Community engagement can also be enhanced by adoption of operational or administrative policies and procedures that change how planning agencies conduct their business — for example, changes in what assessments and inputs they use to make decisions. Engaging hard-to-reach populations, such as linguistically isolated households or undocumented families, will require commitment, flexibility, and perseverance.

Make sure that community members and community advocates, especially from priority populations, are represented from the outset of the project. Spend time and resources getting to know the community members who will be most affected by the plan. Some institutions may need to collect data through activities such as listening sessions or surveys to help identify these groups of people. Develop an advisory group of community stakeholders who can advise planning staff on the information gathered, the plan's development, and ongoing engagement efforts.

Clarify your goals, process, and expectations for engagement. Once you have strong community participation, ensure that everyone knows the goal of the initiative and the boundaries of the engagement. Is the engagement a one-night listening session? Is it an ongoing effort? Be frank about the limits of a particular activity. Tell community members and community groups how you plan to use the information gathered and how decisions will be made.

Plan engaging and supportive community meetings and events. Provide child care, food, and translation services in needed languages. Translate all materials (presentation slides, handouts, etc) into relevant languages. Be conscious of power dynamics and the privilege you bring into public spaces as representatives of local government. Resolve conflict as it arises instead of dismissing it. Build opportunities for training and capacity building for community members into meetings whenever possible. For instance, a community meeting could include a short tutorial on how to interpret a neighborhood map depicting stationary sources of air pollution.

Listen actively, and maintain flexibility. Create forums in which community members can openly share their expertise and lived experiences. Ask priority populations how they would like to be engaged and on what topics. You should prepare for instances when community input may yield divergent ideas that run counter to your beliefs and assumptions by working through different scenarios for how you might respond. Refrain from overpromising, and follow through on action items and next steps. Ensure that local government agency and department leaders understand that investing in community partnerships means that outcomes or processes may need to shift. Prepare for circumstances in which issues that are not directly related to the topic at hand might be brought up by creating a process for follow-up with the appropriate people or agencies. Provide multiple ways for community members and groups to engage throughout the planning process — such as online surveys, online webinars, intercept surveys, community meetings, charrettes, walking tours, listening sessions, or tabling or pop-up workshops at community gatherings like street fairs or school events.

Engage the talents and expertise of community members, and pay them fairly for their work. Whenever possible, use your resources to engage, train, and activate new leaders from within the community. Think through all of the roles and opportunities for leadership that an effort may generate — for instance, facilitating meeting activities, leading conversations with decisionmakers, staffing the initiative, or helping with data collection or asset mapping — and create the space for community members to step into those roles through paid employment or stipends. Also, compensate them for their time and contributions at community meetings.

It's incumbent on planners and policymakers to adapt engagement strategies to meet the needs of community members and other stakeholders and to provide a multitude of opportunities to participate.

Move at the speed of trust. Cultivating trusting relationships with community members takes time, patience, communication, and, above all, humility. Be aware of how past actions by your or other government agencies may have damaged the community. Use disagreements to practice building trust. Talk less; listen more. Test assumptions before acting on them. Acknowledge and challenge stereotypes that community members and partners may hold about your agency or department or each other. If trust has not been built, slow down.

Respond to the community with urgency, and remain accountable. Once your agency or department is on the path to building community trust, community members have been heard, and clear themes have been identified and agreed upon, start responding. Maintain clear and consistent lines of communication with community members and groups, especially if they are involved in an effort. Ensure that decisionmaking processes are transparent and that there are dedicated spaces and resources for continuing to receive feedback throughout implementation.

VIRTUAL COMMUNITY ENGAGEMENT DURING THE COVID-19 PANDEMIC

Although community engagement has traditionally taken place in person, the COVID-19 pandemic has necessitated increased reliance on virtual community engagement strategies, and technical advances have made virtual engagement much more feasible. Many government agencies are using online videoconferences in lieu of in-person meetings and workshops. Virtual engagement can also involve digital surveys and polling, online mapping, digital whiteboards, virtual walk audits, or gathering comments on documents and designs. Virtual meetings and online collaboration are rapidly changing in this new era of the pandemic, and many dynamic new tools and resources will likely be created as a result.

Virtual community engagement can present challenges related to equitable participation. For example, not everyone has access to smartphones, computers, or high-speed internet, and not everyone is comfortable using the technology. It can be difficult to foster personal connections and trust in virtual settings, and people may have different situations or distractions at home that prevent them from fully participating.

On the other hand, virtual community engagement can still be effective and can provide several benefits if it is undertaken in an intentional and inclusive manner. For instance, virtual engagement allows more flexibility in the location and schedule for engagement, potentially increasing the number and diversity of individuals who can participate. Carbon footprint and expenses are reduced when participants no longer need to travel to meetings. Sharing and collaborating on documents can be more streamlined. Some platforms allow closed captioning, which can make content accessible to people with hearing impairments or language barriers. Some jurisdictions are bridging the digital divide by providing broadband internet hot spots in libraries, schools, and other public buildings.[61] In some cases, a hybrid approach combining in-person and virtual strategies might enhance community engagement efforts.

The COVID-19 pandemic has challenged localities to be fluid and flexible in their public participation requirements. Many states have exercised emergency authority to modify the requirements of their open meetings laws to meet the challenges imposed by the pandemic and allow localities the latitude to take safety precautions while ensuring due process.[62] Many legal considerations need to be weighed when changing public participation requirements to allow remote engagement, and local governments should consult with their legal counsel to ensure compliance with state and local laws.

LEARN MORE >>

- Metropolitan Area Planning Council's **Shared Practices for Engagement in Virtual Meetings**
- Institute for Local Government's webinar: **Tips and Tools to Engage Your Community in a Digital Environment**
- Urban Institute's **Community Engagement During the COVID-19 Pandemic and Beyond**

2. Build capacity & partnerships across government institutions & community stakeholders

The right conditions must be created to enable an equitable planning process to flourish. Building capacity, readiness, and partnerships across government institutions and community stakeholders — such as community-based organizations, community advocates, or residents — is critical in order for an equitable planning process to unfold. Building this infrastructure for collaboration requires you as planners, local government agency staff, and decisionmakers to engage in sustained, ongoing practices and to invest time and needed resources long before and well beyond any one planning process. Fundamentally, these efforts are about building and maintaining a strong organizational infrastructure for equity. Far too often, local government agencies lack the supportive culture, norms, dedicated resources and policies, internal staff capacity, and practices that would allow planners and policymakers to engage in an inclusive and equitable planning process. Ideally, community-building efforts are supported by smaller ongoing, routinized activities and administrative policies and protocols that institutionalize equity in government agency operations.

Building infrastructure for collaboration requires planners, local government agency staff, and decisionmakers to engage in sustained, ongoing practices and to invest time and needed resources long before and well beyond any one planning process.

To create the conditions for collaboration on equity, internal government capacity and readiness must be built to effectively and equitably engage with priority populations and work across departmental silos to solve community problems collectively. You should also strive to work with community leaders to facilitate community building, community organizing, and community readiness to engage in the planning process. Building community readiness means ensuring that community members — especially members of priority communities — feel heard and acknowledged. Community building also means adopting context-specific strategies to meet community needs.

By taking these steps, you can begin to lay the groundwork needed to forge a sustainable working partnership with community groups and stakeholders that will enable equity-focused planning. An equitable planning process that centers priority populations cannot be achieved without attention to both building government's institutional capacity and fostering community readiness.

It's also important to realize that priority populations may not trust government institutions to work for their interests or invest in uplifting their community. Activities undertaken to increase capacity, readiness, and partnerships across government institutions and community stakeholders can help to build trust and confidence on the part of communities that are weary of government agencies overpromising and underdelivering or of past and ongoing harms.[63] Further, community organizing and community building can give residents a way to influence their community's future and strengthen their sense of self-determination and control over their lives,[64] which can have health benefits.[65]

How can you build government's institutional readiness for equitable planning?

Building government's institutional readiness and capacity requires a willingness on the part of local agencies to be inclusive, collaborative, and aspirational in how they work for the communities they serve. Resources and time will be needed to build and maintain a strong institutional orientation and practice geared toward equity. Additionally, because no one agency, department, or elected official is solely responsible for social and health inequities in a jurisdiction, no one sector of government or segment of the community can redress these inequities alone. Building government's institutional readiness and capacity also includes improving how government operates holistically to better serve community interests. The following steps outline how local government agencies can build their institutional readiness and capacity for equitable planning.

Develop staff capacity & understanding of equity

Local agency leaders and officials should ensure that planners and other staff involved in planning have an understanding of how structural discrimination has impacted and continues to disproportionately impact the lives, health, and well-being of priority populations. Planners should also develop the skills to effectively collaborate with priority populations. These efforts require investments of resources and time as well as capacity-building supports to facilitate the necessary learning. Agency leaders and other policymakers will need to champion and justify these efforts to various audiences, serving as chief explainers of the importance of these investments.

Such investments could include routine trainings and capacity-building supports on topics such as the following:

- Racial equity and structural disadvantage
- Unconscious racial bias
- Cultural humility
- Effective communication strategies
- Trust building
- Conflict resolution
- Effective engagement methods

Building government's institutional readiness will also mean unlearning unproductive and harmful engagement strategies that create or exacerbate distrust and misunderstanding in priority communities. Because many planning processes are led or informed by consulting firms, it is important that planning agencies select planning consultants that share similar values and a similar collaborative approach.

Building government's institutional capacity & readiness in Raleigh, NC

The Government Alliance on Race and Equity (GARE) is a national organization that creates tools and conducts trainings to advance racial equity in government.[66] In 2016, the City of Raleigh, North Carolina, partnered with GARE to host a series of racial equity trainings for city leadership staff and elected officials, to help them normalize conversations about race and learn about ways to incorporate equity into the city's operations.

Later, in 2017, the mayor led community conversations with residents in different neighborhoods across the city. Additionally, the city created an internal cross-departmental equity team that completed a training curriculum that involved webinars, videos, and worksheets about race and equity. The city has applied this training to their community engagement for the planning and development of a new park, honoring the history of the land and people and employing an equitable and inclusive community engagement process.[67]

Change government's practices, policies, culture & norms

In addition to investments in developing staff capacity and understanding of equity, local government agency leaders and officials should work to change their institutional practices, policies, culture, and norms in order to shift the orientation of their agencies toward embedding equity in their day-to-day operations. Agency leaders and policymakers can shift their institutional culture by

- Normalizing discussions of race and how racism plays out in day-to-day operations and creating spaces within local government for ongoing conversations about power and privilege;
- Building a supportive organizational culture and adopting administrative policies and procedures that guide priorities, operations, human resources management, and decisionmaking processes toward advancing equity;
- Working collaboratively with other governmental agencies to address complex community issues through a whole-government approach;
- Prioritizing resources and budgets to accomplish the preceding steps.

Innovative cross-sector strategies can drive the transformation of government to better serve collective community goals. Strategies such as Health in All Policies provide a collaborative, cross-government approach to government operations and decisionmaking that aims to improve the health, equity, and sustainability of communities.[68] These strategies can provide the means for government agencies to collaborate in order to identify shared goals, maximize resources, harmonize activities, and invest in solutions that produce multiple benefits. These types of cross-government collaborations can be a platform for communities to tackle their largest challenges.

Cross-government collaborations can be a platform for communities to tackle their largest challenges.

Changing institutional practices, policies, culture, and norms is an enormous investment on the part of local government that will require a long-term vision, strong leadership, ongoing attention, and commitment to transforming government incrementally over time. Such a transition will inevitably come with its own challenges, but change is possible.

