

Jacksonville Integrated Planning Project

Jacksonville, Florida

DRAFT - November 2012

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Acknowledgements

The Jacksonville Integrated Planning Project (JIPP) was made possible by many agency, non-profit and community leaders who worked together to identify priorities, goals and strategies to improve quality of life in areas of disinvestment and need in the urban core of Jacksonville.

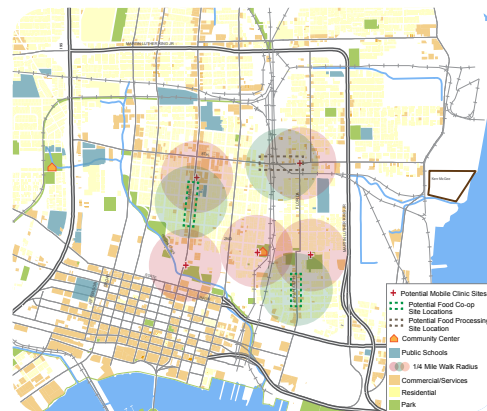
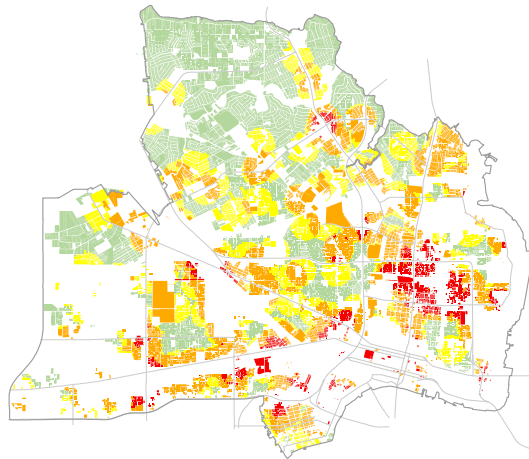


JIPP Participants

I 00 Black Men	and Livable Communities	Mayo Clinic	The Greater EL-Beth-EL Divine
Agency for Toxic Substances and Disease Registry	Grace and Truth Community Development Corporation	Men In and Out of School	Holiness Church
Cardno TBE/EEC	Greenscape Jacksonville	North Riverside Community Development Corp.	Trust for Public Land
City of Jacksonville	Habitat for Humanity of Jacksonville (Habijax)	Northwest Jacksonville CDC	University of North Florida
Clara White Mission	Health Planning Council of Northeast Florida	Operation New Hope	Urban Core CPAC & ShAdCo
Duval County Health Department	Helpful Citizens	Pepsi	Urban Library Centers/Public Library
Eastside Environmental Council	Jacksonville Area Legal Aid, Inc.	Residents	U.S. Environmental Protection Agency, Region 4 Superfund Division
EL-Beth-EL Development Center	Jacksonville Gullah/Geechee Nation	Roland Udenze Architects	U.S. Environmental Protection Agency, Region 4 Environmental Justice Office
Florida Department of Environmental Protection	Jacksonville Port Authority	Safe & Healthy Duval	U.S. Environmental Protection Agency, Office of Solid Waste and Emergency Response War on Poverty, FL
Florida Department of Health	LISC Jacksonville	Second Chance Help Center	Wealth Watchers Inc.
Fresh Ministries		Springfield Area Merchants	
Funders Network for Smart Growth		Sulzbacher Center	
		The Bridge of NE FL	

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A selection of community revitalization strategies were compiled in the companion addendum, "Jacksonville Strategies: Innovative Approaches to Meeting Community Priorities."

Foreword

Environmental justice communities face enormous challenges in attracting reinvestment that results in equitable development and positive neighborhood changes for existing residents. Health Zone 1 of Jacksonville, Florida, an EPA-designated environmental justice community, faces numerous environmental challenges including Superfund sites, brownfields and air and water-related contamination. Like many center city areas, a history of disinvestment and declining physical infrastructure compounds the challenges faced by residents seeking to improve their community.

Region 4 Superfund continues to be a leader in innovation and community engagement. While fulfilling the core mission of protecting human health and the environment, the Superfund Program is often engaged with communities that are experiencing cumulative environmental and health impacts that can be beyond the scope of cleaning up a single Superfund Site. Building on EPA's Superfund Reuse Initiative, the Jacksonville Integrated Planning Process (JIPP) offers a model for community engagement that builds local capacity to address long-standing environmental justice concerns and develops a plan to meet community needs through reinvestment.

This report shares the process and outcomes of the JIPP in hopes that this model can be replicated and adapted to other communities impacted by Superfund and environmental justice issues.



(Top): Park site in East Jacksonville.

(Bottom): Hogan's Creek



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Project Background

Like many center-city areas, Jacksonville's industrial heritage has led to a concentration of environmental challenges. Jacksonville's urban core includes multiple Superfund sites, dozens of brownfields, impaired waterways and ongoing air pollution challenges from industry, heavy traffic and the port. Communities in this area suffer from significant disparities in mortality rates and other health indicators. Due to a broad range of socioeconomic and environmental factors, Jacksonville Health Zone 1 (HZ1) has been classified as an environmental justice community.

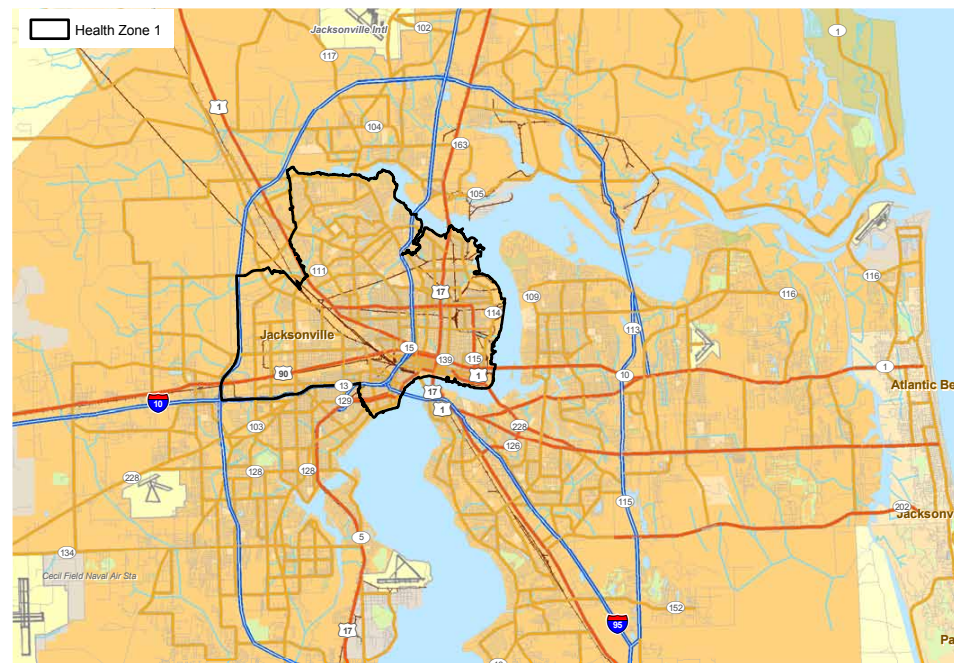
The Jacksonville Integrated Planning Project grew out of several related, but separate initiatives at EPA. In 2010, Jacksonville's Health Zone 1 was selected as an Environmental Justice (EJ) Showcase Community and received a \$100,000 grant award to advance environmental justice projects and priorities. The project brought a renewed focus on environmental justice issues in center city Jacksonville and identified many community needs and priorities for guiding environmental investments in the urban core.

As discussions regarding the EJ Showcase Community work continued, EPA and local leaders identified an opportunity to align community quality of life concerns and government agency program objectives into a single community-based improvement plan. EPA decided to fund an area-wide planning project that would evaluate all of Health Zone 1 for ways to align Superfund land use planning, other agency programs, and redevelopment opportunities with community-based quality of life priorities. As such, the Jacksonville Integrated Planning Project represents a significant and innovative departure from EPA's typical site-based approach to reuse planning.

Purpose and Goals

The purpose of the project is to identify cross-agency and community-based opportunities to improve the quality of life in Health Zone 1. Project goals include:

- Use existing resources.
- Take an area-wide approach.
- Build stakeholder capacity.
- Integrate quality of life and environmental issues.
- Produce additional community and stakeholder benefits.



(Right): Health zones are a designation used by the Duval County Health Department to track health initiatives and outcomes across the city. Health Zone 1 is comprised of six zip codes that encompass the center city area of Jacksonville.

Community Assets

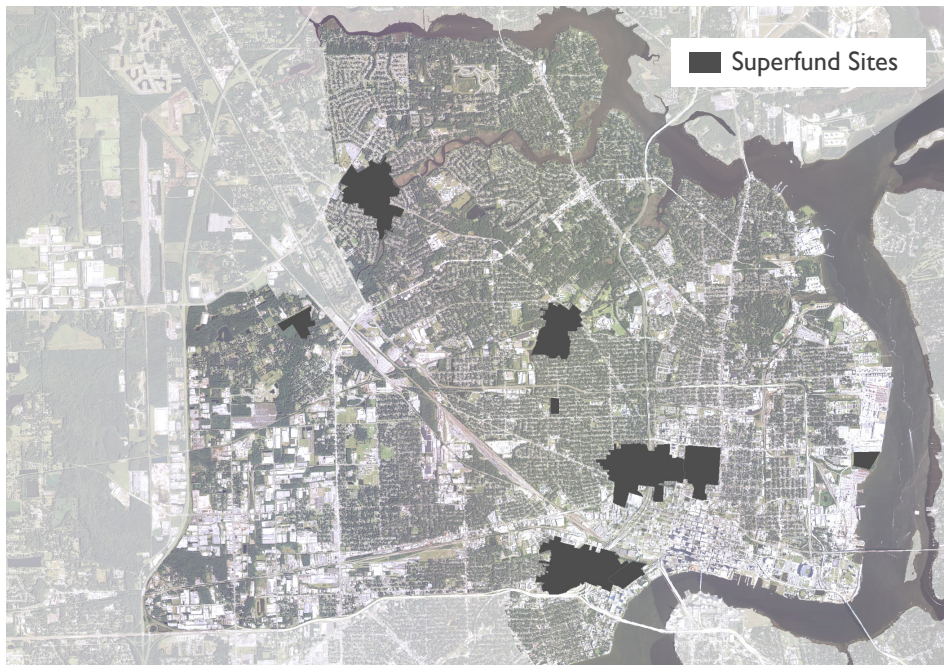
The six zip codes that make up Health Zone 1 include a wide range of communities and land use patterns whose present day forms have been shaped by the city's history and growth patterns. Land uses range from concentrated industrial areas near the Jacksonville Port to the downtown's commercial core and surrounding historic homes to residential areas spread between the commercialized arterial roads that fan out from the downtown area. At 840 square miles, Jacksonville is the largest city in the United States when measured by land area. While denser than other areas of the city, Health Zone 1 is still less densely populated than other major urban centers in the United States. This history of low density development was exacerbated by suburbanization trends in the latter half of the 20th Century, which contributed to a declining center-city population and the concentration of lower-income and minority residents in the urban core.

While the low-density nature of Health Zone 1 can present quality of life challenges such as decreased walkability and increased auto and transit-dependence, Health Zone 1 also includes natural, social and physical assets that can be leveraged to increase quality of life. These assets include:

- An abundance of community-based non-profits and social organizations,
- Active and nationally recognized environmental justice advocates,
- Strong base of industrial businesses,
- Historic housing stock in neighborhoods adjacent to the downtown,
- Streets like A. Phillip Randolph Boulevard that have a high concentration of locally owned businesses, and
- A network of natural features and open space areas that include the St. Johns River, the Trout River and numerous streams and parks.



(Left): Jacksonville Port



(Left): This map shows the location and extent of Superfund sites in Jacksonville Health Zone 1.

Why Focus on Health Zone 1?

Health Zone 1 in Jacksonville, FL demonstrates dramatic and measurable environmental justice disparities across economic, health and environmental indicators. The City of Jacksonville consolidated with Duval County in 1968, so county census figures are used for the economic analysis below.

Economically Under Resourced

The median income of Health Zone 1 is almost half that of Duval County as a whole. This stark economic disparity represents a significant lack of capital within Health Zone 1 to effect positive change.

