

Preface

Environmental factors significantly contribute to health inequities experienced by vulnerable populations in the United States. Environmental health injustices persist despite well-developed systems for both public health and environmental protection. The resulting health problems increase our national health care costs, and the greatest burdens are borne by lower-income communities of color.

This book integrates several important trends in community action, environmental health research, and policy approaches at a time when federal and state-level management efforts face significant challenges. Environmental advocates increasingly recognize that emphasizing public health equity benefits can broaden support for environmental protection. With the growing appreciation of environmental determinants of health, the public health community is becoming more involved in land use planning, transportation, food systems, housing, and other sectors. Local communities are more frequently highlighting how environmental injustices contribute to health disparities faced by their residents. These insights are validated by ongoing environmental health research on the lifelong, transgenerational, and cumulative impact of environmental exposures. Meanwhile, new tools are emerging that can help finance environmental public health prevention efforts, including pay for success and social impact bonds. Health care reform is contributing to the growth of value-based programs and hospital community-benefit investments in “upstream” determinants of health. Along with private and public funders’ growing awareness of health-environment connections, these trends may create new opportunities for local environmental health initiatives.

In this context, collaborations of communities, governments, and researchers are working to develop and promote local solutions to environmental

health problems. However, their efforts have not been systematically analyzed to distill successes, barriers, and lessons learned for future practice. This book begins to fill this gap by providing a conceptual framework, experiences of diverse initiatives, and actionable recommendations for promoting local environmental public health collaborations.

This book examines three local initiatives that aimed to alter the long-term trends, decision structures, and institutions that contributed to environmental health disparities in their communities. Although the three case studies are diverse, they share common features including strong cross-sector collaboration, community engagement, use of scientific information, and an explicit focus on health equity. None was founded with an infusion of dedicated funding, but all managed to leverage diverse resources over time. By analyzing the dynamics of these cases, the book aims to inform successful efforts in other communities.

The conceptual framework that is used to analyze these cases integrates the roles of science, multiple institutions, and community involvement in collaborative efforts. Lessons learned from these cases inform recommendations for changes in institutional structures, information systems, and resources needed to promote more effective local environmental health initiatives. The book is intended to support community members, practitioners in environmental and public health, planners, scholars, and students interested in addressing the environmental determinants of health by providing a framework for defining problems, developing collaborations, and designing solutions.

Three central themes that permeate these cases are environmental justice, integrating institutions, and systems change.

Environmental justice: All three case studies involve environmental injustices— including toxic exposures in housing, unhealthy neighborhoods, and poor air quality—that disproportionately burden historically marginalized communities. The environmental justice movement is comprised of groups that are fighting environmental threats to their communities' health and well-being. Environmental justice groups played varied roles in these cases, but none of the initiatives primarily identified itself as part of the environmental justice movement. Therefore, although these initiatives were motivated by environmental justice concerns, the term “environmental health equity” is used to describe their goal. This term clarifies that environmental justice groups may choose to join collaborative

initiatives or to organize their work independently at various stages of the process.

Integrating institutions: The fields of environment and public health protection share a common origin in the sanitation efforts of cities from nearly two centuries ago. Today, however, health and environment are managed by largely separate “siloed” institutions. Solving problems of environmental health often requires finding new ways to connect or “bridge” these existing systems. This book explores how local initiatives are building bridges between these silos at the local level, where collaboration, partnerships, and resource sharing is often more feasible and decision systems are more amenable to community influence than at higher levels of government.

Systems change: In order to build robust bridges between existing institutions, it is necessary to make durable changes in the ways decisions are made, the nature of evidence that is considered, and the ways diverse community interests are engaged. To inform such changes, we first need to understand the incentives, training, motivation, professional cultures, and values of all participants, as well as how these factors can either block or promote collaboration. In-depth exploration of promising case studies can provide insight into these dynamics.

This book explores three local environmental health initiatives. These cases were selected to represent a range of locations, scales, issue-areas, and resources. Because of this diversity, the lessons learned are likely to be relevant to a wide range of urban communities. The three cases describe (1) the development of an innovative housing-based approach to lead poisoning prevention in Rochester, New York; (2) multiple efforts to promote a healthy built environment in Duluth, Minnesota; and (3) a initiative aimed at making local community health a key consideration in decisions related to goods movement around the ports of Los Angeles and Long Beach, California.

In each of these cases, government, community, and technical experts collaborated to produce significant systems changes by working outside established policy processes. They were successful in reframing long-standing problems in new ways by focusing on health equity; leveraging a variety of human, financial, and technical resources; and changing processes, practices, and policies. Their experiences suggest changes are needed in institutional structures, information systems, and resources at the state and national

level to better support local innovation. The book concludes with an argument that such changes could help more effectively protect environmental public health and reduce health disparities in many communities.

Especially at times when state and federal programs are slow in addressing environmental public health problems, local collaborations hold promise for bringing attention to and helping to resolve environmental injustices. However, effective collaborations do not spontaneously arise in all settings. In fact, communities facing the most severe environmental health inequities may lack the capacity to collaborate for systems change. The experiences of these cases suggest that a better understanding of what contributes to success, more appropriately targeted resources, and changes in how governments, academia, community groups, and funders support collaboration are needed to promote expansion of promising local environmental health initiatives.