Build trust & listen intently to community members

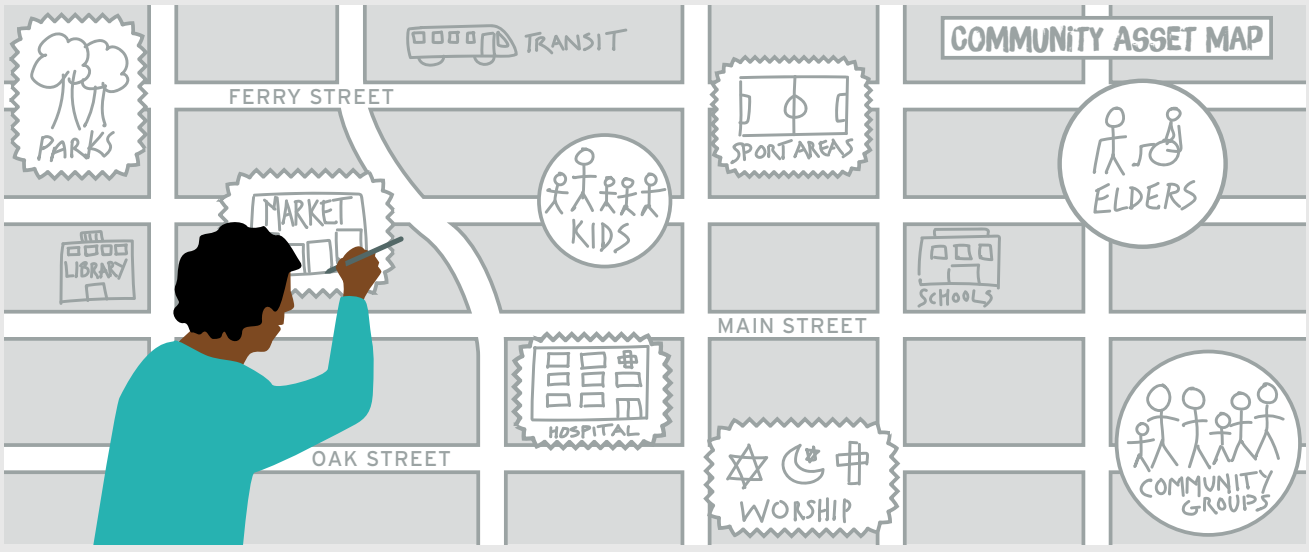
Partnerships with community stakeholders move at the speed of trust. Relationships matter, and community trust in government institutions and the planning process is needed to forge strong relationships. In priority communities where trust in government has been eroded by a history of harmful policies and actions, time and resources must be invested to rebuild relationships and foster a sense of trust and transparency in government. You as planners and policymakers should work to strengthen relationships by acknowledging past wrongdoing, engaging in trust-building practices, listening intently and learning, and then responding adequately and with urgency. To learn more about building community trust, see ***Long-Range Planning for Health, Equity & Prosperity***, p. 57.

BUILDING TRUST IN LOCAL GOVERNMENT IN MINNEAPOLIS, MN

The Minneapolis Park and Recreation Board (MPRB) started with several pilot projects to test out different approaches and tools before building out an agency-wide racial equity initiative. One of the pilot projects was the South Service Area Master Plan (SSAMP), which encompasses a quarter of the city's parks and outdoor facilities, including basketball courts, tennis courts, playgrounds, and wading pools. The project team participated in a racial equity training in preparation for the planning process. Acknowledging that members of city committees like the MPRB tend to be disproportionately white, middle-class, and older residents, the project team made a concerted effort to recruit a diverse group of members for the Community Advisory Committee in order to reflect the community's demographics, which include Latinx, Somali, African American, and Native American residents.[69]

The community engagement and planning process was intentionally slow and deliberate, taking place over the course of more than a year and a half and repeatedly involving the community at each stage: initial visioning, park inventories, early hand-sketched designs, design refinement, and draft versions of the final master plan document. The planning process was an important avenue for beginning to build trust and address institutional bias in local government. The plan states:

> During the SSAMP process, the Twin Cities experienced significant social trauma associated with the deaths of Jamar Clark and Philando Castile and the resultant community dialogue about racial inequities in public systems. Though a park planning process cannot solve the deeply entrenched institutional bias that exists throughout government systems, it can recognize that such bias does exist. It can do its part to make decisions that set the stage for eliminating bias in areas where MPRB has jurisdiction. MPRB recognizes the importance of the commitment to the SSAMP process many community members have made – especially at a time of heightened tension and dialog around race – and the agency is indebted for that service.[70]



How can you build community readiness?

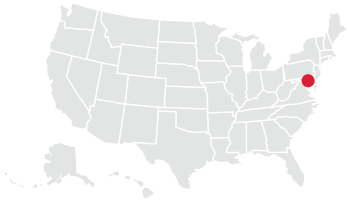
As planners and policymakers, you should invest in building the readiness and capacity of community members to engage in the planning process. Like building a government's institutional readiness, your commitment to building community readiness requires investments of time, energy, and resources. Actions that you and your agencies can enact to foster community readiness often take the form of trainings, education, or outreach efforts to community stakeholders that increase community members' understanding of the planning process and build their willingness and capacity to participate. Building community readiness might also involve your working with community leaders and community-based organizations to facilitate community building and community organizing. The following steps outline how planners and policymakers can build community readiness to participate in the planning process.

Support trauma-informed community-building strategies

First, you as planners and policymakers need to be aware of the complex and often painful history of government interventions and disinvestments in priority communities. Spend time learning about and listening to priority populations' concerns, challenges, and needs. Learn about trauma-informed community-building strategies that work to de-escalate chaos and stress, build social connections, and foster community members' resilience.[71] Building relationships may take multiple ongoing interactions, and community members may not immediately want to participate in community building or planning-related activities. Continue to provide space and different avenues for community members in engage in the planning process. Provide incentives and tangible rewards for their participation, and don't overpromise, so that community members do not become disillusioned or re-traumatized from the process.[72] Finally, realize that you are engaging in an ongoing process of building or rebuilding relationships based on trust and mutual understanding, which requires resources and time.

Increase priority communities' understanding of planning through training, education & outreach strategies

Planning encompasses a technical and complicated set of topic areas, and it may seem intimidating or difficult for community members to understand how they can plug into the process. You can integrate trainings and capacity-building opportunities into engagement efforts that can help community members gain a deeper and more nuanced understanding of the issues and help them articulate their ideas and concerns. An example of this type of opportunity might be a short tutorial about the planning approval process, offered at a community meeting. Other activities could include teach-ins, trainings, or presentations on specific topics or issue areas that community members would like more information about. Use plain language when developing public documents and presentations.



Building community capacity for planning in Baltimore, MD

In 2015, the City of Baltimore, Maryland, launched **OneBaltimore**, a public-private initiative to support opportunities for children, families, and neighborhoods. As part of OneBaltimore, the planning department staff created the Equity in Planning Committee (EIPC). One of the recommendations that came out of the EIPC's Action Plan in 2016 was creation of the **Baltimore Planning Academy**, a free six-week program that aims to empower residents to shape the future of their neighborhoods and city by learning about the planning and development process in Baltimore.

The program is also an effort by Baltimore's Department of Planning to build trust with the community, improve community engagement, and increase residents' understanding of the role of planning in their communities. Training topics include strategies for using the zoning code to address community challenges; urban design; an overview of the capital improvement program; and neighborhood planning. The program is open to anyone with an interest in improving their neighborhood and city, and residents from communities affected by historic patterns of disinvestment are strongly encouraged to apply.

Foster community leadership opportunities

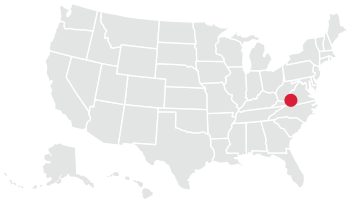
Community leaders act as a bridge between community members and local government. Community leaders who are trusted by community members can help to lift up voices or perspectives that otherwise might be left out; advocate for action to address issues and mobilize other residents to do the same; and help others feel more comfortable with participating in public processes to change the policies and systems that affect them. Invest in building community infrastructure by supporting the development of community leaders. Some ways to support community leaders include funding leadership training opportunities, assisting youth leadership programs, or paying community leaders to take a more active role in the planning process.

Hold listening sessions with priority populations

Listening sessions are facilitated discussions that provide a chance for community members to share their perspectives and for planners and other local government staff to hear directly from the community about how policies and planning decisions affect them. Listening sessions can also help cultivate relationships early in the planning process and create more buy-in from community members for participating in the planning process. When hosting these sessions, you as planners and policymakers should have little or no expectations about what will be discussed or what may come up for the participants. Remain open to receiving feedback, which may run counter to your own understanding of community priorities and concerns.

What are some additional resources?

- **Government Alliance on Race and Equity, Tools & Resources**
  This collection of resources, guides, tools, and issue papers on advancing racial equity in local government can be helpful in assessing and building a government's institutional readiness to advance racial equity.
- **Tri-Ethnic Center for Prevention Research, Community Readiness: A Handbook for Successful Change**
  This guide provides a framework for assessing community readiness for community change.
- **ChangeLab Solutions, Health in All Policies resources**
  This collection includes a toolkit, a roadmap, model policies, and sample language for general plans or comprehensive plans — all to help implement Health in All Policies strategies in local government.
- **Local Government Commission, Participation Tools for Better Community Planning**
  This resource provides guidance on different strategies for community engagement and can be used to develop strategies for community organizing and community building.



Public deliberation in comprehensive planning in Roanoke, VA

When the City of Roanoke, Virginia, began to develop their 2040 comprehensive plan, they knew that they wanted the community engagement process and strategic vision to be centered on health equity. The city's Department of Planning, Building, & Development worked with the New York Academy of Medicine and ChangeLab Solutions to develop and carry out a one-day public deliberation workshop with a cross section of residents from the Roanoke community.[73] Public deliberation is an approach that policymakers can use to tackle public policy problems that require consideration of both values and evidence.[74] At the workshop, participants received relevant background information about a particular issue and discussed possible solutions. They were then asked to help identify which Roanoke neighborhoods should have priority for Housing and Urban Development (HUD) community development funding and also to help identify the single criterion they felt was most critical for the department to review when determining neighborhood priorities for HUD funding. Through this process, community members gained skills and expertise in a planning topic and directly influenced a decision, increasing their capacity and interest in participating in planning processes. The planning department gained insights into the priorities of the community residents who would be most affected by these planning decisions. A post-deliberation survey highlighted that 87% of participants found the event very interesting and a similar number "strongly" agreed that city agencies should use public deliberations in their decisionmaking processes.

- **Urban Institute, Trauma-Informed Community Building and Engagement**
  This guide describes innovative, effective, and responsible community-building and engagement approaches that can support residents in priority communities who are facing marginalization and inequities.
- **ChangeLab Solutions, Pathways to Policy: A Step-by-Step Playbook for Young People Who Want to Change the World**
  This playbook for young people who are interested in advocacy and advancing change in their community provides specific guidance on each step of policy change.

3. Apply an equity approach to each phase of the planning process

An equitable planning process counters the prevailing approach to planning, increasing the likelihood that the plan will advance community health and equity. An equity-driven planning process integrates equity throughout each phase of planning. Planners should strive for equitable outcomes not only in the goals and policies outlined in the plan but also in how the plan itself is developed. Equitable planning should support significant, sustainable, and equitable health improvements. Such improvements require changes to laws, policies, and institutional procedures. These changes can occur as a result of the planning process as well as the goals and strategies that are identified in the plan and eventually implemented. Investments of resources and infrastructure directed as part of the implementation of a plan's goals and policies should be prioritized in areas that have experienced a legacy of disinvestment and in communities with the greatest need and the least resources. The location of capital improvements, physical infrastructure, and other investments are often guided by or aligned with a long-range plan.