**47,005 Households
x \$25,096
= \$1.2 Billion Economic
Activity Deficit**

	Health Zone 1	Rest of Duval County
Population	122,089	742,174
Increase since 2000	0.2%	12%
Median Household Income	\$27,792	\$52,888
African-American	75%	21%

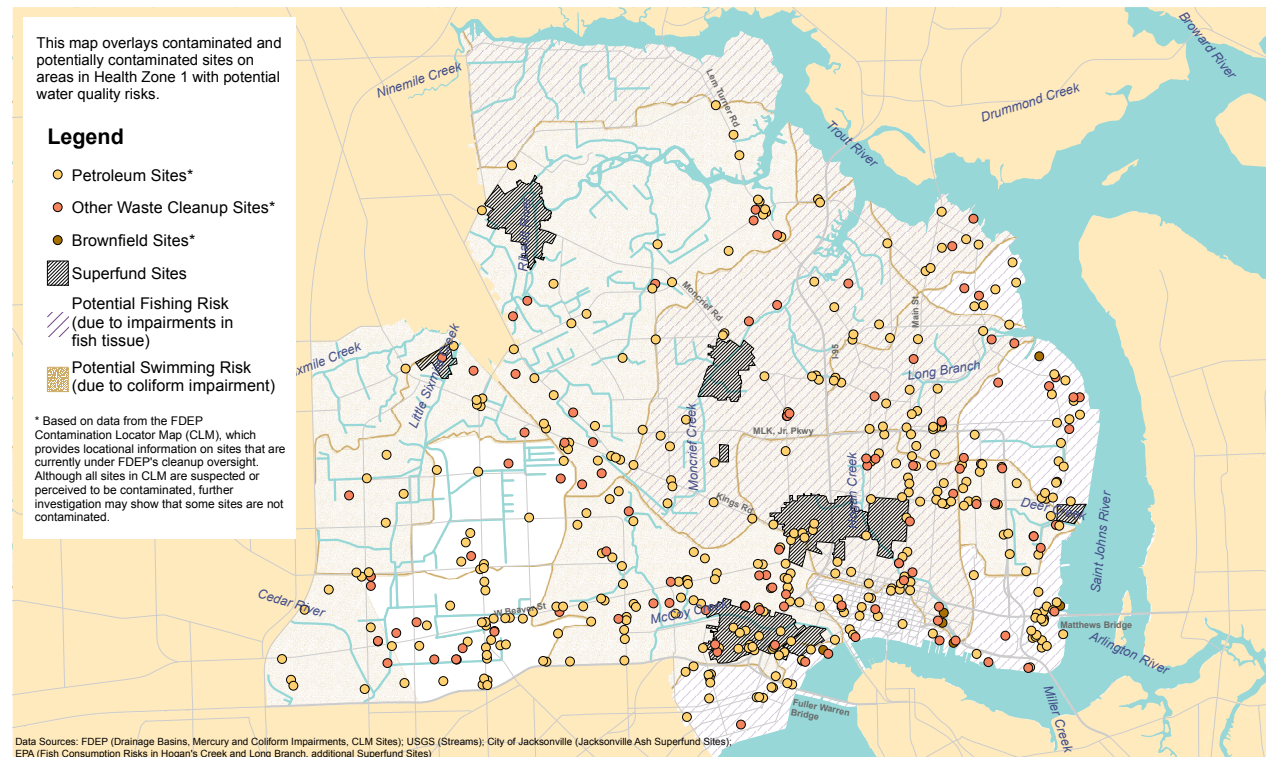
Environmentally Overburdened

A history of industry and neglect has led to significant contamination and pollution across Health Zone 1.

The map at right shows the aggregate concentration of the petroleum sites, waste cleanup sites, brownfield sites, Superfund sites and fishing and swimming risks due to water quality impairments that impact the residents and businesses of Health Zone 1.



(Above): Oil in water at Deer Creek

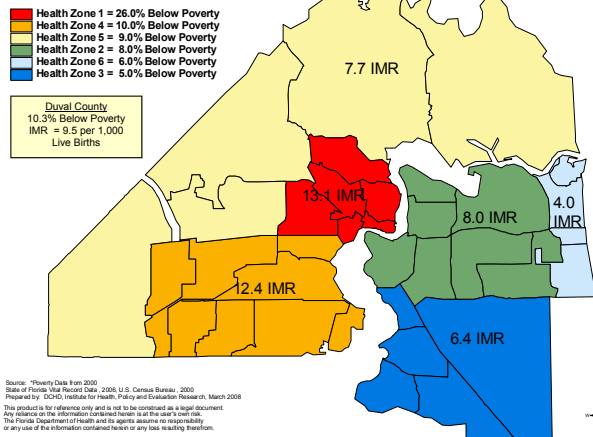


(Right): Map of contaminated and potentially contaminated sites in areas and areas of potential water quality risk in Health Zone 1.

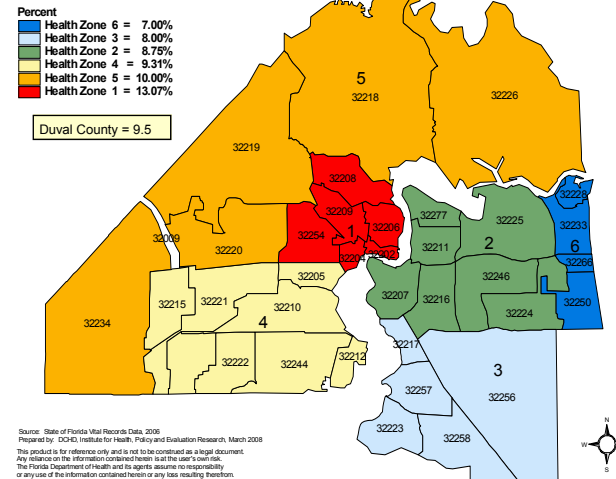
Dramatic Health Disparities

Key indicators reveal significantly higher rates of adverse health conditions among the population in Health Zone 1 compared to Duval County as a whole. Limited access to affordable healthcare, healthy food and health and wellness resources likely contributes to the disparity. These maps are selected from the *Health: Place Matters* report (Duval County Health Department, 2008).

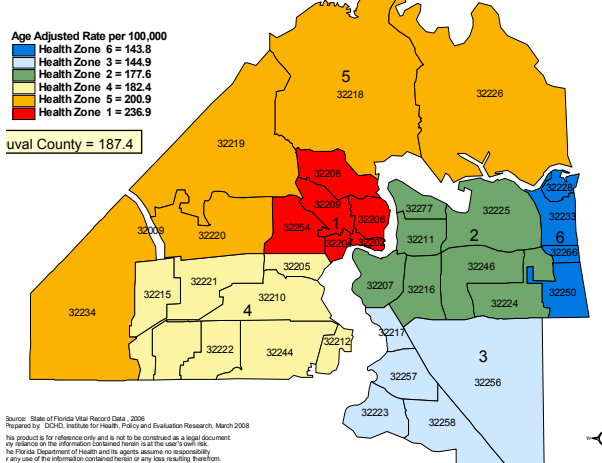
Poverty* and Infant Mortality by Health Zone, Duval County, 2006



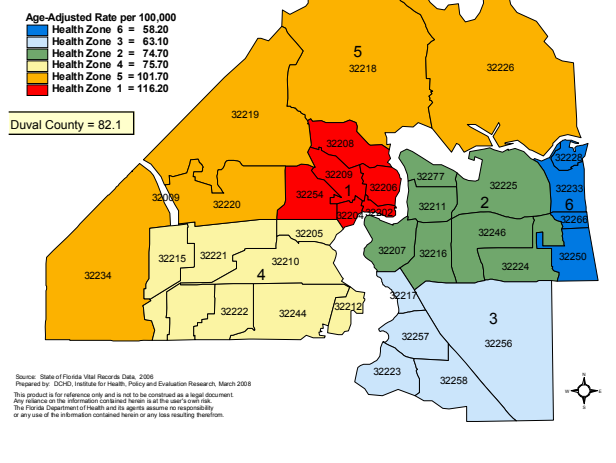
Low Birth Weight by Health Zone, Duval County, 2006



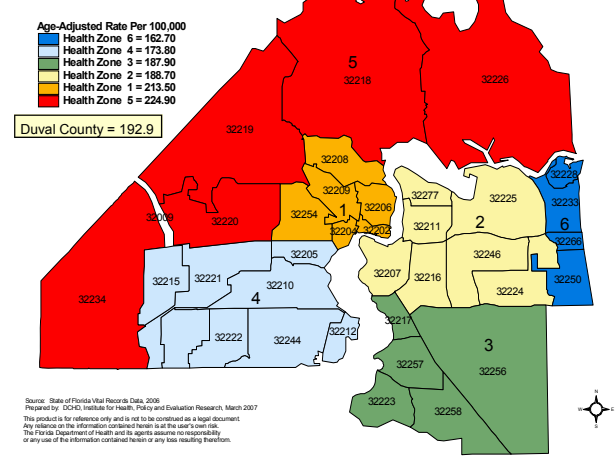
Heart Disease Mortality by Health Zone, Duval County, 2006



Diabetes Mortality by Health Zone, Duval County, 2006



Cancer Mortality by Health Zone, Duval County, 2006



Diabetes-related ER visits **+820%**
 Asthma-related ER visits **+413%**
 Low birth weight babies **+86%**
 Diabetes mortality **+100%**
 Heart disease mortality **+65%**
 Cancer mortality **+31%**

Percentage of occurrence in Health Zone 1 compared to Duval County as a whole.

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Equitable Development Challenges

Environmental justice communities face tremendous challenges in attracting reinvestment and equitable development. Environmental justice communities bear a disproportionate burden from environmental contamination; they are also often faced with challenges including, but not limited to:

- economic under performance and low household incomes,
- significant disparities in mortality rates and other health outcomes,
- real and perceived threats of violence and crime,
- aging or unhealthy housing stock,
- low high school graduation rates,
- high unemployment and underemployment,
- disruptive infrastructure features such as highways, and
- a lack of neighborhood amenities such as full-service grocery stores, neighborhood-based commercial and office spaces, clean and safe outdoor spaces, and adequate green infrastructure.

Research has attributed these challenges to the consequences of intentional isolation and disinvestment, policies that encourage the concentration of poverty, the social and psychological impacts of past urban revitalization projects, and the unintended impacts of market forces.

Whatever the underlying cause in each community, the cumulative barriers to equitable reinvestment presented by these challenges are difficult to overcome. Too often, public and private investments in the built environment result in displacement for the original residents of these neighborhoods instead of growing community capital.

The JIPP process integrates cutting edge techniques and leadership in sustainability and equitable development. Principles from Policy Link, Local Governments for Sustainability's Star Community Index, and the Ford Foundation have informed a set of guiding principles for this model integrated planning process.

ICLEI and Policy Link

*“Innovative revitalization **coalitions** share a commitment to bring disparate parties together in **ever expanding networks**, raising expectations, keeping an eye on the big picture, but focusing on **small attainable successes and relentlessly building on them.**”*

*Voices from Forgotten Cities
by Lorene Hoyt and Andre Leroux*

What is Equitable Development?

Equitable Development is the practice of enabling communities to prioritize and pursue development that benefits current residents and contributes to neighborhood resilience and quality of life. The growth of human capital is just as essential to the resilience of our urban areas as physical redevelopment, and projects that successfully integrate the two yield the most benefit for the larger community.

What are Thriving Communities?

Adapted from the ICLEI STAR Community Index, thriving communities contain:

- Clean air, water, and limited exposure to toxins
- Meaningful and fair employment opportunities
- Fresh, healthy, and affordable food
- Clean, safe, and affordable housing
- Access to affordable health care
- Access to a range of education opportunities
- Sufficient open space and recreation opportunities
- Arts, cultural, religious, and social networks
- Cultural and social diversity
- Opportunities for social and civic engagement
- Minimal waste, carbon footprint, and energy use

Building Community Wealth

The Ford Foundation outlines the following Seven Forms of Community Capital necessary to empower stakeholders to develop thriving communities. The JIPP process seeks to leverage all forms of capital to improve the quality of life in Health Zone I.

1. **Financial Capital** » unencumbered monetary assets that can be invested.
2. **Natural Capital** » unimpaired environmental assets (air, water, land).
3. **Social Capital** » trust, relationships, and networks that support civil society.
4. **Individual Capital** » skills and physical or mental health of a community.
5. **Built Capital** » fully functioning infrastructure or built assets.
6. **Intellectual Capital** » knowledge, innovation, creativity, or imagination in a region.
7. **Political Capital** » power and goodwill held by individuals and groups that can be used to achieve desired ends.



(Clockwise from top left): Overgrowth on a Jacksonville brownfield site; Elevated highway in Jacksonville; Community building through urban gardening; Truck traffic near JAXPORT.

Integrated Planning Core Principles

The following principles have guided the planning process used in Jacksonville.

Identify community-based quality of life priorities

Every community has a unique history and culture that guides local priorities for quality of life. Equitable development requires that outside “experts” defer to the expertise of local residents on quality of life needs.

Develop neighborhood-based solutions.

Area-wide analysis can help create a shared understanding of the challenges facing the community and the assets available to them. However, residents identify most closely with their immediate neighborhood and are more likely to get involved with implementation of solutions if they are neighborhood-based.

Strengthen a coalition of neighborhoods.

Traditional “bottom-up” revitalization models have unintentionally placed struggling neighborhoods in competition with each other for grants and other resources that can be locally-controlled through the revitalization process. Forming a coalition of neighborhoods can increase the political capital of a larger urban area and attract an increased level of investments and resources across the board.

Prioritize, coordinate and leverage resources based on community need.

Public investments can have greater results when coordinated and leveraged to meet specific community-identified needs.

Evaluate all forms of community capital.

