Chapter VIII.

Community Health & Character

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A Healthy Outlook

According to the periodical, “Integrating Planning and Public Health: Tools and Strategies to Create Healthy Places”, “the urban planning professional emerged out of nineteenth century public health initiatives, including tenement housing reforms, the construction of urban water supply and sewage systems, and the design of suburban ‘greenbelt’ towns.” With this history, it is uncertain why there is hesitation to discuss public health in the context of land use, planning, and the built environment. In fact, prior generations of comprehensive plans in Virginia locales virtually ignored matters of health, and this was true of Hopewell’s 2001 Plan. However, for the health of our residents and the vitality of our economy we must integrate the key disciplines. Health – both individual health and community health – is a prerequisite for the achievement of many of the goals embraced by the 2018 Comprehensive Plan.

A person’s health is based on four factors; socio-economic (40%), health behaviors (30%), health care (20%), and the physical environment (10%). The latter will be the focus of this chapter. Place matters. While the physical environment accounts for only 10% of the factors that affect health, improving the physical environment to promote health is important. Land use and the built environment are guided by the Comprehensive Plan and subsequently the Zoning Ordinance.

The other determinants of a person’s health are not the sole responsibility of this plan. The weight of such a responsibility is too heavy to be defined simply as and limited to a land use issue. Collaboration across multiple disciplines is required to create environments and opportunities for residents to achieve and maintain good health and quality of life.

The City of Hopewell scored in the lowest 11 percent of localities in Virginia for health according to the Robert Wood Johnson Foundation (RWJF) 2014 County Health Rankings.

The full report can be assessed online at http://www.countyhealthrankings.org. The study revealed what we know to be true on a national level; obesity, hypertension, diabetes, heart disease, and other diseases have increased over time and disproportionately effect certain groups of people. It is important to recognize a few of the findings of the study to better understand the recommendations to improve the state of our health at the conclusion of this chapter.
**Income Distribution**

The income of City residents is approximately $20,000 per household lower than the average household income for the State of Virginia. Income effects the ability to purchase and access healthy foods and quality health care.

**Racial Composition**

The proportion of African-Americans in Hopewell is nearly double the proportion of the State of Virginia. This is the most defining demographic characteristic of Hopewell. It is of significance, because there are distinct racial disparities in Hopewell affecting African American residents, such as infant mortality and certain diseases (see full report). For example, the heart disease mortality rate is 10% higher among African Americas in Hopewell than Whites. Those responsible for creating programs to promote healthy living must be able to communicate across cultures to effectively reach minority populations.

While over 7% of the population in Hopewell is classified as multiracial or other, there is no additional data available for these individuals to understand more about their racial or ethnic background or their place of residence. This makes it difficult to target these populations for outreach or interventions if their health or social indicators suggest greater risk or burden of disease.

**Poverty**

Living in poverty is linked to poorer health status. Poverty is directly related to educational attainment and is defined as income below the Federal Poverty Level. From a planning standpoint reducing poverty is a necessary pathway to improving the overall health of the community inasmuch as it is strongly correlated to housing, community maintenance, employment, and educational attainment. Overall poverty in Hopewell is 1.5 times higher than in Virginia. Across age groups and gender, poverty ranges from 17% higher to 55% higher in Hopewell, compared to Virginia. Poverty most adversely affects the African American community where 25.5% of its population resides in poverty.

**Life Expectancy**

As with the other indicators in this chapter, one’s life expectancy is influenced by social and economic factors, the physical environment, clinical care, and health behaviors. For purposes of this document, we will focus on the physical environment. What changes can be made to the physical environment to improve health thereby improving life expectancy?

Every census tract in the City is below the statewide average life expectancy of 79.6 years. Furthermore, there is large variation across the census tracts. The life expectancy is 78 years in the western part of the city, and the lowest at 69 years in the east, a 9 year difference. The pattern in the geographic distribution of life expectancy is similar to the distribution of educational attainment, income, poverty, cost burdened households, and insurance coverage. More research must be conducted to determine the reason for the gap in life expectancy between census tracts. In conducting this research several factors should be investigated when considering the impact of the physical environment: age of home, location to a park or recreational activity such as trails or bicycle routes, and proximity to environmental pollutants.
Clinical Care

Having access to primary care, dentists, mental health professionals, and other preventive care providers is necessary to treat diseases and to prevent onset or progression of disease. Clinical care also provides important opportunities for disease prevention through screenings, immunizations, and health education. Hopewell has less access to clinical providers, lower rates of common screening procedures, and a higher rate of hospitalizations that could be prevented by sufficient access to primary care providers (ambulatory sensitive condition hospital discharges).