Table 4 presents an overview of how to infuse equity into every phase of the planning process. The remainder of this section provides insights into how planners and policymakers can do just that.

Table 4: Equitable planning process

Phase	Description
Learn & Assess	The Learn and Assess phase includes concerted efforts to use qualitative, community-based data and analysis methods (in addition to quantitative data) to inform analysis of baseline conditions. The data used and the method of analysis can help to illuminate the experiences and problems of priority communities that can be addressed through the planning process and the plan itself.
Envision	The Envision phase uses a community-centered approach to develop the plan's vision for the community.
Plan	In the Plan phase, the goals and policies of the plan are created through an inclusive community engagement process, which results in goals, policies, and actions that center priority populations and are informed by their needs and perspectives. Community members and groups support the plan and actively advocate for its adoption.
Act	In the Act phase, the plan is implemented as intended and accomplishes identified community goals. Resources are obligated to the identified equity-based priorities. Community-based strategies, such as community advisory boards, are used to monitor the plan's implementation.

Phase 1: Learn & Assess

What is it?

The goal of the Learn and Assess phase is to come to a shared understanding of the baseline conditions and the strengths, assets, and challenges that exist within a community. Information gathered in this phase informs the planning process by describing the context of problems and by shaping which issues the plan should address.

In addition to quantitative data, qualitative data — gathered through interviews, focus groups, photovoice, surveys, community asset and deficit mapping exercises, neighborhood audits, and other methods — should be gathered, analyzed, and used to inform an assessment of baseline conditions. When planners describe a community in the Learn and Assess phase, they often rely too much on quantitative data, which may not provide a full picture of the multiple cumulative factors that influence neighborhood conditions, the health and well-being of community members, and the challenges they face. As a result, planners may fail to see all the possible policies or actions that could address community priorities and concerns.

Shifting to a robust mixed-methods approach to data analysis that uses both quantitative and qualitative data also shifts who are considered experts within the community and what information is considered valuable in the planning process. Information on community members' lived experiences provides context and deeper understanding of community concerns.

Why do it?

An equitable approach to learning and assessment in planning is important because the information gathered shapes planners' understanding of the community and the problems that need to be addressed through the plan. What is measured and the information examined also shape understanding of the universe of potential solutions. Only by gathering complete information and measuring what matters to a community can you as planners adequately understand the scope of the problems and the possible solutions that can address inequities.

What actions are needed?

Centering priority populations in the Learn and Assess phase provides many opportunities to ensure that the information gathered reflects community perspectives, knowledge, and lived experiences. Here are some effective ways to center priority populations:

Use people-centered strategies to understand neighborhood conditions; community strengths and assets; and the cumulative, overlapping inequities that residents are experiencing. Develop an

An equitable approach to learning and assessment in planning is important because the information gathered shapes planners' understanding of the community, the problems that need to be addressed, and the universe of potential solutions.

advisory group to help devise a data collection and analysis plan that centers community priorities in its goals, assessment questions, and data collection and analysis techniques. Some participatory methods of data collection and analysis that might be appropriate for the Learn and Assess phase are described later in this section. These methods can inform the planning process by highlighting community assets and strengths as well as identifying challenges. Priority populations are often measured by their deficits or what they lack. However, resilience factors that help them survive and thrive — such as social networks, community leaders, cherished neighborhood resources and institutions — are also key elements to identify in the Learn and Assess phase. Communities should be defined by their aspirations and contributions rather than only by what they lack or their adversities.[75]

Understand identified community problems in terms of race, income, and other patterns of inequity. To the extent possible, quantitative data collected should be disaggregated by race, class or income, or other indicators. Disaggregating the data will help community stakeholders, policymakers, and other government officials better understand the patterns of structural disadvantage and the degree of inequities or gaps between population groups or geographic areas.

Use appropriate data collection methods that center communities' perspectives and expertise, and report back on how data are being used. Data collection methods should be chosen carefully and intentionally to elicit needed information. Community members may want to participate in gathering data about their community, and they will have insights on the best ways to do so. However, some communities may also feel that they've been studied to death; in these cases, what's missing may be accountability for how information or data collected are or are not being used to shape policy actions.[76] Mechanisms for reporting back on how information is being used to inform the process of planning are an important consideration.

Different data-gathering techniques and research methods can be employed to introduce a more inclusive, people-centered approach in the Learn and Assess phase. Here are some examples of people-centered qualitative data collection approaches and techniques:

- **Interviews and focus groups.** Interviews and focus groups are important qualitative data collection methods. Interviews are usually defined as a conversation with a purpose. They can be very helpful when information is needed about a community's assumptions and perceptions. Interviews can also provide more in-depth information and context on a particular topic or issue.[77] Focus groups are small-group discussions guided by a facilitator. This format can be used to explore opinions on a topic in order to gain insights and additional perspectives. Focus groups are usually structured around a discussion topic but can also be flexible enough to allow group members to bring up new issues that then can be explored by the whole group. Focus groups can yield a lot of information in a relatively short time.[78,79]

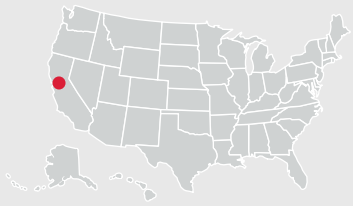
- **Ground-truthing.** Ground-truthing is a process of validating quantitative data through on-the-ground observations.[80] Community members have their own observations and expertise about their neighborhoods and may have an understanding that can either verify or correct data collected about their neighborhood from secondary data sources.[81] Members of the community ground-truth the data by verifying that the data are up to date, reflect reality as they know it, and are complete and accurate. Community members can even supplement the data with community-based mapping and monitoring to improve the data set's quality and utility.[82] A ground-truthing process can bridge the gap between technical, quantitative data and the expertise of local residents, as well as aid the development of working relationships.[83]
- **Community data collection.** Partner with the community to gather or verify data. As described earlier, one important strategy for fostering community readiness to participate in equitable planning is to invest in building community leadership and understanding of planning. Two ways to make this investment are by partnering with community groups or individual community members to (1) ground-truth secondary data or (2) collect new data. Community groups and residents may be effective at collecting needed community data that would be difficult for institutional planners or consultants to obtain. Community groups or individuals can be trained to lead focus groups or interviews, help collect survey data, or gather observational data in their neighborhoods. As experts on their own communities, community stakeholders may be able to advise on the best methods for collecting needed information. When paired with paying community stakeholders a living wage for their labor in contributing to data collection and verification, these approaches can help to facilitate community leadership, build long-term capacity, and improve the economic conditions of community residents.
- **Community-based participatory research (CBPR).** In CBPR, community members partner with researchers, institutions, or government agencies to conduct research and analysis. A core concept of CBPR is that community members take an active leadership role in shaping the research goals and approaches. CBPR should be used only when there is adequate time to properly train and acclimate community researchers.[84] CBPR can offer a more accurate and complete understanding of an issue, its causes, and its impact on the community than conventional research.[85] Disadvantages of CBPR are that it can be more resource-intensive and usually takes longer than traditional analysis methods, so it may not be viable when time and resources are limited.[86]
- **Asset mapping.** Community-based asset mapping provides information about the strengths and resources of a community, illuminating factors that help communities survive and thrive. Once identified, these assets can help uncover or become part of potential planning solutions to address inequities and foster community health.

Centering priority populations in the Learn and Assess phase provides many opportunities to ensure that the information gathered reflects community perspectives, knowledge, and lived experiences.

Community assets might include schools, parks, community centers, hospitals or community clinics, churches or other religious institutions, or other community organizations.[87,88,89]

- **Data Walks.** A Data Walk is a means of sharing key data and research findings with stakeholders in small groups, who interpret the data and then collaborate to improve policies or programs. Using data sharing as a platform for collaboration, a Data Walk can help to ensure a more robust analysis and understanding of the data; inform better policies that address both the strengths and needs of a particular community or population; and inspire individual and collective action among community members.[90]
- **Photovoice.** Photovoice is a process in which people capture and share aspects of their environment and experiences through video and/or photos in order to spur change.[91] Participants typically produce a series of photos and text descriptions that depict their day-to-day experiences in their neighborhoods or at school, work, or various activities. This technique fosters self-expression and promotes awareness of myriad community assets as well as social inequities that community members face daily.

YOUTH ENGAGEMENT IN RICHMOND, CA'S SOUTH SHORELINE SPECIFIC PLAN



In 2012, the City of Richmond, California, received a grant from regional planning agencies to create the South Shoreline Specific Plan. The City of Richmond partnered with the Center for Cities + Schools at the University of California, Berkeley, to engage Richmond High School students in the plan's research and development process, using the Y-PLAN youth engagement process.[92] The Y-PLAN model serves as a mechanism for community engagement, with the aim of changing the way that planners and civic leaders think, plan, and act. The South Shoreline planning process involved five phases of planning:

PHASE 1: START-UP AND PROJECT IDENTIFICATION

Teachers at Richmond High School integrated the Y-PLAN youth engagement process into the school curriculum. Students worked with the Richmond city manager, city staff, educators, community partners, and professional planners to generate proposals.

PHASE 2: MAKING SENSE OF THE CITY

Students drew mind maps of their route to school and the larger community. They also conducted interviews and distributed and analyzed more than 600 surveys on transportation issues in the community. In addition, the students learned about the history of their community and the planning process.

PHASE 3: INTO ACTION

Students participated in an "urban inspiration tour" of San Francisco and Berkeley and applied what they observed and learned to a design charrette with city planning professionals.

PHASE 4: GOING PUBLIC

Students presented their perspectives, ideas, and feedback on how the planning process was working to city councilmembers, community stakeholders, and parents at Richmond City Hall.

PHASE 5: LOOKING FORWARD, LOOKING BACK

The students' proposals were incorporated into improved public transportation services, including availability of shelters, lights, restrooms, maps, an app for the bus schedule, public space, and art. In addition, the values articulated by the students through the Y-PLAN process are now core principles for city planning in Richmond.

What are some additional resources?

- **Pacific Institute, Measuring What Matters: Neighborhood Research for Economic and Environmental Health and Justice in Richmond, North Richmond, and San Pablo**
  This report documents an example of neighborhood research using participatory research methods, including oral histories and qualitative and quantitative data collection. While collecting data, researchers aimed to build the capacity of local community-based service organizations to make social change.

- **Center for Community Health and Development, University of Kansas, Community Tool Box**
  This website provides resources on building healthier communities, with toolkits on community assessment, strategic planning, developing an organizational structure, leadership and management, analyzing community problems and solutions, cultural competence and spirituality in community building, evaluating community programs and initiatives, and more.

- **Urban Institute, Data Walks: An Innovative Way to Share Data with Communities**
  This tool describes how to plan for a Data Walk as a means of sharing data and research findings with community stakeholders. A Data Walk is an interactive way for community stakeholders — including residents, researchers, program administrators, local government officials, and service providers — to engage in dialogue on research findings about their community.

- **Robert Wood Johnson Foundation, The Power of Data for Healthy Communities: How Can Data Illuminate Health Gaps and Be a Powerful Tool for Change?**
  This document includes data resources that allow communities to uncover health challenges, better target resources, and measure progress toward community health.