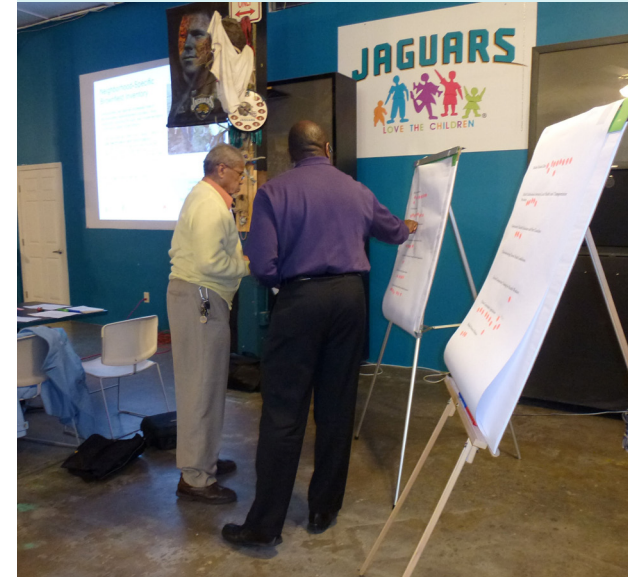
Investments that increase only one or two forms of community capital are less likely to continue producing benefits over the long term than investments that create multiple forms of capital.

Build strong “urban villages” and community cores.

In a low-density city like Jacksonville, it is especially important to create localized centers of activity that support neighborhood life.



(Above): Children in an outdoor classroom.



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JIPP Phasing and Engagement Process

The process diagram below illustrates the project phasing and stakeholder engagement approach developed and used for the JIPP. The JIPP sought to engage a broad cross-section of stakeholders from EPA staff across multiple programs, to state and municipal partners, to local businesses, community organizations and residents. The process started with a committee representative of this range of project partners to identify priorities and learn together.

Initial meetings of the committee focused on developing a shared understanding of goals and priorities between agency and community representatives. The kickoff meeting in Phase I provided a forum for discussion of goals and priorities. The Shared Learning meeting in Phase II provided an opportunity for the committee to review an analysis of existing conditions and quality of life issues and to refine the goals and priorities based on their findings. As the project reached the solutions development phase, leadership transitioned to the community-based coalition to prioritize needs and champion their implementation over time.

Identification of Goals and Priorities

Based on these early discussions, the group decided to focus strategies and actions around three quality of life goals:

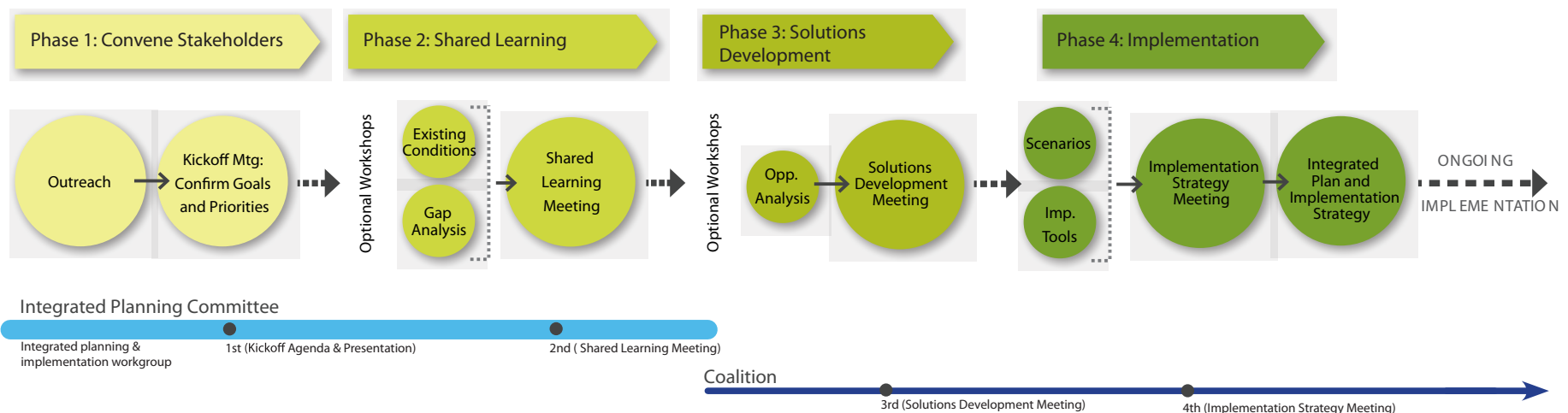
- improve access to healthcare,
- improve access to open space, and
- improve access to healthy, affordable food.

In addition, the committee identified five priorities to help guide solutions development for each goal:

- Increase job training opportunities and employment opportunities
- Involve local youth
- Improve air quality
- Increase neighborhood safety and perception of safety
- Increase cross-cultural competency and coalition building

(Below): JIPP process diagram indicating key project phases, tasks, and collaboration points.

Jacksonville Integrated Planning Project - Health Zone 1 Workplan and Schedule



Investments in EEC

The Eastside Environmental Council is an environmental justice advocacy organization that works in the Eastside neighborhood of center city Jacksonville. Since 2003, the EEC has served as a community voice in the remediation process for local Superfund sites. The organization provides community organizing and education regarding site-related exposure risks, advocacy for healthcare access, and leadership for healthy-living initiatives including community gardens. Despite incremental progress, the EEC has struggled to achieve significant progress on long-standing community goals for center-City Jacksonville.

During the course of the project, investments in the capacity of the Eastside Environmental Council enabled the organization to come to the table as an effective Coalition partner. The project team sponsored staffing, coaching and technical expertise with the goal of building the EEC's capacity to be an effective change agent.

Investments included:

Fundraising strategies

The project team identified a set of fundraising strategies to increase the EEC's financial stability and increase their capacity to tackle fresh and innovative projects. Materials shared with the EEC included:

- Considerations regarding 501(c)(3) incorporation for the purposes of fundraising
- Tips on local, grassroots fundraising
- Descriptions of foundation funding sources for grassroots environmental justice groups

One-on-one coaching

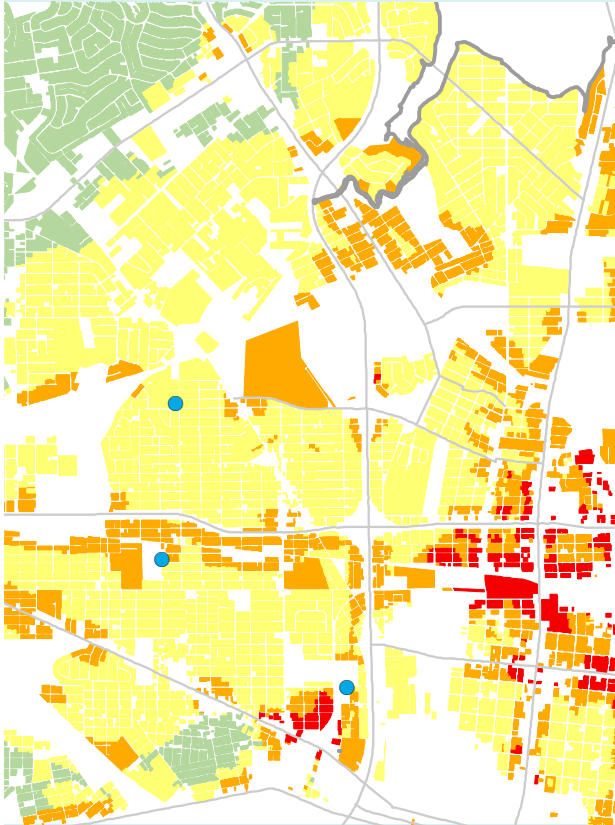
EEC members received pro-bono mentoring from Vernice Miller-Travis, a project team member who is a nationally, recognized environmental justice veteran.

Smart Growth Conference 2012

The EEC's director and one of their board members presented the JIPP at the Smart Growth 2012 conference in San Diego, raising the project's profile and making invaluable national connections with other environmental justice organizations and potential project supporters.



(Above): EEC members Ken Pinnix (left) and Wynetta Wright (right) participate in a panel discussion with Vernice Miller-Travis (center) of Skeo Solutions at the Smart Growth 2012 Conference in San Diego.



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Methods

In March 2011, the Kirwin Institute released a seminal report for the Jacksonville area titled “Mapping Child Well-Being in Duval County.” The report mapped the distribution of opportunity for children residing in different areas of Duval County and examined the impacts of opportunity on children’s health and educational outcomes. The report evaluates opportunity across three measures: neighborhood, education, and health and environment (see chart at right).

Building off of the framework developed by the Kirwin Institute, the project team developed a set of maps to highlight health and environmental status for Health Zone 1. Maps are grouped into health outcomes, environmental risks, and health assets (see chart at lower right).

The resulting map series provides a quantitative, spatial framework for understanding existing conditions in Health Zone 1 and helps to illustrate the complex nature of the cumulative impacts experienced by environmental justice communities:

- Health Indicators (p. 17-19)
- Environmental Risks (p. 20-21)
- Health Assets (p. 22-25)

Note that the Health Indicator maps on pages 17-19 show Health Zone 1 as an outlined area and that health data within Health Zone 1 has been subdivided into 6 areas based on zip code.

Neighborhood Indicators	Education and School-Related Indicators	Health and Environmental Indicators
Neighborhood poverty rate	Free and reduced price lunch students	Children with diabetes, asthma, cancer
Population on public assistance	Teacher qualification	Low birth weight babies
Unemployment rate	Teacher experience	Teen births
Share of households headed by single parent	Student/Teacher ratio	Access to healthcare facilities
Home ownership rate	Test results (Math and Reading)	Availability of healthcare professionals
Housing vacancy rates	Non-promotion rate	Access to affordable food
Foreclosure rate		Exposure to environmental impairments
Adult educational attainment		Access to parks and open spaces
Crime rates		

(Above): Indicators used in the Kirwin Institute’s opportunity analysis of child well-being in Duval County.

Health Indicators	Environmental Risks	Health Assets
<ul style="list-style-type: none"> • Infant Health Indicators (infant mortality, teen births, low birth weights) • Adult ER Visits (dental, COPD, asthma, diabetes, congestive heart) 	Environmental Impairments: <ul style="list-style-type: none"> • Sites • Air quality • Water quality 	<ul style="list-style-type: none"> • Healthcare (primary care, dental care, emergency care, specialized services) • Healthy food (and unhealthy food) • Open space

(Above): Indicators used in the JIPP analysis of health and environmental indicators for quality of life in Health Zone 1 of Jacksonville.

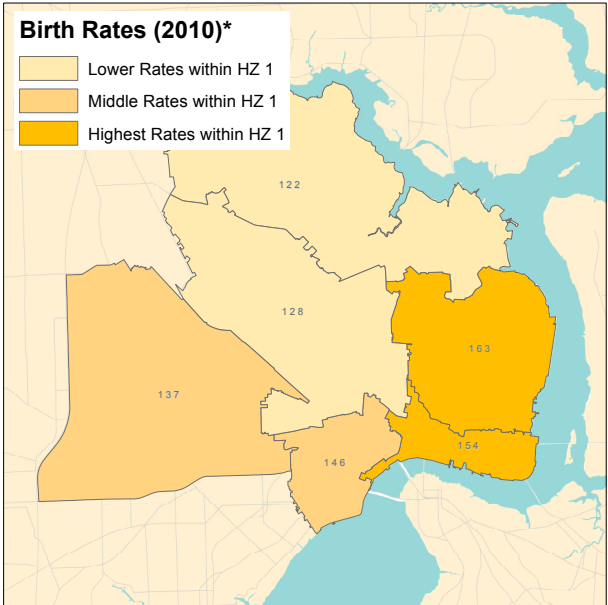
Health Indicators

Infant Health Indicators

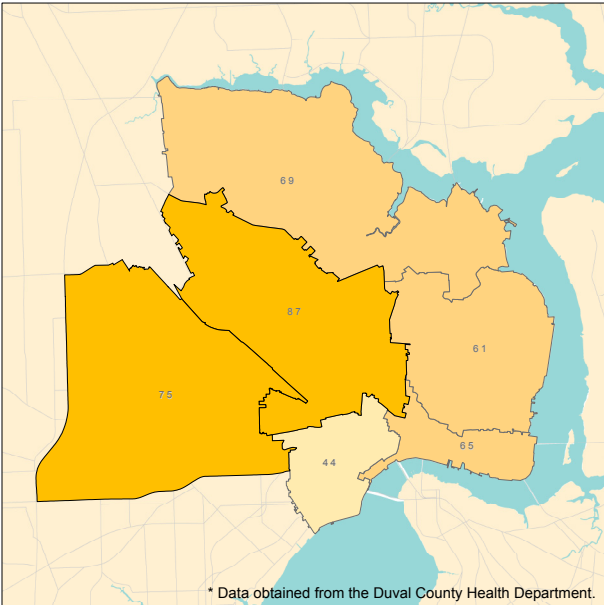
Key indicators of infant health are the infant mortality rate, birth weight and the rate of babies born to teens. Health Zone I leads Duval County in infant mortality, with a rate of 13.1 deaths per 1000 live births. The Duval County infant mortality rate overall is 9.5.

Health Zone I leads Duval County in percentage of low birth weight babies. In 2006, over 13 percent of babies born to parents residing in Health Zone I had low birth weights. This compares to 9.5 percent of babies born in Duval County overall. The birth weight map below shows that the east side of Health Zone I experiences higher rates of low-birth weight babies than other areas of Health Zone I.