Every resident of Hopewell lives in a health professional shortage area, as opposed to just 24% of the rest of Virginia. While the Hopewell-Prince George Community Health Center provides services for low income residents, there are not enough primary care physicians, dentists, mental health professionals, and community-based health providers to service Hopewell’s population.

Health Conditions and Food Availability

In comparison to the rest of Virginia, a larger percentage of the population of Hopewell is food insecure, has low food access, or is low-income and has low food access. In order for the community to reach its full health potential people must be able to access and afford healthy foods. The food environment is an important predictor of health status. A proper diet is necessary for good health, but the food that people eat is often shaped by the food environment in which they reside. A healthy food environment should have limited fast-food and unhealthy food retailers, and sufficient super-markets and grocery stores that sell wholesome food at affordable prices. Further, affordability is a prerequisite: citizens must have the financial means to afford such food, and they must have sufficient nutritional knowledge to understand what foods are healthy and how to prepare them in easy, affordable, and appetizing ways.

Of particular note, the percentage of Hopewell residents with low income and low food access is approximately three times higher than Virginia. Low food access reports the percentage of the population living in census tracts designated as food deserts. A “food desert” is defined as a low-income census tract where a substantial number or share of residents has low access to a supermarket or large grocery store. In addition to limited access to high-quality “smart food” grocery stores, the number of fast food restaurants per 100,000 population is higher in Hopewell than in Virginia.

The Call to Action

While Hopewell acknowledges the issues surrounding health we strive to move forward and improve our community. The desire for Hopewell is to provide a safe, healthy, and secure environment to enhance community wellbeing and quality of life for all. Health should be considered in all policy decisions. Towards that end, City leadership should address the social determinants of health by promoting strong families, active living, healthy eating, social connectedness and health equity to enhance the health and welfare of our citizens. Moreover, from a city betterment perspective, Hopewell must improve the external perception of the City as a healthy place to live, work and recreate.
The City strives to improve the health of citizens and residents and is confident that this can be done by undertaking the following initiatives:

1. **Develop Health Care District.**

   The Health Care district strives to increase opportunities for health care related offices to locate in the City to offer residents closer access to health care. Access to these services is imperative to improving the health of a Citizenry that is less mobile than in other communities.

   Hopewell falls far behind state norms for primary care physicians, dentists, and other health providers. Relevant stakeholders indicate that the City is not a particularly good place to “set up shop.” To counter this trend, the City must pro-actively engage with John Randolph Medical Center interests, property owners, and health industry professionals capable of advancing the goal of achieving a healthier Hopewell and vibrant Health Care District.

   Every effort should be made to create an abundance of attractive, accessible, and mixed-use areas that would enhance the attractiveness of Hopewell for medical and medical support facilities to complement the John Randolph hospital.

   In addition, the development of a Health Care District such as this one would increase jobs for Hopewell. These jobs would be at varying levels of education and skill and would benefit many citizens. Implementing a strategy that would improve both access to healthcare and income (jobs) is a win-win for our community. These two wins do not include the improved tax base that would come from economic development.

2. **Strategic Placement of Parks/Areas Designated for Physical Activity.**

   Exercise is extremely important to one’s level of health. With the steady and dramatic rise in adult obesity, promoting regular physical activity is a public health priority. It is time to think about new ways to make physical activity and exercise more available, more accessible, more affordable, more enjoyable, and ultimately, more beneficial to society.

   Research is proving that Outdoor Fitness Parks for adults are providing a variety of meaningful outcomes to communities including engaging participants in substantially more moderate to vigorous physical activity.

   Hopewell should review the total land area allocated to parks in the City and consider how to improve the uses of each property and decide if any need to be eliminated and replaced with ones in areas that are underserved. The City should continue to capitalize on the presence of the Appomattox and James River by the construction of the river walk and promotion of activities. Much is to be said about the therapeutic aspects of water and the various water related recreational activities that can improve health.
3. **Increase Recreational Opportunities through the Community Center and Private Facilities.**

With over 5,000 sq. ft. of recreation area, locker rooms, meeting and office space, the Recreation Center is poised to drive healthy lifestyle learning and activities. The 2012 Recreation Master Plan should be updated (underway as of the writing of this Comprehensive Plan). As the Key driver of Healthy Lifestyles for our City, a strong and focused Plan will aid not only in recreation as a form of enjoyment, but also recreation as an instrumental element to improving our Citizen’s health.