Phase 2: Envision

What is it?

The Envision phase is the process of developing a planning document's vision for the community. The vision sets the framework and direction for the objectives, policies, and strategies in the plan. The vision also unifies community members, local government, elected officials, and other stakeholders around shared values and hopes for the future.

Visioning is the process of developing consensus about the future that a community wants. The vision is then used to guide the identification of solutions that are needed to achieve it. The outcome of the visioning process — the vision statement — captures what the community hopes to become based on what they most value.[93] In addition to the vision statement, some localities adopt a set of guiding principles or community goals to further define how the vision is to be actualized. The vision statement is usually developed in concert with the community and involves a diversity of stakeholders. However, additional steps can be taken to ensure that development of the vision is community-centered, is committed to equity and health, and seeks to address the drivers of health inequities.

Why do it?

The community's vision is the plan's North Star and provides the basis for decisions about what planning policies and actions will be used to achieve it. Planners keep the community vision in mind when drafting and implementing the plan's goals, policies, and action steps. A vision is also used to provide guidance when circumstances or opportunities arise that are not explicitly covered by the plan. The vision should be informed by priority populations, so that it reflects the lived realities of the people with the greatest needs and the least resources.

What actions are needed?

Everyone has the right to live their healthiest life, regardless of their race, ethnicity, income, class, gender, sexual orientation, age, or ability — all of which should be reflected in the plan's vision statement.

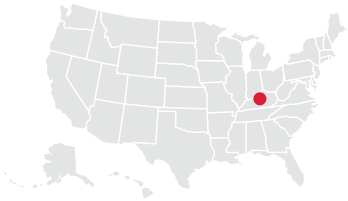
These activities can be undertaken to create a community vision that reflects a commitment to health and equity:

Conduct inclusive visioning workshops. Community visioning workshops should be designed to encourage participation by all segments of the community, including priority populations. Incorporate the actions outlined earlier in the **"Inclusive community engagement strategies" section** to ensure that your meetings meet the needs of community members. Use an array of interactive methods to elicit input and feedback on the community vision and make the discussions accessible, inviting, and fun.

Create a vision statement with input from priority populations. After developing a draft vision from the information gathered, workshop the draft vision statement with priority populations before the vision is finalized, to elicit their feedback and ensure that it is understandable across cultural barriers and reflects their interests and hopes for their community.

What are some additional resources?

- **National Civic League, The Community Visioning and Strategic Planning Handbook**
  This still-useful guide lays out a framework for successful community planning processes.
- **Community Tool Box, Developing and Communicating a Vision**
  This resource provides guidance on developing a vision and getting feedback from community members.



Operationalizing equity in Louisville's Plan 2040 vision

Louisville Metro in Kentucky adopted Plan 2040, their comprehensive plan, in 2019, with the following vision statement:

"In 2040, Louisville Metro is a vibrant and diverse community that is connected, healthy, authentic, sustainable and equitable, with compassionate citizens and memorable places among its greatest assets and where all people are able to achieve their full potential."

The plan also identifies five principles: connected, healthy, authentic, sustainable, equitable. These are referred to as the *CHASE Principles*. The CHASE Principles were used throughout the community engagement process and were also used to guide development of the plan's objectives.[94]

Phase 3: Plan

What is it?

The Plan phase is the heart of the long-range planning process. In this phase, planning goals, policies, and actions are designed and written into the planning document, which should be shaped to reflect the community's vision for the future, address community concerns and needs identified in the Learn and Assess phase, and highlight and build on the strengths and assets of the community. Inclusive engagement tactics should be used to engage priority populations in crafting the plan.

The Plan phase also encompasses adoption of the long-range plan. Adopting the plan is an important step taken by local government — usually a governing body like a planning board, city or town council, or county commission — to demonstrate the community's commitment to implementing the plan, including its goals, policies, and actions. By adopting a plan, the governing body formalizes the jurisdiction's commitments and establishes legal justifications for future policies that further the goals identified in the plan. Formally adopting a plan and also implementing it through updates to the zoning code and other local ordinances helps ensure government accountability, creating a written record of the jurisdiction's commitments that residents and advocates can sometimes utilize to challenge actions that run contrary to the goals identified. If an equitable process was used to develop the plan, community members are more likely to support it and actively advocate for its adoption.

Unless concerted and intentional efforts to counter business-as-usual planning tactics are undertaken, a plan runs the risk of maintaining the status quo or creating, exacerbating, or replicating distributional inequities and structural disadvantage.

Why do it?

The primary objective of an equitable planning process is to devise goals and policies that (1) reflect the community's vision and priorities, and (2) address inequities. Unless concerted and intentional efforts to counter business-as-usual planning tactics are undertaken in the Plan phase, a plan runs the risk of maintaining the status quo or creating, exacerbating, or replicating distributional inequities and structural disadvantage.

During the Plan phase, the planning process can be shaped by using inclusive community engagement techniques, and the plan can be written to avoid the equity pitfalls described earlier: procedural inequity, structural inequity, and distributional inequity. The plan can support procedural equity by including goals and policies that advance increased public participation.[95,96] The plan can also incorporate policies and actions that ensure the equitable distribution of supportive investments, resources, and services. And the plan can support government practices and policies that help to institutionalize new equity-based approaches (structural equity). An equitable planning approach in the Plan phase can also increase community buy-in for adoption and implementation of the plan.

What actions are needed?

Planners can take several steps to bolster equity in the Plan phase:

Use innovative design strategies such as co-design or human-centered design principles, when feasible, in developing planning goals, policies, and actions. Innovative strategies, such as co-design or human-centered design, can help a planning team put people at the center of how their plan is developed. In the public sector, co-design or human-centered design means that the government designs its plans and policies with the individuals and communities that stand to benefit or be greatly affected by the changes at the center of the design process. Principles of human-centered design include embracing iteration; being grounded in the needs, wants, and capabilities of the people being served; and being responsive to the experiences of people served by the policy.[97] The concepts of co-design and human-centered design are new to the public sector and have not been widely adopted, tested, or clearly defined, but they are innovative practices for local governments that are willing to test out new ideas and approaches in policymaking.

In Australia, co-design, or participatory design, has been applied in large public projects.[98] Co-design, as the Australians have applied it, actively involves all stakeholders in the design process, to ensure that the results meet their needs and address their issues.[99] Co-design is built on the belief that all people are creative and that, as experts on their own experiences, they should be involved in designing the policies and programs that affect them.[100] Thus, this design model challenges the usual role of experts.

Although use of these innovative design strategies in government processes have not yet been rigorously evaluated, they have potential benefits; for example, these strategies may generate more planning and policy innovations, ensure that policies match the needs and unique context of communities, foster cooperation and trust, engage stakeholders in meaningful ways, secure buy-in and support for change, and build social capital and trust in government.[101] When equity is a priority, co-design and human-centered design strategies can be used to place priority populations at the center of the planning process.

Develop planning goals, policies, and actions that support the participation of priority populations in public decisionmaking (increase procedural equity). Include goals and policies that foster inclusive community engagement. This step advances procedural equity by codifying enhanced community participation practices in the plan. As we discussed earlier, public participation processes are often outdated and run the risk of generating outcomes that do not serve the interests of the community, especially priority populations. Policies that mandate public participation can be strengthened — for example, by increasing the accountability of government agencies for responding to feedback received, tracking public participation rates, adopting jurisdiction-wide policies on community engagement, or setting annual community participation goals.[102]

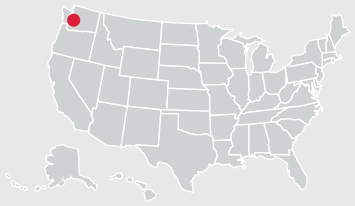
Applying human-centered design to promote healthy housing

The Civic Design Lab (CDL) is a civic innovation lab within the City of Oakland, California. CDL applies human-centered design and systems thinking to address issues such as economic opportunity and affordable, healthy housing.

In 2017, CDL engaged renters, property owners, and other stakeholders in designing a human-centered service delivery model for the city's proactive rental inspection ordinance and program. The policy design process included research on users through surveys, interviews, and community workshops, as well as development of early prototypes to capture the process of implementing a proactive rental inspection policy and potential financing models.

Through the community engagement and research process, the team gained valuable insight into the unique needs of renters and property owners; mechanisms that would need to be incorporated into the policy to ensure successful implementation; and the importance of the semantics and the framing used to communicate about the policy, given that some terms sparked negative connotations or expectations.[103]

INSTITUTIONALIZING COMMUNITY ENGAGEMENT IN SEATTLE, WA'S COMPREHENSIVE PLAN



The City of Seattle's comprehensive plan, Seattle 2035, confronts the topic of community engagement in the city's decisions and community planning process by including a dedicated chapter on community involvement.[104] In this chapter, the plan outlines policies to achieve the goals of providing opportunities for inclusive and equitable community involvement and working with a broad range of community members to plan for future homes, jobs, recreation, transportation options, and gathering places in their community. The City of Seattle has long been dedicated to racial and social justice and was one of the first cities in the country to undertake an effort that focused explicitly on institutional racism.[105] Seattle's comprehensive plan further commits the city to fostering racial justice by increasing procedural equity.

Selected policies in the Seattle 2035 plan that institutionalize community engagement include the following:

CI 1.2 Create systems that are reflective of and accessible to communities throughout the city to equitably involve community members in City decision-making.

CI 1.7 Effectively and efficiently manage the use of City and community resources to plan and implement community involvement.

CI 1.9 Seek to reflect the diversity of the city in the membership of city-appointed boards and commissions.

CI 2.4 Encourage transparency in the development and updating of community plans by:

- Establishing a project committee that reflects community diversity;
- Creating, with community involvement, a detailed project description with the purpose of defining the plan, tasks, timeline and anticipated products;
- Creating, with the project committee, a community involvement plan outlining the tools and methods to be used, and how results will be communicated;
- Monitoring implementation of plans over time; and
- Providing sufficient funding for each step.

CI 2.12 Provide sufficient funding and resources to work with communities to update community and neighborhood plans to maintain their relevancy and consistency with community goals and the citywide policies of the Comprehensive Plan.

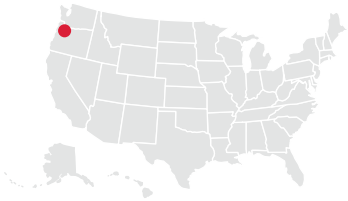
Craft goals and strategies that will result in equitable distribution of community benefits and burdens (increase distributional equity). Long-range plans should encapsulate goals, policies, and actions that advance distributional equity. To address distributional equity, you as planners should include strategies to redress historical harms and prioritize implementation of actions first where need is greatest. Planners should also understand how planning goals and strategies might exacerbate existing inequities in access to neighborhood goods and services or exposures to environmental hazards. Many local governments want to explore new policy approaches that address complex social problems and create new avenues that will allow individuals and communities to thrive. One example of such an innovative policy approach is targeted universalism.

Targeted universalism could help achieve distributional equity by setting universal goals (goals that aspire to serve everyone) that can be achieved through targeted approaches for different groups. This approach recognizes that different groups of people need different supports to achieve universal goals, depending on how these groups are situated across geographies and within society and cultures.[106]

An example of targeted universalism is a $100 million road-paving plan initiated by the City of Oakland, California. In planning its paving projects, the city prioritized low-income areas and places inhabited predominantly by communities of color — areas of the city that have historically received the least infrastructure repairs and investments.[107] Targeted universalism has some challenges, such as the potential for concerns among the public and decisionmakers about unfairness, deservingness, and shifts in the balance of power.