Health Zone I also leads Duval County in the rate of babies born to teens, or teen births. In 2006, teen births occurred in Health Zone I at a rate of 81 teen births per 1000 births. This was 58% higher than the Duval County average. The teen birth map below shows that the west side of Health Zone I experiences higher rates of teen births than other areas of Health Zone I.



Low Birth Weight Babies (per 1,000 live births)
This map shows that low-birth weight babies born in 2010 tended to be most concentrated on the East side of Health Zone 1.



Teen Births (per 1,000 females between ages 15-18)
This map shows where teen births in 2010 were distributed across Health Zone 1.

* Data obtained from the Duval County Health Department.

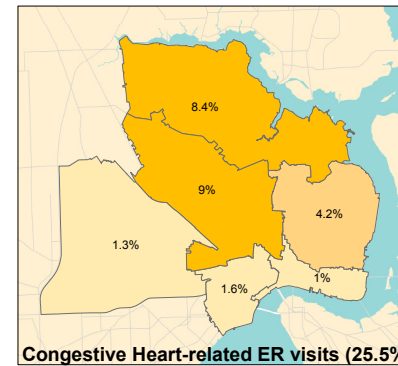
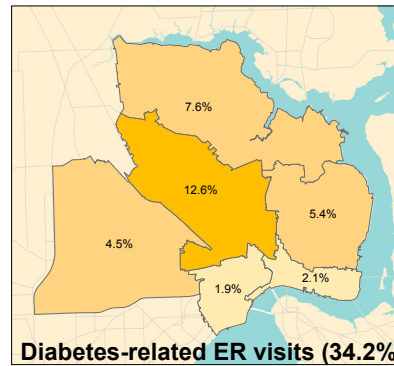
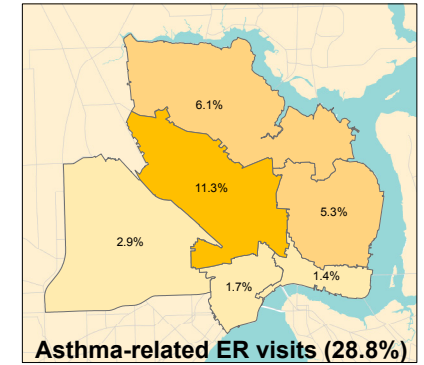
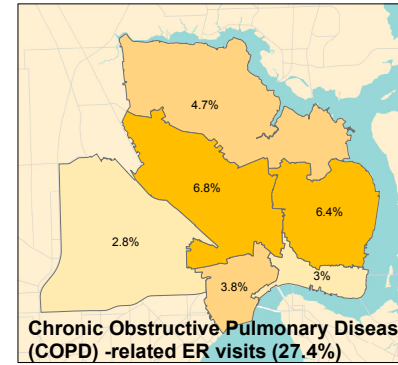
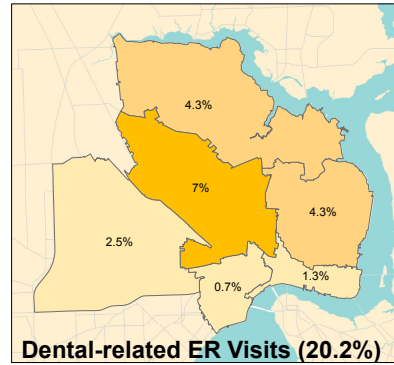
Adult ER Visits

The maps at right show the percentage of Emergency Room visits for specific health issues in Health Zone I relative to Duval County. Higher rates of emergency room visits are shown in darker colors by zip code.

Health Zone I is home to approximately 15% of all Duval County residents, and in all cases, Health Zone I residents make up a disproportionately high percentage of the ER visits for each of these indicators:

- Dental-related ER visits (20.2% of Duval County total)
- Chronic Obstructive Pulmonary Disease-related ER visits (27.4% of Duval County total)
- Asthma-related ER visits (28.8% of Duval County total)
- Diabetes-related ER visits (34.2% of Duval County total)
- Congestive Heart-related ER visits (25.5% of Duval County total)

Many of the health issues represented here are issues that can typically be managed through regular access to primary care, access to prescriptions and preventative lifestyle habits.



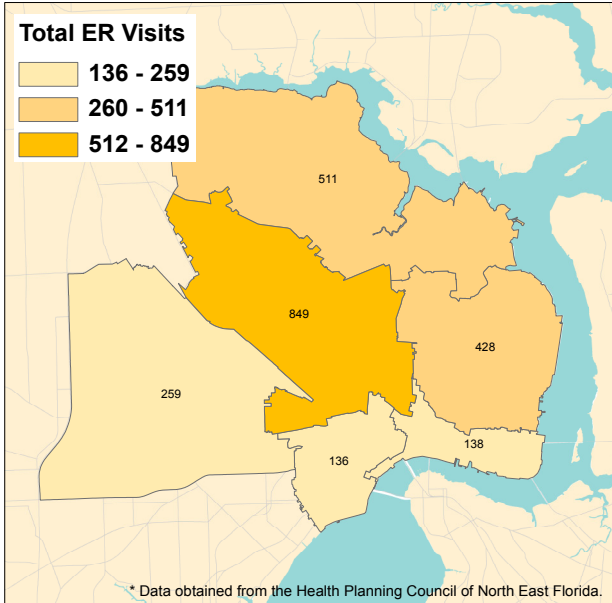
2010 Adult ER Visits in HZ 1 (% of Total ER Visits in Duval County)

2010 Adult ER Visits*

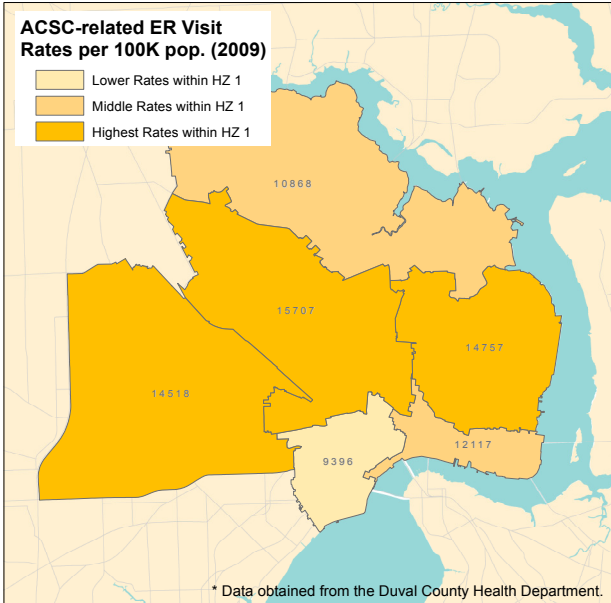


* Data obtained from the Health Planning Council of North East Florida.

Health Zone 1 is home to approximately 15% of all Duval County residents. This map shows that the severity of health issues (as documented by ER visits) vary across Health Zone 1 by type of health issue; however, Health Zone 1 as a whole experiences a disproportionate number of health issues requiring emergency care. Many of the health issues represented here are issues that can be managed with good primary care; these numbers may be indicative of access to good primary care.



Total Adult Emergency Room Visits (2010)
(dental, COPD, asthma, diabetes, congestive heart conditions)
 This map shows that the central zip code of Health Zone 1 consistently documents high admission rates for health issues.



Ambulatory Care Sensitive Condition (ACSC)-related Visits
 ACSC are a set of conditions, such as asthma, COPD and diabetes, where appropriate ambulatory care prevents or reduces the need for admission to the hospital. Increased rates of ACSC are typically related to a lack of access to good primary care.

In communities with limited access to primary care services, emergency rooms often become the front lines for medical treatment. The maps at left show patterns of ER usage across the six zip codes in Health Zone I.

The first map illustrates that the central area of Health Zone I consistently documents the highest admission rates for health issues in Health Zone I.

The second map illustrates instances of ambulatory care sensitive condition (ACSC)-related visits to the ER. ACSC are a set of conditions such as asthma, COPD and diabetes, where appropriate ambulatory care prevents or reduces the need for admission to the hospital. In most instances, oversight by a primary care physician and access to prescriptions prevents the need for hospitalization. Therefore, these types of ER visits are a good proxy for understanding the lack of access to primary care in Health Zone I.

Environmental Risks

The following maps highlight the distribution of potential environmental risks related to water access, contaminated sites and air quality. These indicators represent a subset of factors that may influence health and quality of life. The location of these factors does not indicate actual health or quality of life conditions for any specific household; however, the map series is helpful for understanding the distribution of potential environmental exposure risk within Health Zone I and for visualizing the effect of the cumulative impact of multiple risk factors on certain residential areas.

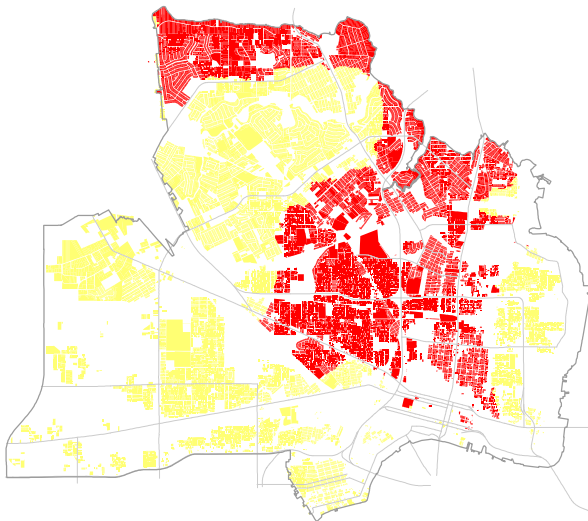
Proximity to water access risks is represented by the selection of residences and schools within water drainage basins that have documented fish

consumption and swimming risks. These risks limit recreational activities in Health Zone I and represent damage to Health Zone I's natural resources. In instances where restrictions are ignored or not understood, the environmental contamination represented by these risks can have negative health impacts on humans.

Proximity to contaminated sites is represented by the selection of residences and schools within walking distance, or a quarter mile, of contaminated sites. Residences and schools with proximity to a greater number of contaminated sites may experience a higher level of risk, depending on the type of contamination and its location within the soil or groundwater.

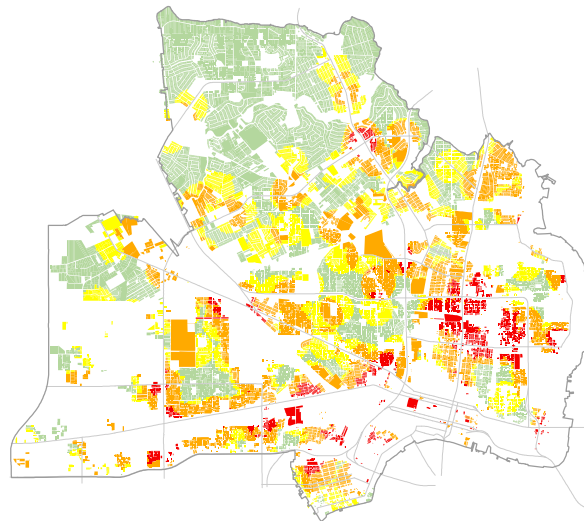
Proximity to potential air quality risks is represented by the selection of residences and schools that have proximity to two or more air quality risks. Proximity measures vary depending on the type of risk and are based on the air quality buffer recommendations found in the *Air Quality and Land Use Handbook* (California Air Resources Board, 2005).