Investigation into outside support to achieve these goals is encouraged. Working with the Chamber of Commerce and Economic Development Authority, exploring opportunities to bring in additional private Health Clubs is encouraged. In addition, non-profit organizations such as the Coalition for Active Children should be considered as resources to aid the City’s efforts to improve the health of our citizens.

4. **Inclusion of Complete Streets program.**

To encourage more walking and bicycling, just two benefits of Complete Streets, Hopewell should look at our transportation network in a different way. Complete streets opens transportation to more people and can cut down on pollution while saving municipalities money in the long-term. Investigating alternative ways to design our City’s transportation system will improve the City, and in many ways improve the health of our citizens. More is discussed on this topic in the Transportation Chapter.

5. **Encourage new business with fresh fruits and vegetables.**

The City strives to promote farmer’s markets and the location of fresh fruits and vegetable stands through the City and in neighborhood convenience stores. Also, the City encourages the recruitment of restaurants and grocery stores that provide healthy food choices.

6. **Increase Educational Opportunities that move Households out of Poverty.**

Encourage local Industry and Community Colleges to provide programs to educate our citizenry and that improve their marketability in the local job market. In order for this to become successful the City must look at ways to provide incentives that are appealing to all parties involved.

Vocational Education is an opportunity that our school system is offering today, but lacks the resources to expand into areas that would benefit many students. Our school system, with the aid of our community colleges and Industry, could offer the same opportunities we offer our school age children to post High School age citizens. If poverty is linked to health and job training/education is linked to employment, then we must look to our Industry and Education partners to facilitate our attempts to improve health. A recent example of this is the participation in our Commonwealth’s launch of Code RVA. This school will take High School age children from Richmond and the surrounding areas (including the Tri-Cities) and train them in computer programming. This opportunity will only be made possible if the School System has the financial resources to participate.
7. **Leverage Hopewell School System to teach healthy lifestyles.**

Classes and programs teaching how to live a healthy life need to be added, or where they exist, expanded. A new approach to this “health improving” strategy should encompass both the children and the parents. No one is ever too old to learn and many in our community did not have the opportunity to learn these skills when they were in school. Through existing gatherings such as Parent/Teacher Visitation, Music and Arts Presentations, Back to School Night, Class Awards and Grade Promotion Ceremonies, our City and School System (as one) can begin to teach and encourage Healthy Living skills.

8. **Parenting Classes.**

Continue to operate the Hopewell Prince George Health Family and like initiatives that train first time parents that are at risk for child abuse. Create classes for parents with toddlers and teenage parents on skills that evolve around eating healthy, conflict management, discipline, and integrity. Provide single parent households resources and mentoring to help with child care while improving their education. Improve the outcome of families by providing mentoring of two parent households with other like households.

**Next Steps: A Plan of Action**

The 2018 Comprehensive Plan recommends that the City initiate a comprehensive health action plan that would revolve around a menu of concurrent initiatives, each of which requiring engagement by the City. The desire for Hopewell is that all work together to provide a safe, healthy, and secure environment to enhance community wellbeing and quality of life for all. Because many of the health-related conditions and the physical environment are outside of the direct influence of medical and public health professionals, collaboration across sectors is required in order to create environments and opportunities for residents to achieve and maintain good health and quality of life. Thus, health should be considered in all policy decisions. The recommended health action plan should focus on the identified health deficits and would integrate its strategies with the physical planning opportunities detailed in this document.

Recommendations for improving health in Hopewell as well as reducing health disparities are and should continue to be based on the available exhaustive data and surveys, along with the well-established associations between health factors and health outcomes, and recognized best practices in the public health field. A currently ongoing study for the City will provide specific details for subsequent initiatives. For advances to be achieved in the health care arena, Hopewell leadership and local stakeholders must view the Comprehensive Plan as a prescription and catalyst.

The Comprehensive Plan has also identified Priority Planning Areas that should be the continued focus of community betterment initiatives. The Small Area Plans should identify housing improvement opportunities, neighborhood maintenance strategies, non-vehicular transportation plans, primary land acquisition targets for neighborhood revitalization, stimulus for employers and employment growth, and capital improvements projects that are deemed necessary to catalyze redevelopment objectives.