Analyze potential equity trade-offs. During the Plan phase, it cannot be assumed that all objectives and policies that are included to support healthy communities will always yield equitable benefits, despite the best intentions of those who develop and implement plans. Any public policy decision can produce unintended consequences, and it is important to understand whether and how policies and actions that have been identified might sustain, exacerbate, or even create inequities. Only by understanding potential trade-offs can actions be taken to lessen potential negative impacts.

For example, in the case of transportation investments, trade-offs include the potential for increased property values, speculation, and development pressures that could lead to neighborhood gentrification and displacement of residents.[109] In the case of Vision Zero,[110] a strategy to eliminate all traffic fatalities and severe injuries while increasing safe and healthy mobility, ensuring safety on roadways is a central tenet. One of their main strategies for ensuring safe speeds is a focus on police enforcement of traffic safety laws, particularly speed limits. The problem with relying on police enforcement is the outsize risk that Black people and other people of color face when they encounter law enforcement.[111] Philando Castile, Sandra Bland, Walter Scott, and Samuel



Portland, OR's Preference Policy addresses past housing discrimination

In 2015, the Portland Housing Bureau (PHB) created the North/Northeast (N/NE) Neighborhood Housing Strategy to address displacement in the area through investments in new affordable rental housing, opportunities for first-time home buyers, and home retention programs for longtime residents. A key component of the strategy is the N/NE Preference Policy, which is an effort to address the harmful impacts of urban renewal and displacement that mostly affected Black and brown communities.[108] The Preference Policy gives priority to current and former longtime residents of the N/NE Portland community for city-funded affordable rental housing, homeownership opportunities, and down payment assistance for first-time home buyers. When any of these opportunities becomes available in N/NE Portland, PHB will open a waiting list for those interested in the housing opportunity.

Under the plan, priority status for housing or financial support goes to those who can show that they or their family were forced to move to make way for redevelopment projects through eminent domain. Applications are scored with "preference points" based on whether the applicant is a current or former resident or whether the address of an ancestor or guardian falls within one of the identified areas where displacement or gentrification occurred as a result of the city's plans.

Dubose were all Black drivers whose life ended after being pulled over by police for minor driving infractions. In June 2020, the Vision Zero Network de-emphasized police enforcement as a strategy for safer streets.[112]

To address the potential for negative outcomes, planners and decisionmakers should conduct an analysis of equity trade-offs in order to better understand and mitigate potential unintended consequences of planning and policy decisions. This analysis would help the planning team understand not only the impacts of the explicit intent of the policy but also the multitude of potential indirect and unintended consequences. Analysis of impacts on health and social equity should be based on the best understanding of the potential consequences; such an analysis should include a survey of peer-reviewed literature, case studies, white papers, and research reports and should also be informed by members of priority populations. When a planning team understands the potential equity trade-offs of their planning decisions and works to mitigate potential negative impacts, they are more likely to generate the equitable outcomes they are aiming for.

When a planning team understands the potential equity trade-offs of their planning decisions and works to mitigate potential negative impacts, they are more likely to generate the equitable outcomes they are aiming for.

Health impact assessment (HIA) is an example of an interdisciplinary analytic approach that can assist decisionmakers and other stakeholders in examining the full range of health and equity implications of policy decisions.[113] HIA is a six-step process that identifies, assesses, and communicates potentially significant health impacts that might otherwise be excluded from review, aiding policymakers in understanding how a decision will affect a number of drivers of inequities. The City of San Francisco used HIA to conduct health analyses of development projects and collaborate with city agencies and community groups — all with the aim of integrating health into environmental planning practices. The San Francisco Department of Public Health became the first city agency in the country to use HIA to capture the physical and social environmental health impacts of projects and plans.[114]

Include policies and actions that codify governmental commitment to equity (increase structural equity). Plans can incorporate policies and actions that solidify local government's commitment to inclusive practices and equitable outcomes. These policies and actions aim to institutionalize lasting changes in how government works and who it works for. Planning policies, for example, could delineate how community engagement is operationalized and practiced across local government, how resources are distributed and what considerations go into forming capital budgets, how innovative approaches to public decisionmaking are implemented, or how agencies and departments collaborate and coordinate their efforts to achieve collective goals.

HEALTH IN ALL POLICIES IN CHATHAM COUNTY, NC'S COMPREHENSIVE PLAN

The public health and planning departments in Chatham County, North Carolina, started collaborating in 2013 when they developed their local Pedestrian Master Plan, which was the first of its kind to consider access to healthy foods. They took this thinking a step further in developing the Chatham County Comprehensive Plan, which was adopted in 2017 and embraces a Health in All Policies approach. One of the overarching goals of the plan is "Foster a healthy community," and the health element of the plan identifies the overarching theme (referred to as a *big idea*) "Assure effective integration of health, healthcare, and equity in Chatham's plans, programs, projects, and policies." These goals are operationalized through the recommendations, policies, and strategies identified in the health element, which encourage cross-governmental collaboration and institutionalize the HiAP approach.[115] Select excerpts from the comprehensive plan are included here:[116]

Recommendation 01. Improve community health through systems level planning.
HL Policy 1. Adopt a Health in All Policies (HiAP) Approach.

- Strategy 1.1. Develop and promote cross-sector relationships.
- Strategy 1.2. Incorporate an equity lens into the HiAP strategies, goals, policies, and processes.

Recommendation 04. Build a comprehensive and integrated healthcare system that ensures adequate access for all residents.
HL Policy 7. Facilitate the integration of various types of healthcare facilities into developed and developing areas.

- Strategy 7.1. Allow healthcare facilities in mixed-use development and near residential areas provided site/building design and operations ensure compatibility.

Recommendation 06. Promote "healthy community" design.
HL Policy 12. Establish a framework for guiding public and private investments so the end results are environments that are conducive to healthier living.

- Strategy 12.1. Adopt regulatory standards and/or guidelines that contribute to the creation of a healthier community. As part of the process of amending the regulations and related plan review processes, consider developing a "Healthy Community Checklist."

What are some additional resources?

ChangeLab Solutions

- **Resources on Healthy Neighborhoods**
  This library of resources includes tools, model policies, and success stories related to planning, transportation, land use, housing, shared use, workplace wellness, parks, and other topics.
- **Long-Range Planning for Health, Equity & Prosperity: A Primer for Local Governments**
  This guide presents a framework for aligning health equity policies across local government departments and broad guidance on incorporating equity in long-range planning, community engagement, investment, and evaluation processes.
- **How to Create and Implement Healthy General Plans**
  This toolkit includes how-to steps, resources, and model policy language for developing a healthy general plan.
- **Health in All Policies in General Plans**
  This document provides sample language for integrating a Health in All Policies approach into general plans.
- **A Blueprint for Changemakers: Achieving Health Equity Through Law & Policy**
  This resource describes the fundamental drivers of health inequities and outlines ways to leverage the unique power and efficacy of local policy solutions, incorporate Health in All Policies, and engage diverse community members in the policy process.

American Planning Association

- **Planning for Equity Policy Guide**
  This resource outlines recommended policy actions for achieving equitable outcomes across a range of planning topics.

Government Alliance on Race and Equity

- **Racial Equity Action Plans: A How-to Manual**
  This manual provides guidance for local governments on how to develop their own Racial Equity Action Plan, including tools for research and information gathering and a template for a Racial Equity Plan.
- **Advancing Racial Equity & Transforming Government, Section 3. Implement Racial Equity Tools**
  This summary of common elements across racial equity tools can inform development, implementation, and evaluation of policies, programs, and practices that advance racial equity.

Providence, RI's Climate Justice Plan

The City of Providence, Rhode Island's Climate Justice Plan was co-developed by the city's Office of Sustainability and the Racial and Environmental Justice Committee of Providence![17] It includes seven key objectives, over 20 targets, and over 50 strategies aimed at creating an equitable, low-carbon, climate-resilient city. Through this plan, the city made it a priority to lead its response to climate change with racial equity and environmental justice. City officials also used an equitable planning process in creating the plan. As a result, the plan emphasizes equity in the design of its objectives, targets, and strategies. For example, in allocation of investments and resources, the plan prioritizes communities facing disproportionate environmental impacts due to a legacy of marginalization and disinvestment. The plan also commits the city to ensuring that those who are most affected by climate change in Providence are centered in the decisionmaking process for crafting and implementing solutions.

Phase 4: Act

What is it?

The Act phase involves implementing the goals, policies, and actions outlined in the planning document, in order to achieve the community's vision. This phase focuses on implementation of actions where the need is greatest by establishing an equity-based prioritization process. In addition to the planning document itself, an implementation plan should be created, to outline which local government agencies, departments, or offices are accountable for the plan's execution and success. An implementation plan also sets priorities for the policies and actions outlined in the plan, based on criteria specified. Additionally, the goals, policies, and solutions identified in the plan will often need to be implemented through codification in local ordinances and codes — for example, by changing local land use zoning regulations.

The Act phase also employs community-based strategies for monitoring implementation and tracking progress toward the plan's goals.

Why do it?

The Act phase is critical to achieving the community's vision and the plan's goals. Measures should be taken to engage with priority communities in order to prioritize and implement actions that generate intended equity benefits. It is also necessary to engage priority communities to determine whether plan implementation is successfully addressing the needs and issues they identified as part of the plan's preparation.

What actions are needed?

Set priorities for implementation of policies and actions. Because communities have competing interests and needs, and local governments have limited resources for implementation, careful consideration should be given to determining a prioritization process that takes into account all of these factors. Fundamentally, in an equitable planning process, criteria for implementation should be based on equity. You should start with the community vision and goals that were identified in the Envision phase. Prioritization can be geographically focused — for example, in specific neighborhoods or areas of your community that have experienced systemic disinvestment — or it can be based on population groups who are facing pressing community problems but are not located in a single geographic area. Once chosen, the equitable prioritization scheme is used to rank actions for implementation.

Inclusion of equity criteria in Denver, CO's implementation plan

The Denver Neighborhood Equity Index, produced by the Denver Department of Public Health & Environment, maps data on socioeconomic factors, the built environment, access to health care, and morbidity and mortality, to help decisionmakers prioritize where city investment and resources are most needed. An Equity Index score is calculated by averaging the ranking of each indicator, and every neighborhood is ranked on a scale of 1–5.

The city modified the Equity Index slightly to show changes in the indicators over time and used this as a health metric for the Healthy and Active element of the Denver Comprehensive Plan 2040.[118] The plan identifies a goal of reducing health inequities between Denver neighborhoods. Success in this metric will be measured by statistics for the lowest-scoring neighborhoods compared with the highest-scoring neighborhoods for each component of the Neighborhood Equity Index.[119,120]

The following criteria could be used for prioritization:

- Level of urgency or need for action (including input from priority populations about their needs)
- Estimated level of effort or cost necessary to implement an action
- Anticipated impact or value of an action in advancing or impeding equity, which can be based on community feedback[121] or an analysis of potential equity trade-offs

Develop a community advisory board. Conventionally, a local governing board or commission, like a planning commission, would be responsible for implementation of a plan. A community advisory board (CAB) should be developed to help monitor implementation as well as advise the board or commission that is ultimately responsible for implementing the plan. The CAB should consist of members of priority populations, along with representatives of other community stakeholders — like community-based organizations, advocates, associations, and local businesses — to ensure that the plan is carried out as intended and that it generates the desired outcomes. Progress reports and plan implementation updates should be shared with the CAB on a routine basis.