Risk Factor	Air Quality Buffer
High traffic roads (arterial roads and freeways)	500 feet
Industrial land use	500 feet
Jacksonville Port area	1000 feet



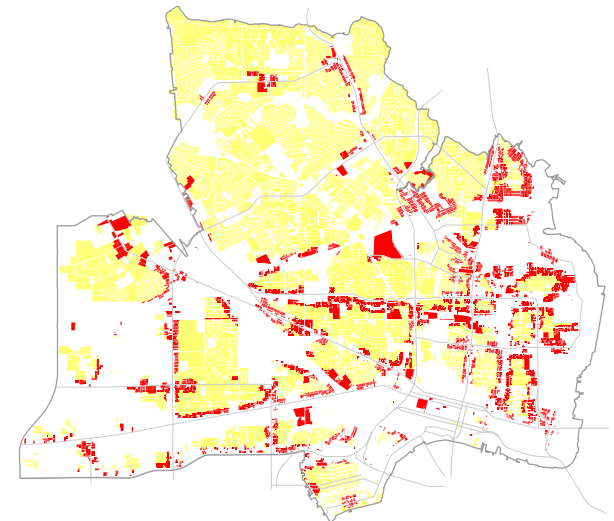
Residences and Schools with Proximity to Water Access Risks

Residential and School Parcels
■ Residential and school land use
■ Residential and school land use within basins that have documented fishing and swimming restrictions



Residences and Schools with Proximity to Contaminated Sites

Residential & School Land Use
■ further than .25 miles from a Site
■ within .25 miles of 1 Site
■ within .25 miles of 2-5 Sites
■ within .25 miles of 6-15 Sites



Residences and Schools with Proximity to Potential Air Quality Risks

Residential and School Parcels
■ Residential and School Land Use
■ With Proximity to 2 or more AQ Risks

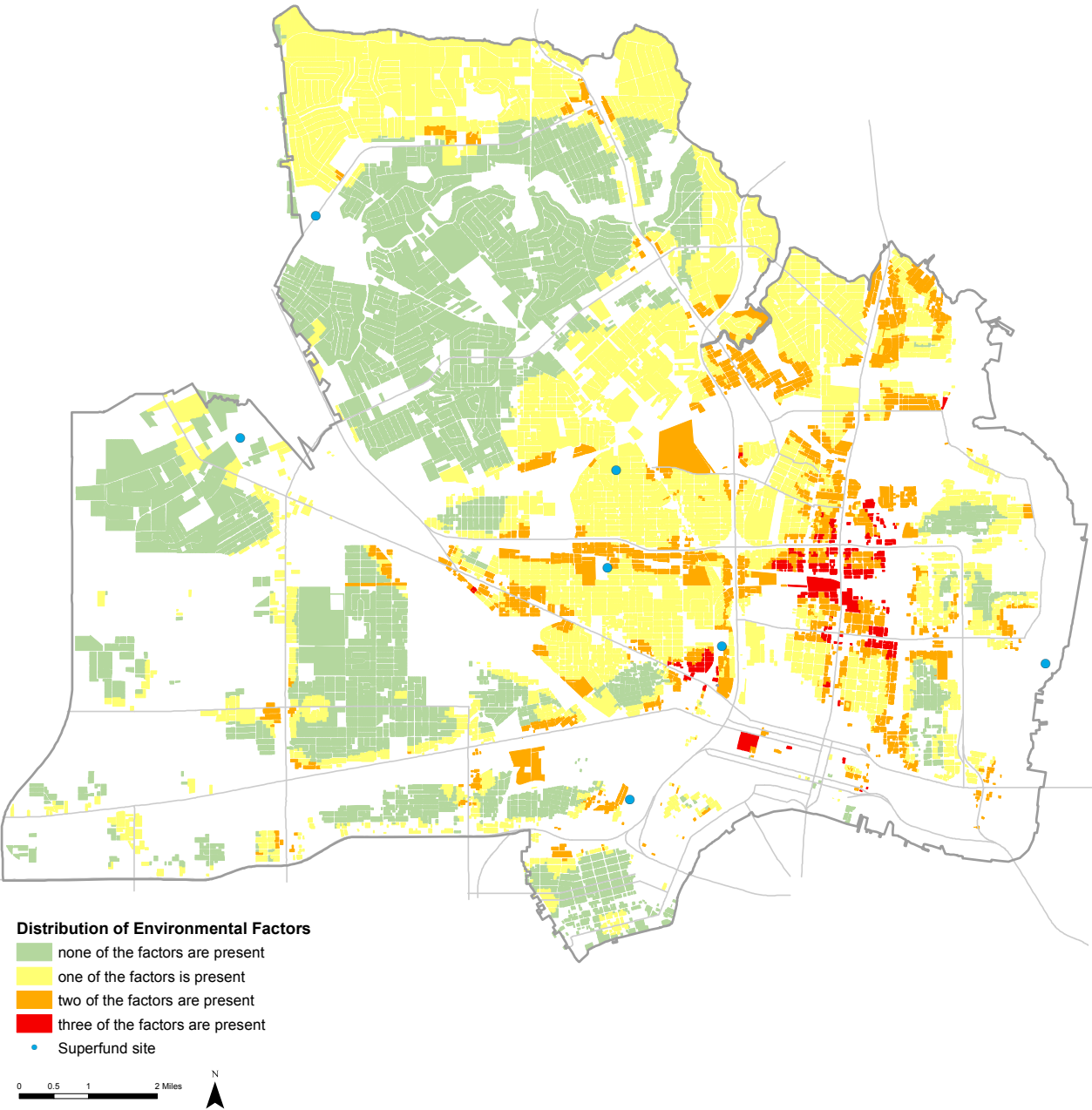
This map aggregates the risk factors illustrated by the previous three maps to show cumulative environmental risk across Health Zone I. As with the previous environmental maps, this map should be viewed in context with the health disparities maps in the introduction which illustrate that Health Zone I residents experience dramatic disparities in health outcomes when compared to other areas of Jacksonville. Recognizing that risk factors are generally higher across the board in Health Zone I than in other areas of the city, the map at right illustrates one broad category of risk. The coincidence of multiple risk factors and multiple adverse outcomes does not indicate causation between any specific risk factor and outcome, rather the presence, combination and interplay among the factors and categories of risk must be identified and understood.

Residences and Schools Experiencing Three or More Risk Factors

This map highlights areas that may be experiencing three or more of the following environmental factors:

- Residential and School areas that:
- Are near two or more potential air quality risks (such as high traffic roads and industrial uses)
 - Are within a ¼ mile of six or more potentially contaminated sites under cleanup oversight
 - Are within a drainage basin that has documented fishing and swimming restrictions.

These indicators represent only a subset of factors that may influence health and quality of life. The location of these factors does not indicate actual health or quality of life conditions for specific households.



Health Assets

Access to Affordable Care

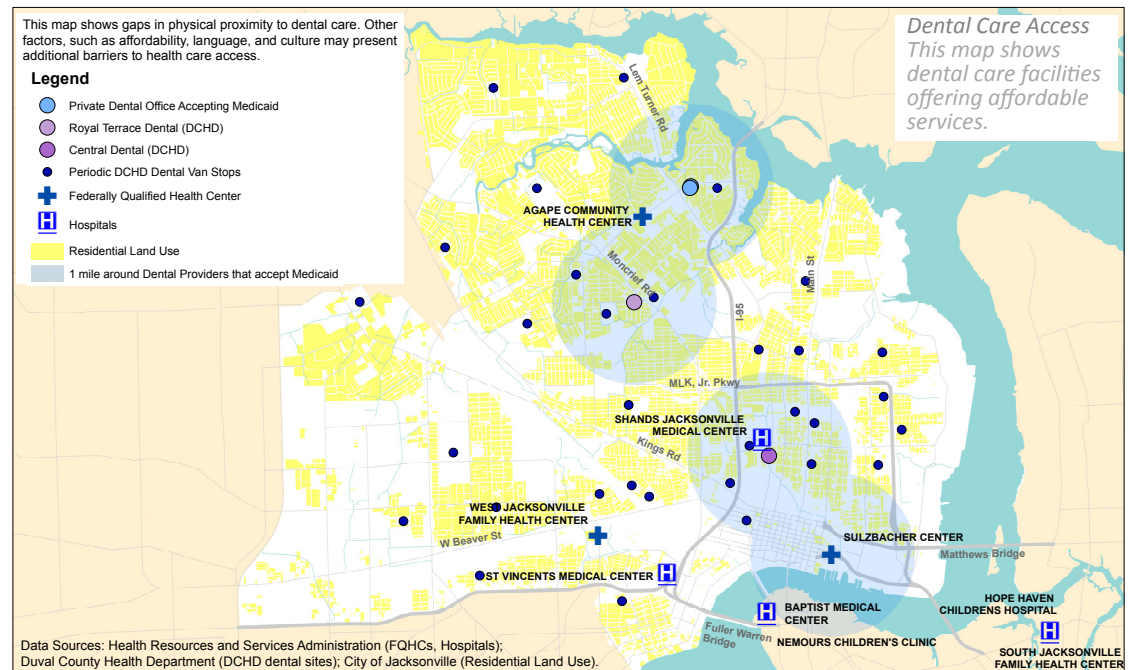
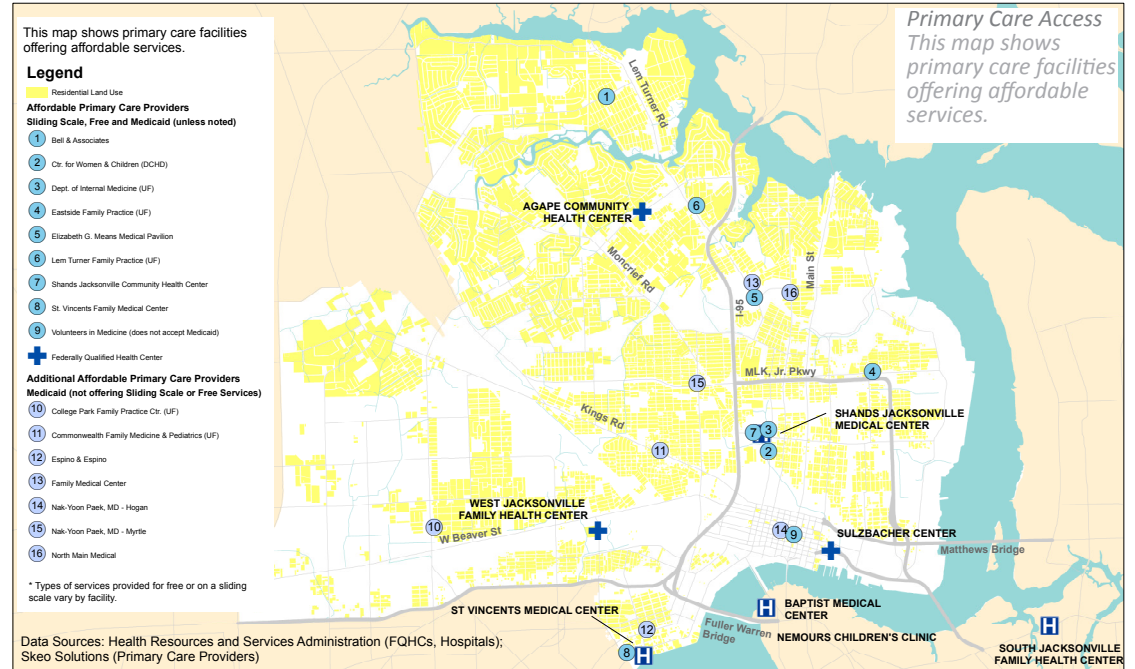
The maps at right show primary care and dental facilities that offer affordable services in Health Zone I. Although there are numerous affordable care locations in Health Zone I, the dramatic health disparities experienced by residents led the Jacksonville Health Assessment study (EPA, 2012) to conclude:

“There is a misalignment between community health care needs and the system for delivering health care currently in place to meet these needs. Many residents are not accessing basic preventative services, are traveling significant distances to get services, or are using emergency rooms in place of primary care services.”

The report goes on to identify barriers to healthcare access in Health Zone I that include:

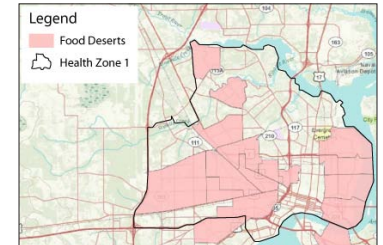
- Transportation challenges
- Limited hours of operation at provider locations
- Manner of service delivery
- Financial barriers to prescription purchases
- Racial, cultural and historical patterns that discourage use of primary and preventative care services
- Limited access to information on available care

The report also points out that healthy lifestyles are dependent not only on access to healthcare but also on transportation options, walkability of the built environment, safe and healthy housing and many other sustainability-related characteristics of the built environment. Therefore, the location of a healthcare facility may be just as important as the services it provides. A follow-up study will examine opportunities for integrating health and wellness considerations into reuse planning processes, using the Fairfax Wood Treater Superfund Site in Health Zone I as a pilot project.