The Act phase focuses on implementation of actions where the need is greatest by establishing an equity-based prioritization process.

Establish performance metrics. As part of tracking and reporting, identify performance metrics that measure progress toward the goals stated in the plan. Performance measures can be used to assess the effectiveness of the plan's implementation. Tracking progress also helps to illuminate what is working well and what adjustments might be needed to better support community goals.

What are some additional resources?

- **Municipal Research and Services Center of Washington, Local Government Citizen Advisory Boards**
  This resource includes examples, options, and model practices for forming advisory boards in local government.
- **Federal Highway Administration, Guidebook for Developing Pedestrian & Bicycle Performance Measures**
  This guide highlights possible pedestrian and bicycle performance measures to help communities at local, regional, and state levels develop performance management strategies for transportation that are tailored to local context and needs.
- **ChangeLab Solutions, Complete Parks Indicators: A Systemic Approach to Assessing Parks**
  This guide presents indicators and sample metrics for assessing and monitoring seven elements of a parks system.
- **American Planning Association, Metrics for Planning Healthy Communities**
  This toolkit was developed to help planners integrate health into planning practice and decisions.

MINNEAPOLIS, MN'S ELIMINATION OF SINGLE-FAMILY ZONING

Single-family zoning policies in cities across the United States have created sprawling development patterns and excluded low-income Black and brown communities from affordable housing opportunities.[122] By adopting Minneapolis 2040, its comprehensive plan, in 2019, the City of Minneapolis became the first jurisdiction in the country to declare its intent to redress its history of exclusionary and discriminatory housing policies by abolishing single-family zoning, thereby increasing the city's supply of affordable housing.[123,124] Minneapolis 2040's Policy 1 (Access to Housing: increase the supply of housing and its diversity of location and types) connects the city's lack of housing choices today with zoning regulations and racially restrictive housing policies that limited access to housing based on race and income in the city. Minneapolis's planners saw an opportunity to foster inclusive communities in Minneapolis, free from barriers to housing choice.[125]

To implement the goals and actions articulated in the Minneapolis 2040 plan, the Minneapolis City Council introduced a policy to eliminate single-family zoning and update the zoning code to allow multi-family development on land that was previously zoned for single-family housing. In addition to this zoning change, the policy also allows more housing density near transit stops (allowing buildings of three to six stories), eliminates minimum off-street parking requirements, includes a provision for inclusionary zoning that requires that 10% of units in new apartment developments be set aside for moderate-income households, and commits $40 million (an increase from $15 million) to address homelessness and support low-income renters.

Advocates were successful in passing this policy because they argued that it would increase the supply of housing and make the city more affordable; make the city more equitable by reducing racial and economic segregation; and help to mitigate climate change by allowing more housing to be built near transit and by promoting multi-family housing, which is more energy-efficient than single-family housing.[126]

Conclusion

We can't erase our communities' history of harmful and discriminatory policies and planning practices, but we can take intentional actions to prioritize communities that are experiencing marginalization and disinvestment; build trust and relationships between local government and communities; and plan for healthier and more equitable communities. An equitable planning approach takes time, resources, and willingness on the part of both local government and community members to authentically engage in the planning process and learn from each other's experiences and expertise. We hope that the strategies, ideas, and tools for embedding equity into planning practices as well as the community examples described in this playbook can be used to inspire change and leadership toward healthier and more equitable communities.

Acknowledgments

This publication was written by Tina Yuen and Jessica Nguyen and published in December 2020. Additional assistance was provided by Erik Calloway, Saneta deVuono-powell, Gregory Miao, Shauneequa Owusu, Kimberly Libman, Jessie Wesley, and Heather Wooten. Editorial and design support was provided by Carolyn Uno and Kim Arroyo Williamson. This guide was based on formative research conducted and early concepts developed in part by Katie Michel, Cesar De La Vega, and Chassidy Hanley. All are affiliated with ChangeLab Solutions.

The authors would like to extend a huge heartfelt thank-you to our interviewees, who shared their vast knowledge of planning and equitable development with us. Interviews were conducted with Beth Altshuler Munoz (independent consultant; formerly with Raimi + Associates); Tamika Butler (Tamika L. Butler Consulting, LLC); Karen Nikolai (Community Health Improvement Partnership, Hennepin County); Sagar Shah (American Planning Association); and Miguel Vazquez (Riverside University Health System–Public Health).

Additionally, thank you to our external reviewers, Joe Schilling (Urban Institute) and Debarati "Mimi" Majumdar Narayan (Health Impact Project, The Pew Charitable Trusts), for their invaluable feedback.

This publication was supported by a grant from The California Endowment.

Design & illustration: Karen Parry | Black Graphics

References

1 Weinstein E, Wolin J, Rose S. *Trauma Informed Community Building: A Model for Strengthening Community in Trauma Affected Neighborhoods*. San Francisco, CA: BRIDGE Housing Corporation; 2014. **bridgehousing.com/PDFs/TICB.Paper5.14.pdf**.

2 Minkler M. *Community Organizing and Community Building for Health and Welfare*. 3rd ed. New Brunswick, NJ: Rutgers University Press; 2012.

3 Community resilience. RAND Corporation website: **rand.org/topics/community-resilience.html#:~:text=Community%20resilience%20is%20a%20measure,and%20recover%20from%20adverse%20situations**. Accessed October 6, 2020.

4 Weinstein E, Wolin J, Rose S. *Trauma Informed Community Building: A Model for Strengthening Community in Trauma Affected Neighborhoods*. San Francisco, CA: BRIDGE Housing Corporation; 2014. **bridgehousing.com/PDFs/TICB.Paper5.14.pdf**.

5 Ross L, Wood S, Burgy D, et al. *Planning for Equity Policy Guide*. Chicago, IL: American Planning Association; 2019. **planning-org-uploaded-media.s3.amazonaws.com/publication/download_pdf/Planning-for-Equity-Policy-Guide-rev.pdf**.

6 Equity vs. equality and other racial justice definitions. Annie E. Casey Foundation website: **aecf.org/blog/racial-justice-definitions/?gclid=CjOKCQjw2or8BRCNARIsAC_ppyZ92a5W9RYTNMIyze9JxnT4Iz1PzBxQ-nvoRJDYFAFvJ66DT4rcaUEaAt-cEALw_wcB**.

7 Learn the Eight Dimensions of Wellness [poster]. Rockville, MD: Substance Abuse and Mental Health Services Administration; April 2016. **store.samhsa.gov/product/Learn-the-Eight-Dimensions-of-Wellness-Poster-/SMA16-4953**. Accessed October 15, 2020.

8 Constitution: WHO remains firmly committed to the principles set out in the preamble to the Constitution. World Health Organization website: **who.int/about/who-we-are/constitution**. Accessed October 15, 2020.

9 Weinstein, JN, Geller A, Negussie Y, Baciu, A, eds. *Communities in Action: Pathways to Health Equity*. Washington, DC: National Academies Press; 2017.

10 *Healthy Communities Policy Guide*. Chicago, IL: American Planning Association; 2017. **planning-org-uploaded-media.s3.amazonaws.com/document/Healthy-Communities-Policy-Guide.pdf**.

11 Braveman PA, Kumanyika S, Fielding J, et al. Health disparities and health equity: the issue is justice. *Am J Public Health*. 2011;101(suppl 1). **ajph.aphapublications.org/doi/pdfplus/10.2105/AJPH.2010.300062**. Accessed October 15, 2020.

12 *UC Berkeley Strategic Plan for Equity, Inclusion, and Diversity*. Berkeley: University of California; 2009. **diversity.berkeley.edu/sites/default/files/speid_final_webversion.pdf**.

13 *Racial Equity Tools Glossary*. Trenton, NJ: Center for Assessment and Policy Development; 2019. **racialequitytools.org/resourcefiles/RET_Glossary_Updated_October_2019_.pdf**.

14 *The Changemaker's Guide: A Community Planning Curriculum*. Oakland, CA: ChangeLab Solutions; 2014. **changelabsolutions.org/product/changemakers-guide**.

15 *Long-Range Planning for Health, Equity & Prosperity: A Primer for Local Governments*. Oakland, CA: ChangeLab Solutions; 2019. **changelabsolutions.org/product/long-range-planning-primer**.

16 *The Dynamic System of Power, Privilege, and Oppression*. Durham, NC: OpenSource Leadership Strategies, Inc.; undated. **opensourceleadership.com/documents/DO%20Definitions.pdf**.

17 Heller J. *Power Matters: Transforming Systems to Advance Health and Equity*. Oakland, CA: Human Impact Partners; 2019. **humanimpact.org/wp-content/uploads/2019/02/Power-Matters-by-Jonathan-Heller.pdf**.

18 Putnam RD. *Bowling Alone: The Collapse and Revival of American Community*. New York, NY: Simon & Schuster; 2000.

19 Halpern D. *The Hidden Wealth of Nations*. Malden, MA: Polity Press; 2010.

20 Kawachi I, Berkman L. Social cohesion, social capital, and health. In: Berkman LF, Kawachi I, eds. *Social Epidemiology*. New York, NY: Oxford University Press; 2000:174–190.

21 Healthy People 2020: social determinants of health. Office of Disease Prevention and Health Promotion, US Department of Health and Human Services website: **healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health**. Accessed April 11, 2019.

22 Social determinants of health: know what affects health. Centers for Disease Control and Prevention website: **cdc.gov/socialdeterminants/index.htm**.

23 Wilkinson R, Marmot M. *Social Determinants of Health: The Solid Facts*. 2nd ed. Copenhagen, Denmark: World Health Organization; 2003.

24 Solar O, Irwin A. *A Conceptual Framework for Action on the Social Determinants of Health*. Social Determinants of Health Discussion Paper 2. Geneva, Switzerland: World Health Organization; 2010.

25 Babacan H, Gopalkrishnan N, Trad-Padhee J. *Achieving Structural Change: A Guide for Community Workers in Building Cohesive Communities*. Queensland, Australia; Centre for Multicultural and Community Development, University of the Sunshine Coast; 2007. **researchonline.jcu.edu.au/17935/1/Babacan_Achieving_structural_change.pdf**.

26 Nelson J, Spokane L, Ross L, Deng N. *Advancing Racial Equity and Transforming Government: A Resource Guide to Put Ideas into Action*. New York, NY: Government Alliance on Race and Equity; 2015. **racialequityalliance.org/wp-content/uploads/2015/02/GARE-Resource_Guide.pdf**.

27 Jones CP. Levels of racism: a theoretic framework and a gardener's tale. *Am J Public Health*. 2000;90(8):1212-1215. **ncbi.nlm.nih.gov/pmc/articles/PMC1446334/pdf/10936998.pdf**. Accessed October 19, 2020.

28 Weinstein E, Wolin J, Rose S. *Trauma Informed Community Building: A Model for Strengthening Community in Trauma Affected Neighborhoods*. San Francisco, CA: BRIDGE Housing Corporation; 2014. **bridgehousing.com/PDFs/TICB.Paper5.14.pdf**.

29 Calloway E, Hanley C. 8 policies that have contributed to place-based health disparities across generations. ChangeLab Solutions website: **changelabsolutions.org/blog/place-based-health-disparities**. August 6, 2018. Accessed October 19, 2020.

30 Barnett KS, Sweeney G, Baek M. Homeownership, wealth accumulation, and segregation: housing policy and the creation of food deserts in Columbus, OH. The BLOCK Project: A healthy housing project of ChangeLab Solutions, on Medium website: **medium.com/the-block-project/housing-food-deserts-5fb81f6187e4**. Published December 18, 2017. Accessed October 19, 2020.