Access to Healthy Food

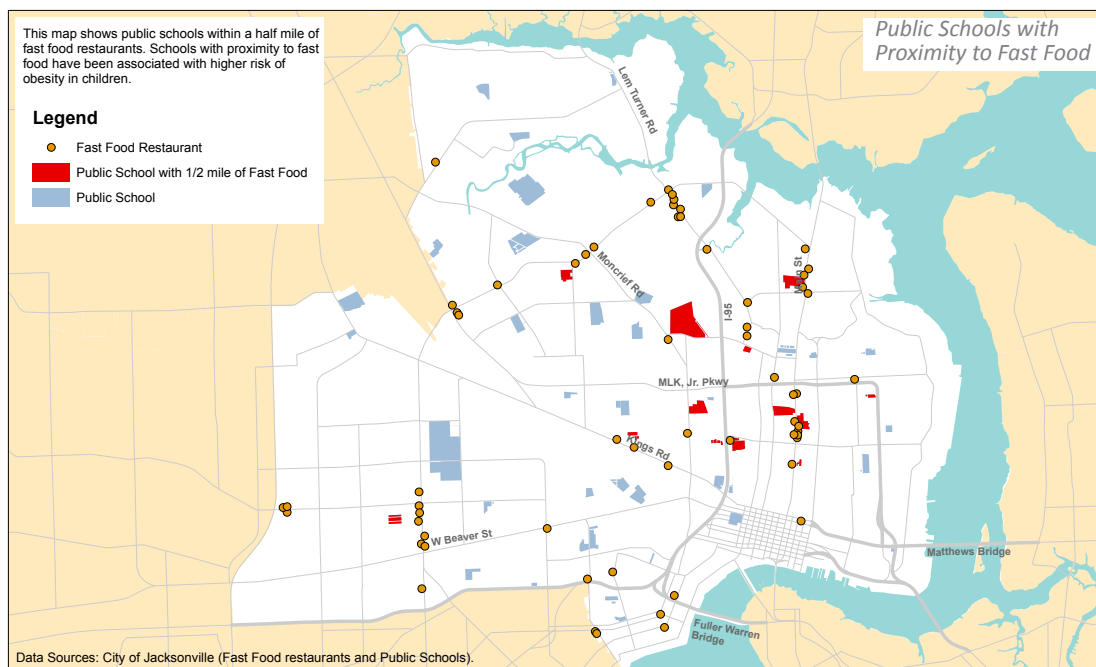
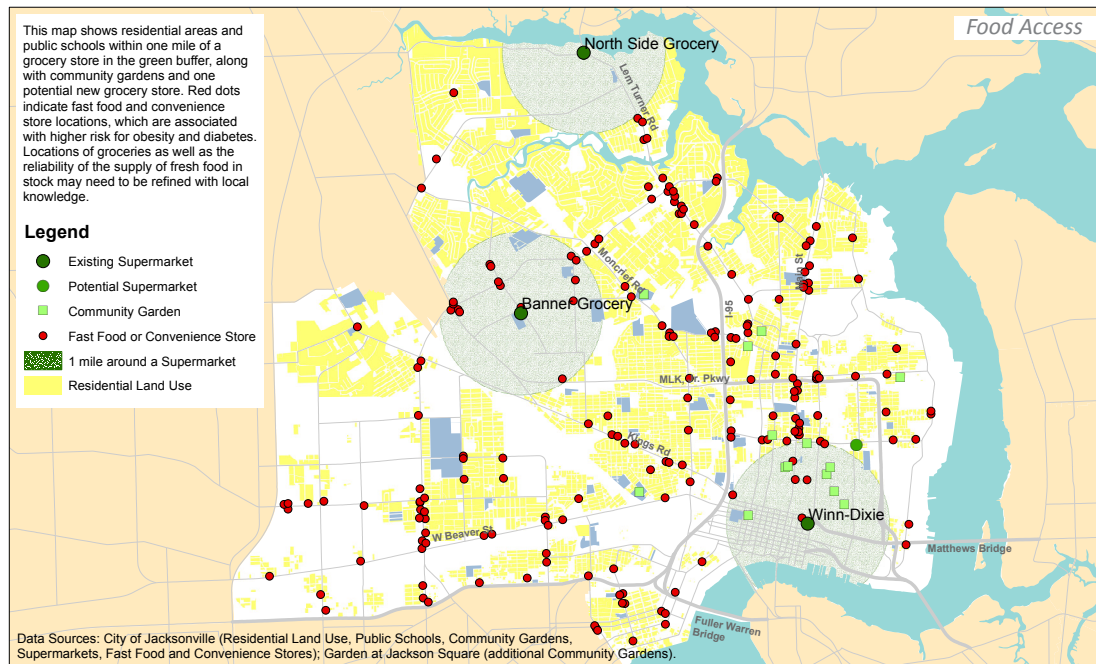
Availability of healthy, affordable food is critical to healthy communities. According to the Healthy Food Financing Initiative, a food desert is considered a low-income census tract where at least 33% of households are further than one mile from a grocery store. In these communities, food costs and transportation challenges may limit access. The map at right shows that significant portions of Health Zone 1 are considered food deserts by the Healthy Food Financing Initiative.



The Food Access map shows the proximity of residential areas and public schools to food sources, including grocery stores, community gardens, convenience stores and fast food. Food sources and health are closely related.

- Increased numbers of neighborhood grocery stores are associated with reduced odds for obesity (Bodor et al, 2010).
- Urban farms, markets and community gardens can be a source of fresh, local food, create community and support economic development.
- Fast food/convenience store access is predictive of greater obesity odds (Bodor et al., 2010).
- Frequent consumption of fast food is associated with weight gain and an increased risk of Type 2 diabetes (NIH, 2004).

The Public Schools with Proximity to Fast Food map identifies public schools within a half mile of a fast food restaurant. Research demonstrates that students with fast food restaurants in this proximity consume fewer fruit and vegetables, consume more soda, and are more likely to be overweight or obese (Davis and Carpenter, 2009).

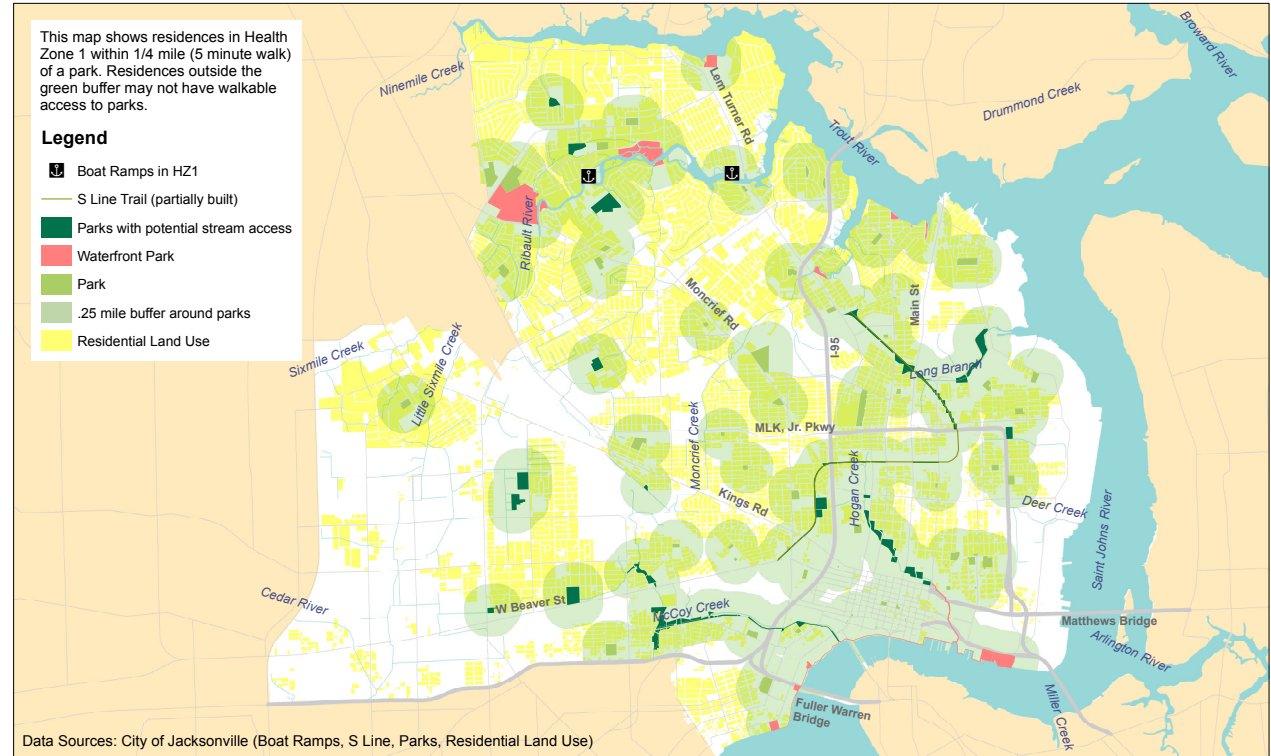


Access to Open Space

Florida state guidelines recommend providing a neighborhood park within a half mile (10 minute walk) of residential areas and including play structures, courts and picnic areas. Healthy parks, trees and open space can help:

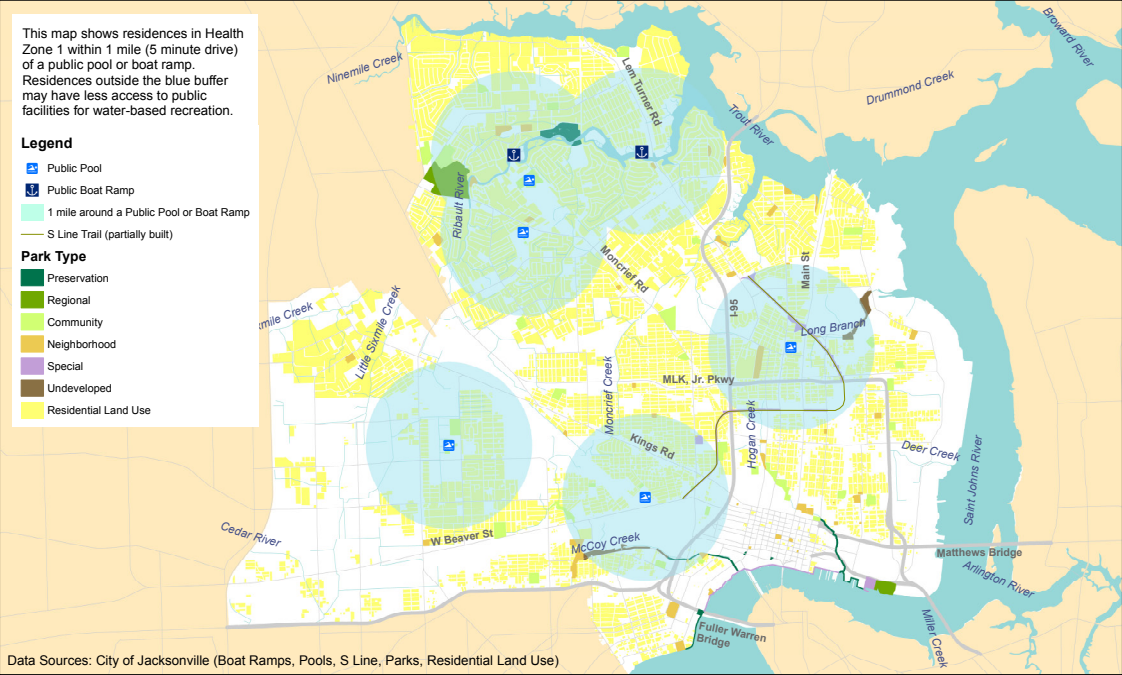
- Reduce obesity.
- Improve attention deficit disorder (ADD) in children.
- Increase development of muscle strength and coordination, language, and cognitive abilities by providing children with play space.
- Reduce mental fatigue and increase focus and coping abilities.
- Build healthy communities by creating stable neighborhoods and stronger social ties. Increase community investment.

The following maps indicate residential areas that are within a five minute walk of a park, five minute drive of a public pool or boat ramp and a ten minute walk of a community center. Residents of areas outside of these buffers may have limited access to recreational facilities.

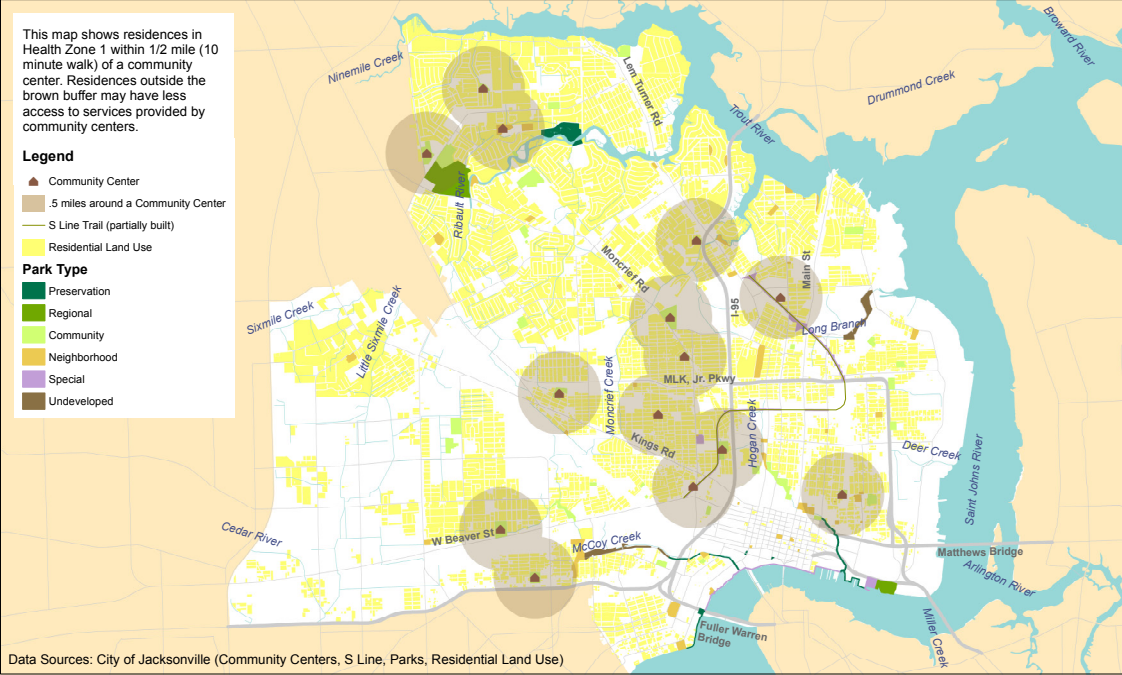


Access to Open Space

(Right): Access to Water Based Recreation



(Right): Access to Community Centers

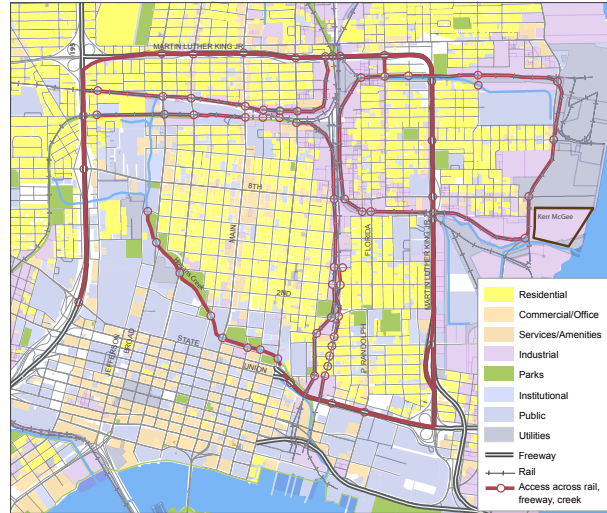


Opportunities and Gaps

Based on the risk analysis and stakeholder priorities, the project team selected two neighborhoods to further evaluate for gaps in assets and development of potential strategies for neighborhood improvement. Two adjacent neighborhoods, Eastside and Springfield, clearly had poor health outcomes, elevated environmental risks and a deficit of healthy lifestyle assets such as access to healthy food, affordable healthcare and parks. These neighborhoods were selected as the pilot for a more detailed assets and gaps analysis.

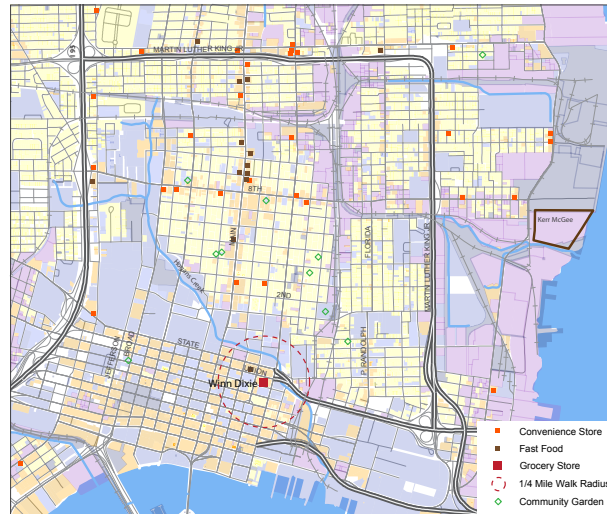
The maps at right illustrate several key insights about these neighborhoods:

- Residential Pockets:** Residential areas are divided by major built infrastructure and green infrastructure features such as rail lines, elevated highways and creeks. These infrastructure features can isolate residential areas from important quality of life amenities and make access challenging for residents with limited or no access to private vehicles.
- Health Care Access:** Affordable primary care locations are all located outside of the residential areas and may not be easily accessible to residents who must rely on public transportation or walk to their appointments. There is one permanent dental facility, also located outside of the residential area. Other dental services are periodically available closer to residential areas through a dental van operated by the Duval County Health Department.
- Food Access:** There are no full-service grocery stores located in a walkable distance from the neighborhoods. Convenience stores and fast food restaurants, however, are scattered throughout residential areas, and are walkable for many residents. These factors are standard markers



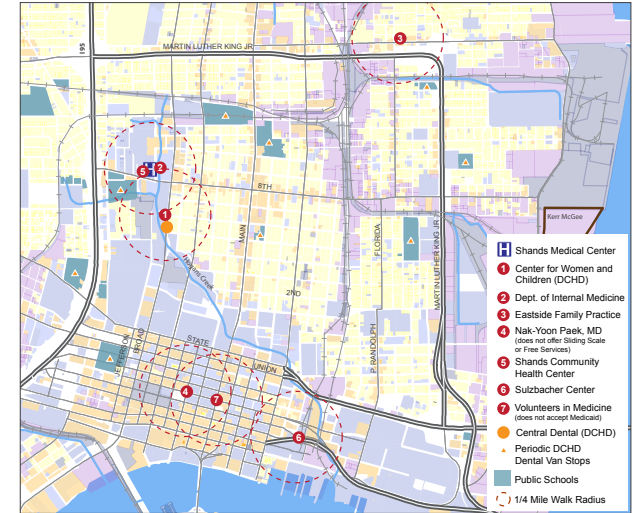
Residential Pockets

This map shows pockets of residential areas with access restricted by infrastructure (rail, elevated highways, creeks).



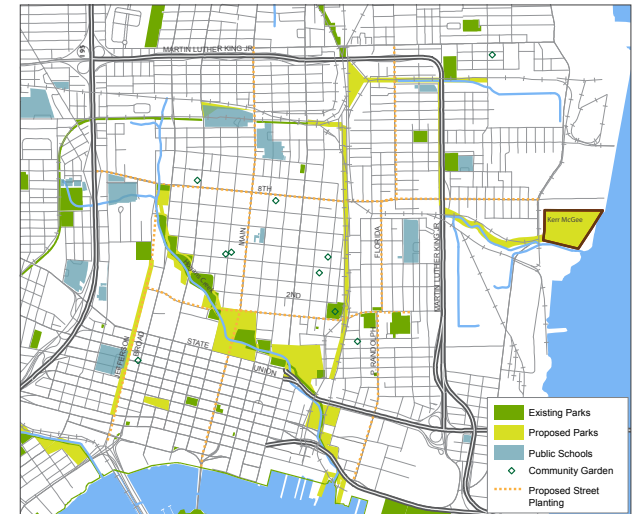
Food Access

This map shows access to groceries, convenience stores and fast food.



Health Care Access

This map shows access to affordable primary and dental care.



Open Space Access

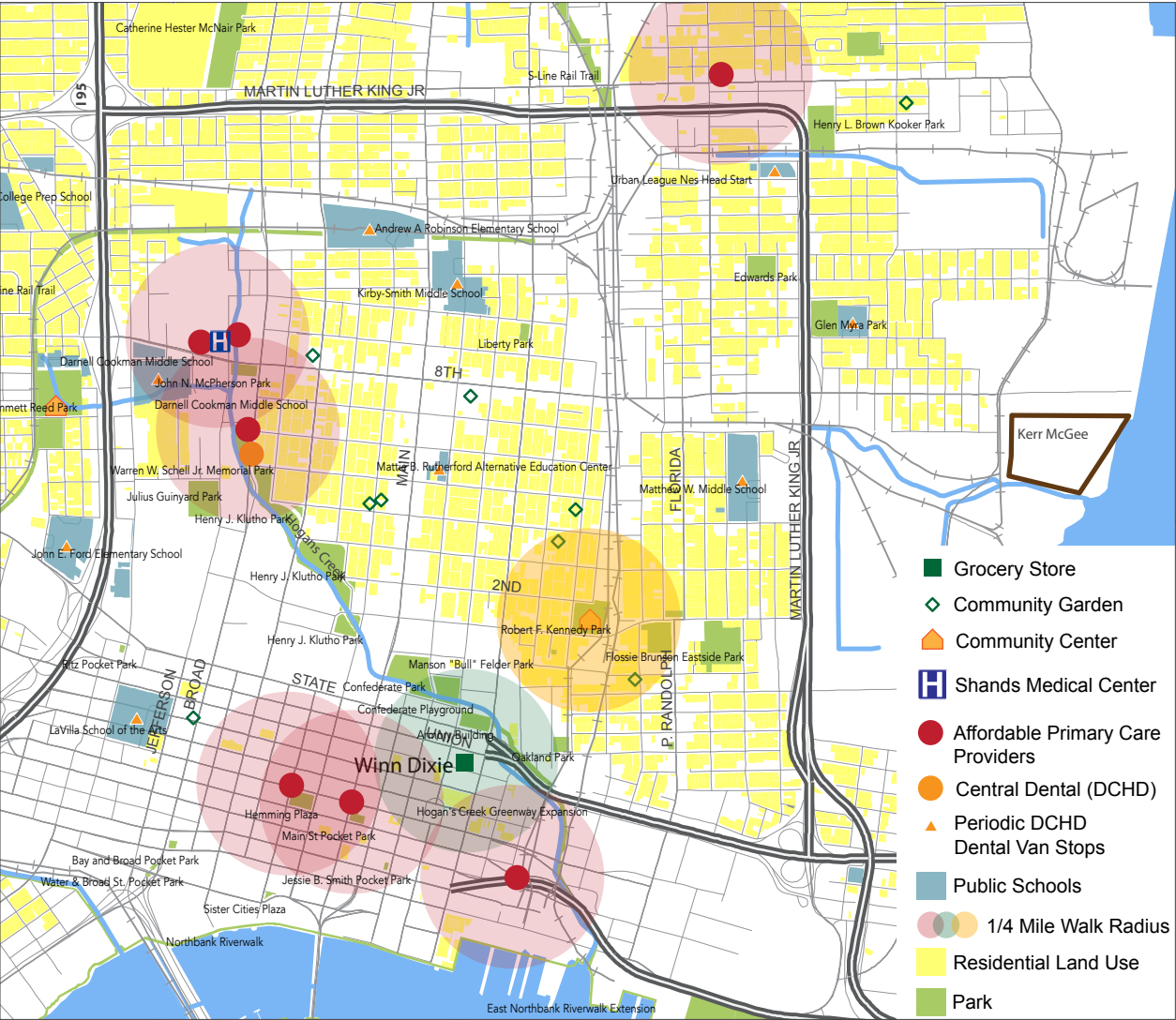
This map shows access to schools and existing and proposed parks.

of a food desert. The area does have a number of community gardens accessible to residents; however, these gardens are unlikely to supply the quantity of healthy, affordable food needed to fully support the neighborhoods.

- **Open Space Access:** The neighborhoods have a few parks scattered throughout their inner areas as well as a line of existing and proposed parks following Hogan's Creek on their western edge. Public schools are also shown on the map since schools often have playgrounds or sports facilities that are or could potentially be open to the public after school hours.

The map at left shows neighborhood assets that pertain to the Coalition's three quality of life goals:

Quality of Life Goals	Neighborhood Assets
Healthcare	Affordable primary care providers Central Dental DCHD dental van stops
Open space	Community center Hogan's Creek Parks (planned and existing) Public school grounds St. Johns River
Healthy, affordable food	Grocery store Community garden



Neighborhood Assets Map
This map shows neighborhood assets including access to affordable care and amenities.

Key institutional assets are shown with the addition of a quarter mile walking radius. It is evident that assets related to the community-defined goals are not located within a walkable distance of most residents. Further, the amenities are scattered around the edges of the study area. There is no clustering that creates an active urban core for the local community.

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<i>Strategy Selection</i>	32
<i>Leveraging Coalition Efforts</i>	34
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V. Strategies

Strategies

The project team researched innovative strategies that other communities throughout the United States have used to tackle environmental, economic, and public health challenges similar to those observed in Jacksonville, Florida. The project team selected models that are:

- grassroots and community- or neighborhood-based,
- cost-effective or revenue/job generating,
- scalable, with options to start small and grow capacity, and
- able to address more than one of the top priorities identified by working groups in the Jacksonville Integrated Planning Project which included access to health care, healthy affordable food and open space.

At the Solutions Development meeting, the Jacksonville Integrated Planning Coalition convened to review the strategies in conjunction with the assets and gaps mapping analysis. Coalition members were asked to prioritize strategies and then formed working groups to guide implementation of their top two strategies.

The following strategies were presented at the first meeting of the Jacksonville Integrated Planning Coalition. The presentation included a description of each strategy, implementation case studies, videos and additional resources.

To view the full description of strategies, see the Addendum document, “Jacksonville Strategies: Innovative Approaches to Meeting Community Priorities.”

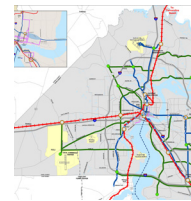
Mobile Health Clinics

Mobile health clinics provide an alternative way into the health care system for the medically disenfranchised in both rural and urban communities.



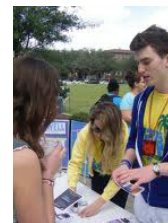
Transportation and Health Collaboration

Collaboration between Duval County Health Department, Jacksonville Transportation Authority, and the Jacksonville Integrated Planning Coalition could improve access to health services.



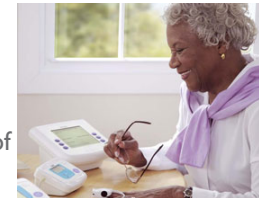
Health Educators and Peer Coaches

Primary care physicians alone may not always meet the broad range of patient needs. Community health educators and peer coaches help patients manage chronic disease and prevent worsening conditions. They may be paid employees or volunteers and typically come from the target community.



Telemonitoring Chronic Health Conditions

Telemonitoring systems allow patients to report information about their conditions, help patients better manage chronic conditions, and reduce number of medical appointments.



Cultural competency training

Cultural competency training raises awareness about health disparities that may exist, as well as the barriers faced by underserved communities.



Urban Community Agriculture

Consumers buy into a “share” of a season’s harvest with weekly pickups or deliveries. Designed to allow food growers and consumers to share in the risks and benefits of farming.