31 Zimmerman FJ, Anderson NW. Trends in health equity in the United States by race/ethnicity, sex, and income, 1993-2017. *JAMA Netw Open*. 2019;2(6):e196386. doi:10.1001/jamanetworkopen.2019.6386. Accessed October 19, 2020.

32 Horowitz JM, Igielnik R, Kochhar R. Trends in income and wealth inequality. Pew Research Center website: **pewsocialtrends.org/2020/01/09/trends-in-income-and-wealth-inequality**. Published January 9, 2020. Accessed October 19, 2020.

33 Rothstein R. *The Color of Law: A Forgotten History of How Our Government Segregated America*. New York, NY: Liveright Publishing Corporation; 2017.

34 *Long-Range Planning for Health, Equity & Prosperity: A Primer for Local Governments*. Oakland, CA; ChangeLab Solutions; 2019. **changelabsolutions.org/product/long-range-planning-primer**.

35 The Opportunity Atlas [database online]. Cambridge, MA: Opportunity Insights; 2020. **opportunityatlas.org**.

36 Holder S, Montgomery D. Life expectancy is associated with segregation in U.S. cities. *Bloomberg CityLab*. June 6, 2019. **bloomberg.com/news/articles/2019-06-06/life-expectancy-follows-segregation-in-u-s-cities**. Accessed October 19, 2020.

37 Urban Institute. Can racially segregated neighborhoods increase the likelihood of obesity? Housing Matters website: **housingmatters.urban.org/research-summary/can-racially-segregated-neighborhoods-increase-likelihood-obesity?cm_ainfo=&cm_cat=HHM%20Send%20June%206%2C%202019&cm_ite=Read%20more%20on%20How%20Housing%20Matters&cm_lm=tyuen%40changelabsolutions.org&cm_pla=All%20Subscribers&cm_ven=ExactTarget**. Published June 5, 2019. Accessed October 19, 2020.

38 Jan T. Redlining was banned 50 years ago. It's still hurting minorities today. *Washington Post*. March 28, 2018. **washingtonpost.com/news/wonk/wp/2018/03/28/redlining-was-banned-50-years-ago-its-still-hurting-minorities-today/?utm_term=.333e9e8b1b5d**. Accessed October 19, 2020.

39 Falkenburger E, Arena O, Wolin J. *Trauma-Informed Community Building and Engagement*. Washington, DC: Urban Institute; 2018. **urban.org/sites/default/files/publication/98296/trauma-informed_community_building_and_engagement.pdf**.

40 Woodward A, Kawachi I. Why reduce health inequalities? *J Epidemiol Community Health*. 2000; 54(12):923-929. doi:10.1136.jech.54.12.923.

41 Cushing L, Morello-Frosch R, Wander M, Pastor M. The haves, the have-nots, and the health of everyone: the relationship between social inequality and environmental quality. *Annu Rev Public Health*. 2015; 36:193-209. doi:10.1146/annurev-publhealth-031914-122646.

42 Health equity considerations and racial and ethnic minority groups. Centers for Disease Control and Prevention website: **cdc.gov/coronavirus/2019-ncov/need-extra-precautions/racial-ethnic-minorities.html**. Updated July 24, 2020. Accessed October 19, 2020.

43 Fisher M, Bubola E. As coronavirus deepens inequality, inequality worsens its spread. *New York Times*. March 15, 2020. Updated March 16, 2020. **nytimes.com/2020/03/15/world/europe/coronavirus-inequality.html**. Accessed October 25, 2020.

44 Maxwell, C. The coronavirus crisis is worsening racial inequality. Center for American Progress website: **americanprogress.org/issues/race/news/2020/06/10/486095/coronavirus-crisis-worsening-racial-inequality**. Published June 10, 2020. Accessed October 25, 2020.

45 *A Blueprint for Changemakers: Achieving Health Equity Through Law & Policy*. Oakland, CA: ChangeLab Solutions; 2019. **changelabsolutions.org/product/blueprint-changemakers**.

46 Black R, Rahman KS. *Centering the Margins: A Framework for Equitable and Inclusive Social Policy*. Washington, DC: New America; 2017. **newamerica.org/family-centered-social-policy/policy-papers/centering-margins**.

47 Working Group on Legal Frameworks for Public Participation. *Making Public Participation Legal*. 2013. **ncdd.org/main/wp-content/uploads/MakingP2Legal.pdf**.

48 Einstein KL, Palmer M, Glick D. Who participates in local government? evidence from meeting minutes. *Perspectives in Politics*. 2018. **politicsofhousing.com/research/who_participates_in_local_government.pdf**. Accessed October 21, 2020.

49 Nelson J, Brooks L. *Racial Equity Toolkit: An Opportunity to Operationalize Equity*. New York, NY: Government Alliance on Race and Equity; 2016. **racialequityalliance.org/wp-content/uploads/2015/10/GARE-Racial_Equity_Toolkit.pdf**.

50 Kang J, Gowler R. Institutionalizing racial equity. In: *Framing the Dialogue on Race and Ethnicity to Advance Health Equity: Proceedings of a Workshop*. Washington, DC: National Academies Press; 2016.

51 Gunier RB, Hertz A, Von Behren J, Reynolds P. Traffic density in California: socioeconomic and ethnic differences among potentially exposed children. *J Expo Anal Environ Epidemiol*. 2003;13(3):240-246. doi:10.1038/sj.jea.7500276. Accessed October 21, 2020.

52 Bullard R. *Unequal Protection: Environmental Justice and Communities of Color*. San Francisco, CA: Random House; 1994.

53 Williams DR, Collins C. Racial residential segregation: a fundamental cause of racial disparities in health. *Public Health Reports*. 2001;116:404-416. **ncbi.nlm.nih.gov/pmc/articles/PMC1497358/pdf/12042604.pdf**. Accessed October 22, 2020.

54 Popay J, Attree P, Hornby D, et al. Community engagement in initiatives addressing the wider social determinants of health: a rapid review of evidence on impact, experience and process. *Soc Determinants Effectiveness Rev*. 2007. **researchgate.net/publication/242611483_Community_engagement_in_initiatives_addressing_the_wider_social_determinants_of_health_A_rapid_review_of_evidence_on_impact_experience_and_process**.

55 Ferrera MJ, Sacks TK, Perez M, Nixon JP, Asis D, Coleman WL. Empowering immigrant youth in Chicago: utilizing CBPR to document the impact of a Youth Health Service Corps program. *Fam Community Health*. 2015;38(1):12-21. doi:10.1097/fch.0000000000000058.

56 Cohen DA, Han B, Derose KP, Williamson S, Marsh T, McKenzie TL. Physical activity in parks: A randomized controlled trial using community engagement. *Am J Prev Med*. 2013;45(5):590-597. doi:10.1016/j.amepre.2013.06.015.

57 O'Mara-Eves A, Brunton G, McDaid D, et al. Community engagement to reduce inequalities in health: a systematic review, meta-analysis and economic analysis. *Public Health Research*. 2013;1(4). doi:10.3310/phr01040.

58 Whitehead M, Pennington A, Orton L, et al. How could differences in "control over destiny" lead to socio-economic inequalities in health? a synthesis of theories and pathways in the living environment. *Health & Place*. 2016;39:51-61. **sciencedirect.com/science/article/pii/S1353829216000241**. Accessed October 22, 2020.

59 Core values, ethics, spectrum – the 3 pillars of public participation. International Association for Public Participation website: **iap2.org/page/pillars**. Accessed October 22, 2020.

60 Partnering with communities. In: *The Health & Housing Starter Kit*. Oakland, CA: ChangeLab Solutions; 2018. **changelabsolutions.org/product/health-housing-starter-kit**.

61 Wilcox J. Libraries and schools are bridging the digital divide during the coronavirus pandemic. Consumer Reports website: **consumerreports.org/technology-telecommunications/libraries-and-schools-bridging-the-digital-divide-during-the-coronavirus-pandemic**. April 29, 2020.

62 Butler L, Klawiter RF. Public legislative processes and public meetings during the time of COVID-19. DLA Piper website: **dlapiper.com/en/oman/insights/publications/2020/04/public-legislative-processes-and-public-meetings-during-the-time-of-covid-19**. Published April 3, 2020. Accessed October 22, 2020.

63 Partnering with communities. In: *The Health & Housing Starter Kit*. Oakland, CA: ChangeLab Solutions; 2018. **changelabsolutions.org/product/health-housing-starter-kit**.

64 Falkenburger E, Arena O, Wolin J. *Trauma-Informed Community Building and Engagement*. Washington, DC; Urban Institute; 2018. **urban.org/sites/default/files/publication/98296/trauma-informed_community_building_and_engagement.pdf**.

65 Healthy People 2020: civic participation. Office of Disease Prevention and Health Promotion, US Department of Health and Human Services website: **healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/civic-participation**. Accessed October 22, 2020.

66 Government Alliance on Race and Equity website: **racialequityalliance.org**. Accessed October 22, 2020.

67 Anderson M. Raleigh, North Carolina. Government Alliance on Race and Equity website: **racialequityalliance.org/jurisdictions/raleigh-north-carolina-2**. Accessed October 22, 2020.

68 Health in All Policies. ChangeLab Solutions website: **changelabsolutions.org/health-all-policies**. Accessed October 22, 2020.

69 Nelson J, Spokane L, Ross L, Deng N. *Advancing Racial Equity and Transforming Government: A Resource Guide to Put Ideas into Action*. New York, NY: Government Alliance on Race and Equity; 2015. **racialequityalliance.org/wp-content/uploads/2015/02/GARE-Resource_Guide.pdf**.

70 Planning process. In: *South Service Area Master Plan*. Minneapolis, MN: Minneapolis Park and Recreation Board; 2018:20-36. **minneapolisparks.org/wp-content/uploads/2018/11/2-Planning-Process.pdf**.

71 Weinstein E, Wolin J, Rose S. *Trauma Informed Community Building: A Model for Strengthening Community in Trauma Affected Neighborhoods*. San Francisco, CA: BRIDGE Housing Corporation; 2014. **bridgehousing.com/PDFs/TICB.Paper5.14.pdf**.

72 Weinstein E, Wolin J, Rose S. *Trauma Informed Community Building: A Model for Strengthening Community in Trauma Affected Neighborhoods*. San Francisco, CA: BRIDGE Housing Corporation; 2014. **bridgehousing.com/PDFs/TICB.Paper5.14.pdf**.

73 Kamler A, Weiss L, Chittum C, Owusu S, Gold MR. Public deliberation in service to health equity: investing resources in Roanoke, Virginia. *NAM Perspectives*. Commentary. Washington, DC: National Academy of Medicine; 2020. **nam.edu/public-deliberation-in-service-to-health-equity-investing-resources-in-roanoke-virginia**.

74 Scherer M, Weiss L, Kamler A, Realmuto L, Gold M. *Public Deliberation: What Is It and Why Do It?* New York, NY: New York Academy of Medicine; 2016. **nyam.org/publications/publication/public-deliberation-what-it-and-why-do-it**.

75 Asset-framing. Trabian Shorters website: **trabianshorters.com/asset-framing**. Accessed October 22, 2020.

76 Szczepanski C. Nine critical steps to authentic community engagement. Housing Matters website: **howhousingmatters.org/articles/nine-critical-steps-authentic-community-engagement**. Published September 28, 2017. Accessed October 22, 2020.

77 Vilela M. Conducting interviews. Community Tool Box website: **ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/conduct-interviews/main**. Accessed October 22, 2020.