Mobile Farmers Markets

A “produce aisle on wheels,” a mobile farmers market takes fresh, healthy, and affordable produce directly to communities that need it most.



Food Cooperative

Food cooperatives (co-ops) are a classic model of food autonomy. They are owned by their members, who are generally customers or workers, and may take the form of retail stores or buying clubs. Co-ops typically source locally grown and manufactured products.



Parks Liability Insurance through Umbrella Organizations

Liability insurance can help overcome a barrier to park access for local sports teams and public events.



Mini Farmers Markets

Small scale, neighborhood-based markets combine the community-building benefits of traditional farmers markets with the flexibility of mobile markets, “mini” or “pop up” markets.



“Carrotmobs” at Locally Owned Stores

Carrot mobs are a cost effective way to organize community members to influence businesses.



Parks Advocacy Organization

Parks advocacy organizations can increase community access to park amenities.



Gardens Sited at Community Institutions

Community gardens built and maintained at key community hubs (e.g., schools, clinics, rehabilitation centers) can increase food security and build social capital.



Youth Empowerment through Healthy Food

Food has the potential to catalyze education and empowerment of young people in programs that engage kids from diverse backgrounds and with diverse interests, offering skills development and critical thinking.



Neighborhood Specific Brownfield Inventory

Communities can take an increased role in the brownfield redevelopment process - from community visioning through plan implementation.



Strategy Selection

In the Solutions Development workshop, participants examined the gaps in access to affordable healthcare, healthy food sources and open space.

Following review of the strategies presented on the previous page, the participants engaged in a sticky dot exercise to identify their top priorities as well as projects they as individuals were willing to work on.

Based on the results of this exercise, the Coalition formed two working groups to address healthcare access and healthy, affordable food access. Considerations identified by each group are described below and potential locations identified for new neighborhood amenities are illustrated on the map on the facing page.

(Below): A nurse takes a patient's blood pressure.



Healthcare Access Work Group

The healthcare access group decided to focus on starting a mobile health clinic with the goal of increasing healthcare access quickly in the short term. The group also hopes that the clinic stops can be used to identify a location for a permanent healthcare facility in the community by helping to gauge accessibility of various sites.

The group developed the following considerations for locating the mobile clinic:

- Importance of siting the clinic both at places of dense population and at commercial corridors to which the community would like to attract people.
- The existing dental and medical resources serve certain targeted populations (children, the elderly, the homeless), but not the general population this project hopes to be able to reach.
- Priority sites for clinic stops might be:
 - A Phillip Randolph Blvd. & 1st St. (baseball field)
 - Confederate Park (some discussion about the appropriateness of this site given that the homeless population that frequents it has access to free services elsewhere)
 - Kennedy Center
 - Main Street
 - Eastside Center at 1st St. & Franklin St.
 - Wells Fargo parking lot (the bank is likely to support a stop here and may also provide funding for the project)

Healthy, Affordable Food Access Work Group

The food access workgroup noted the presence of multiple community gardens in Springfield and the Eastside and decided to focus on growing the local food system through advocating for food processing centers that could provide local jobs for the neighborhoods and food co-ops that could sell locally grown food at affordable prices.

The group developed the following considerations for siting urban agriculture projects:

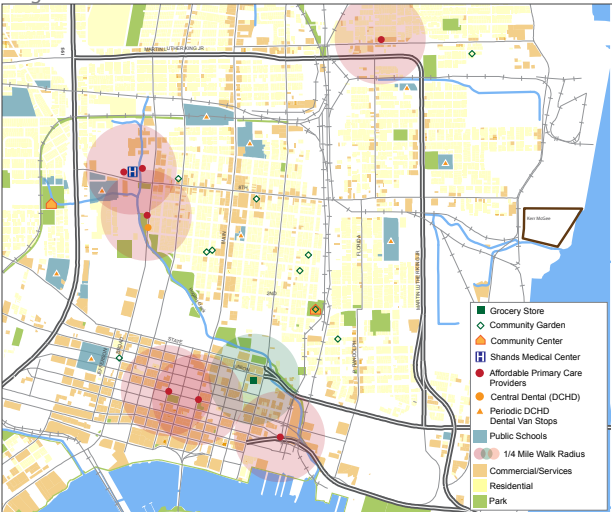
- Soil contamination is a critical issue. Additional research and surveying may be necessary in order to identify the least contaminated and most appropriate sites.
- Vertical growing, as employed by Growing Power in Milwaukee, is an option on contaminated sites.
- There are currently legal barriers to urban agriculture, but participants felt these can be easily overcome through negotiation with the City.
- Priority sites for urban agriculture projects might be:
 - Lower East Side
 - 8th St. between Springfield and Eastside
 - Sites for two food cooperatives on A Phillip Randolph Blvd. and Main St.
- A participant urged that food deserts be considered when selecting a location.

(Below): Children help harvest an urban garden.



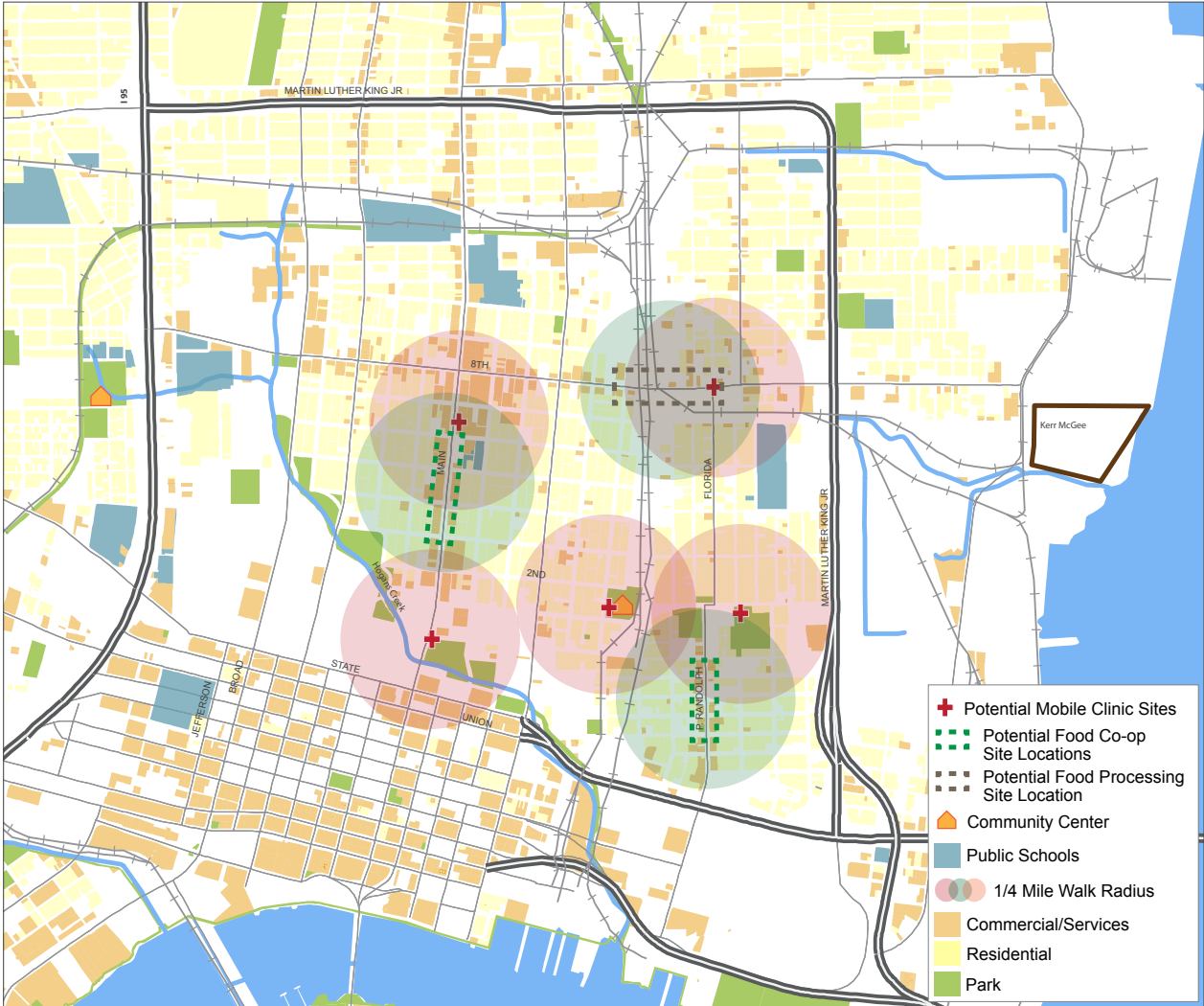
Gap Map

This map identifies existing gaps in services to meet community healthcare and healthy food needs at the neighborhood scale.



Healthcare and Healthy, Affordable Food Strategies

This map identifies ways provide additional and/or mobile services to meet community healthcare and healthy food needs at the neighborhood scale.



Leveraging Coalition Efforts

In addition to the project-based considerations identified by each workgroup, Coalition members also identified a number of opportunities for leveraging their work across neighborhood boundaries and in conjunction with other existing initiatives:

- The Eastside and Springfield neighborhoods hold much in common, including the high incidence of foreclosures and the pressing need to retrofit houses, while recognizing that the lower Eastside area is beset with polluted and/or industrial sites.
- Potential exists to leverage the City of Jacksonville's Neighborhood Stabilization Project (NSP) program by focusing work group strategies on NSP designated funding locations within the Eastside and Springfield neighborhoods.
- Potential also exists to leverage the Coalition's work by aligning efforts with the EPIC Communities project being led by the Local Initiatives Support Corporation (LISC) and the U.S. Department of Housing and Urban Development (HUD).

Funding Opportunities

The project team assembled a packet of information on foundation and government grants for review by Coalition members. The packet of grant opportunities provided basic information about funders with grant making priorities that match key community priority areas identified by the JIPP. Funders were selected for inclusion in the packet because of their relevance to the following key areas:

- Access to Health Care
- Access to Healthy Food / Healthy Food Systems
- Access to Open Spaces / Recreation
- Youth Empowerment
- Environmental Justice / Social Justice
- Grassroots Community Organizing

Information provided for each opportunity includes:

- Description of Funder
- Relevance to JIPP
- Range of Award
- How to Apply
- Contact Information



(Above): Underutilized sites in Jacksonville can present opportunities for redevelopment once environmental concerns are addressed.



Conclusion and Next Steps

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Conclusion and Next Steps

Community Actions: Looking Forward

The Jacksonville Integrated Planning Coalition has identified the following opportunities for building on the work of this report:

- Strengthen the community coalition to drive the revitalization agenda.
- Collaborate with HUD/LISC - EPIC Communities project.
- Increase visibility and priority with the City of Jacksonville.
- Support grassroots voices like the Eastside Environmental Council.
- Develop a community agenda to bring to city, state and federal agencies that have resources to offer the community.
- Emphasize the value of coalition efforts to building the social and political capital needed to effect positive change.

Looking ahead, the Coalition should seek to strengthen its cross-neighborhood ties and build a series of small successes based on the priorities and considerations developed in each of its working groups (healthcare and healthy food).

Over time, small initial successes can build the capacity of the group to (1) initiate positive community-wide change, (2) guide agency investments and initiatives, and (3) achieve quality of life improvements that meet the goals of the many neighborhoods and communities supporting the Coalition's work.

Aligning the Coalition's Work with the Building EPIC Communities Project

LISC's Building EPIC Communities project is a community revitalization pilot program focused on Jacksonville's Eastside and Northside neighborhoods.

In August 2012, JIPC members met with LISC representatives. Recognizing the similarity of their geographic focus areas and approaches, the Coalition endorsed aligning their efforts with those of LISC and joining the Building EPIC Communities project. LISC representatives agreed to build on the research and analysis performed during the JIPP process and to collaborate with the Coalition on revitalization initiatives moving forward.

Local Initiatives Support Corporation

The Local Initiatives Support Corporation is a community development support organization with local offices in cities and rural areas nationwide. The Jacksonville office was opened in 1999.

LISC's Building EPIC Communities project focuses on five goals:

1. Expanding investment in housing and other real estate
2. Increasing family income and wealth
3. Stimulating economic development
4. Improving access to quality education
5. Supporting healthy environments and lifestyles

For additional information, visit:
www.liscjacksonville.org/

Conclusion

The Jacksonville Integrated Planning Project offers an innovative, robust model for community engagement that builds local capacity to address environmental justice concerns.

This integrated planning approach produces numerous benefits, including:

- Brings together a broad range of stakeholders in a productive dialogue.
- Documents measurable environmental justice disparities.
- Demonstrates a One EPA approach.
- Puts Superfund reuse into a neighborhood context.
- Outlines appropriate roles for the community, non-profits and agency staff.
- Builds capacity within the community to effect positive change.

By validating community concerns and prioritizing locally-defined quality of life goals, EPA can better align agency initiatives to support community efforts and priorities. Building and improving the mutual understanding between EPA and the communities it serves is expected to produce more collaborative working relationships and improved outcomes for both EPA and the community.

The principles that guided this approach could be used as a model for building towards equitable development outcomes in other environmental justice communities.





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