78 Berkowitz, B. Conducting focus groups. Community Tool Box website: **ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/conduct-focus-groups/main**. Accessed October 22, 2020.

79 Davis D, Meyer J, Singh A, Wright M, Zykofsky P. *Participation Tools for Better Community Planning*. Sacramento, CA: Local Government Commission; 2013. **lgc.org/wordpress/wp-content/uploads/2013/07/Participation_Tools_for_Better_Community_Planning.pdf**.

80 Akom AA, Shah A, Nakai A. Kids, kale, and concrete: using participatory technology to transform an urban American food desert. In: Noguera PA, Pierce JC, Ahram R, eds. *Race, Equity, and Education: Sixty Years from Brown*. New York, NY: Springer; 2015:75-102.

81 Akom AA, Shah A, Nakai A. Kids, kale, and concrete: using participatory technology to transform an urban American food desert. In: Noguera PA, Pierce JC, Ahram R, eds. *Race, Equity, and Education: Sixty Years from Brown*. New York, NY: Springer; 2015:75-102.

82 Akom AA, Shah A, Nakai A. Kids, kale, and concrete: using participatory technology to transform an urban American food desert. In: Noguera PA, Pierce JC, Ahram R, eds. *Race, Equity, and Education: Sixty Years from Brown*. New York, NY: Springer; 2015:75-102.

83 Sadd J, Morello-Frosch R, Pastor M, Matsuoka M, Prichard M, Carter V. The truth, the whole truth, and nothing but the ground-truth: methods to advance environmental justice and researcher-community partnerships. *Health Educ Behav*. 2014;41(3):281-290. doi:10.1177/1090198113511816. Accessed October 23, 2020.

84 Rabinowitz P. Community-based participatory research. Community Tool Box website: **ctb.ku.edu/en/table-of-contents/evaluate/evaluation/intervention-research/main**. Accessed October 23, 2020.

85 Rabinowitz P. Community-based participatory research. Community Tool Box website: **ctb.ku.edu/en/table-of-contents/evaluate/evaluation/intervention-research/main**. Accessed October 23, 2020.

86 Rabinowitz P. Community-based participatory research. Community Tool Box website: **ctb.ku.edu/en/table-of-contents/evaluate/evaluation/intervention-research/main**. Accessed October 23, 2020.

87 *Asset Mapping*. Los Angeles, CA: UCLA Center for Health Policy Research; undated. **healthpolicy.ucla.edu/programs/health-data/trainings/Documents/tw_cba20.pdf**.

88 Burns JC, Paul DP, Paz SR. *Participatory Asset Mapping: A Community Research Lab Toolkit*. Los Angeles, CA; Advancement Project – Healthy City Community Research Lab; 2012. **communityscience.com/knowledge4equity/AssetMappingToolkit.pdf**.

89 Davis D, Meyer J, Singh A, Wright M, Zykofsky P. *Participation Tools for Better Community Planning*. Sacramento, CA; Local Government Commission; 2013. **lgc.org/wordpress/wp-content/uploads/2013/07/Participation_Tools_for_Better_Community_Planning.pdf**.

90 Falkenburger, E. Data Walks: Getting data into the community's hands. Urban Institute website: **urban.org/urban-wire/data-walks-getting-data-communitys-hands**. Published November 17, 2015. Accessed October 23, 2020.

91 Rabinowitz P. Implementing Photovoice in your community. Community Tool Box website: **ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/photovoice/main**. Accessed October 23, 2020.

92 McKoy D, Stewart J, Buss S. Engaging students in transforming their built environment via Y-PLAN: lessons from Richmond, California. *Child, Youth Environ*. 2015;25(2):229-244. **citiesandschools.berkeley.edu/uploads/CYE_Article.pdf**. Accessed October 23, 2020.

93 Okubo D. *The Community Visioning and Strategic Planning Handbook*. Denver, CO: National Civic League Press; 2000. **mrsc.org/getmedia/D9ADE917-2DF1-4EA2-9AA8-14D713F5CE98/VSPHandbook.aspx**.

94 *Plan 2040: A Comprehensive Plan for Louisville Metro*. Louisville, KY: Louisville–Jefferson County Metro Government; 2019. **louisvilleky.gov/government/planning-design/comprehensive-plan**.

95 Working Group on Legal Frameworks for Public Participation. *Making Public Participation Legal*. 2013. **ncdd.org/main/wp-content/uploads/MakingP2Legal.pdf**.

96 Leighninger M, Mann BC. *Planning for Stronger Local Democracy: A Field Guide for Local Officials*. Washington, DC: Center for Research & Innovation, National League of Cities; 2012. **civiclab.us/wp-content/uploads/2012/04/Planning_for_Stronger_Local_Democracy-NLC.pdf**.

97 Black R, Rahman KS. *Centering the Margins: A Framework for Equitable and Inclusive Social Policy*. Washington, DC: New America; 2017. **newamerica.org/family-centered-social-policy/policy-papers/centering-margins**.

98 Dean M. Co-design and urban renewal in Adelaide's northern region. Bang the Table website: **bangthetable.com/blog/co-design-and-urban-renewal-in-adelaides-northern-region**. Published August 24, 2016. Updated August 22, 2018. Accessed October 23, 2020.

99 Blomkamp E. The promise of co-design for public policy. *Aust J Public Adm*. 2018;77(4):729-743. doi:10.1111/1467-8500.12310.

100 Blomkamp E. The promise of co-design for public policy. *Aust J Public Adm*. 2018;77(4):729-743. doi:10.1111/1467-8500.12310.

101 Blomkamp E. The promise of co-design for public policy. *Aust J Public Adm*. 2018;77(4):729-743. doi:10.1111/1467-8500.12310.

102 Working Group on Legal Frameworks for Public Participation. *Making Public Participation Legal*. 2013. **ncdd.org/main/wp-content/uploads/MakingP2Legal.pdf**.

103 Healthy housing project: putting wellness and safety first, not last. Civic Design Lab website: **civicdesignlab.org/healthyhousing**. Accessed October 23, 2020.

104 *Seattle 2035 Comprehensive Plan: Managing Growth to Become an Equitable and Sustainable City, 2015-2035*. Seattle, WA: City of Seattle; 2018. **seattle.gov/opcd/ongoing-initiatives/comprehensive-plan**.

105 Race and Social Justice Initiative (RSJI). City of Seattle website: **seattle.gov/rsji**. Accessed October 23, 2020.

106 powell, ja, Menendian S, Ake W. *Targeted Universalism: Policy and Practice*. Berkeley: Haas Institute for a Fair and Inclusive Society, University of California, Berkeley; 2019. **haasinstitute.berkeley.edu/targeteduniversalism**.

107 Bradford B. One way Oakland is fighting racial inequality? by fixing potholes. Marketplace website: **marketplace.org/2019/05/15/one-way-oakland-is-fighting-racial-inequality-by-fixing-potholes**. Published May 15, 2019. Accessed October 23, 2020.

108 N/NE Housing Strategy Preference Policy waitlist: frequently asked questions. Portland Housing Bureau website: **portlandoregon.gov/phb/article/671059**. Accessed October 23, 2020.

109 Chapple K, Loukaitou-Sideris A. *Transit-Oriented Displacement or Community Dividends? Understanding the Effects of Smarter Growth on Communities*. Cambridge, MA: MIT Press; 2019.

110 Vision Zero Network website: **visionzeronetwork.org**. Accessed October 23, 2020.

111 Bliss L. Vision Zero's troubling blind spot: the safe-streets campaign has pushed for more law enforcement at a time when communities of color feel targeted. *Bloomberg CityLab*. September 1, 2016. **bloomberg.com/news/articles/2016-09-01/vision-zero-and-black-lives-matter-clash-over-policing-traffic-enforcement**. Accessed October 23, 2020.

112 Shahum L. Acting for racial justice & just mobility. Vision Zero Network website: **visionzeronetwork.org/acting-for-racial-justice-just-mobility**. Published June 8, 2020. Accessed October 23, 2020.

113 National Research Council of the National Academies. *Improving Health in the United States: The Role of Health Impact Assessment*. Washington, DC: National Academies Press; 2011. **ncbi.nlm.nih.gov/books/NBK83546**. Accessed October 23, 2020.

114 Corburn J, Bhatia R. Health impact assessment in San Francisco: incorporating the social determinants of health into environmental planning. *J Environ Plann Manage*. 2007;50(3):323-341. **tandfonline.com/doi/abs/10.1080/09640560701260283**. Accessed October 23, 2020.

115 Shapiro M, Zelek M. Planning and evaluating a healthy community: HiAP in Chatham, NC. National Association of County and City Health Officials website: **naccho.org/blog/articles/planning-and-evaluating-a-healthy-community-hiap-in-chatham-nc**. Published July 17, 2018. Accessed October 23, 2020.

116 *Plan Chatham: Comprehensive Plan 2017*. Pittsboro, NC: Chatham County; 2017. **chathamnc.org/home/showdocument?id=48133**.

117 *The City of Providence's Climate Justice Plan: Creating an Equitable, Low-Carbon, and Climate Resilient Future*. Providence, RI: Office of Sustainability, City of Providence; Racial and Environmental Justice Committee of Providence; 2019. **providenceri.gov/sustainability/climate-justice-action-plan-providence**.

118 Denver Neighborhood Equity Index. **arcgis.com/apps/MapJournal/index.html?appid=2f30c73e83204e96824a14680a62a18e**.

119 *Comprehensive Plan 2040: Denver's Plan for the Future*. Denver, CO: City of Denver; 2019. **denvergov.org/content/dam/denvergov/Portals/Denveright/documents/comp-plan/Denver_Comprehensive_Plan_2040.pdf**.

120 Appendix 1: Measuring our success. In: *Comprehensive Plan 2040: Denver's Plan for the Future*. Denver, CO: City of Denver; 2019. **denvergov.org/content/dam/denvergov/Portals/Denveright/documents/comp-plan/Comp_plan_2040_Appendix_Measuring_Success.pdf**.

121 *Long-Range Planning for Health, Equity & Prosperity: A Primer for Local Governments*. Oakland, CA: ChangeLab Solutions; 2019. **changelabsolutions.org/product/long-range-planning-primer**.

122 Jaffe E. Is it time to end single-family zoning? Sidewalk Talk, on Medium website: **medium.com/sidewalk-talk/is-it-time-to-end-single-family-zoning-56233d69a25a#:~:text=A%20quick%20primer%3A%20single%2Dfamily,also%20a%20central%20city%20problem**. Published February 6, 2020. Accessed October 23, 2020.

123 Minneapolis 2040 website: **minneapolis2040.com**. Accessed October 23, 2020.

124 Trickey E. How Minneapolis freed itself from the stranglehold of single-family homes: desperate to build more housing, the city just rewrote its decades-old zoning rules. *Politico Magazine*. July 11, 2019. **politico.com/magazine/story/2019/07/11/housing-crisis-single-family-homes-policy-227265#:~:text=The%20city%20council%20approved%20the,built%20anywhere%20in%20the%20city.&text=%E2%80%9CLots%20of%20people%20want%20to,great%20city%20to%20live%20in**. Accessed October 23, 2020.

125 Minneapolis 2040 website: **minneapolis2040.com**. Accessed October 23, 2020.

126 Kahlenberg RD. How Minneapolis ended single-family zoning. The Century Foundation website: **tcf.org/content/report/minneapolis-ended-single-family-zoning/#:~:text=Most%20stunning%20of%20all%2C%20late,single%2Dfamily%20zoning%20policies%20citywide**. Published October 24, 2019.