# Adams Park HIA Afterword

The Adams Park Health Impact Assessment (HIA) was the first HIA undertaken in Nebraska and the Great Plains region of the United States. It is also relatively rare that an HIA focuses on the decision-making around a park or other greenspace. To assist individuals who are conducting their first HIA or who are seeking to maximize health benefits and minimize any health risks in connection with a greenspace decision, this afterword will attempt to answer the following questions that might be of interest:

- *How did the Douglas County Health Department (DCHD) build the capacity to conduct HIAs?*
- *What were the main challenges of this HIA and how were they overcome?*
- *What were some of the unique aspects of this HIA because it was focused on a park renovation?*
- *What impact did the Adams Park HIA have?*

The following question, which naturally arises in regards to an HIA, will also be addressed in this Afterword.

- *Was this HIA done in transparent and unbiased manner so that its findings and recommendations are credible?*

## How did the Douglas County Health Department (DCHD) build the capacity to conduct HIAs?

The political and cultural climate of Nebraska emphasizes public-private partnerships/bottom-up approaches over government-only/top-down approaches; thus, DCHD has emphasized learning how to work effectively through collaboration. A long-term partner for DCHD has been Live Well Omaha (LWO), a nonprofit dedicated to making Omaha a healthier community. By working together instead of separately, DCHD and LWO secured Active Living by Design and Healthy Kids Healthy Community grants from the Robert Wood Johnson Foundation, as well as a Communities Putting Prevention to Work grant from the CDC. DCHD also was actively involved in seeing that health was included in two revisions to the City of Omaha's Master Plan (Environment Element & Transportation Element). In combination, these experiences built the partnerships and capacity necessary to undertake HIA work. As mentioned in the HIA Overview, one of the primary reasons that DCHD was selected by CDC to receive funding and training was because it had already demonstrated a desire and capacity to work across different sectors of the community.

## What were the main challenges of this HIA and how were they overcome?

Since this was DCHD's first HIA, it was a challenge helping partners to figure out what projects might be suitable for an HIA. Partners needed help understanding what an HIA was and what value it could bring to their organization. They also had fears – mostly stemming from NEPA/EIA processes – about HIA being burdensome and causing delay. This "pre-screening" was more difficult that the more formal screening process undertaken once potential candidates had been determined. Concrete examples of other HIAs had to be used to help partners better understand what an HIA was and wasn't. The East

Bay Greenway HIA was especially helpful as a case study for discussions with the City of Omaha Parks, Recreation and Public Property Department.

Another major challenge of this grant was that the scope was too broad. Including nutrition, physical activity, crime safety, traffic safety, and educational achievement meant that the HIA provided a very robust perspective, but it also created a very long and intensive process. This was a "lesson learned" from other communities that was part of training received from CDC, but it was not heeded sufficiently. Future HIAs will have a more focused scope to ensure HIAs can be completed in a timely manner.

A final challenge was ensuring that stakeholders were clear that the HIA was to better inform the decision-makers – not take the place of them. Being clear about this distinction helped DCHD minimize struggles over power and authority and allowed for less guarded responses to the HIA process.

## What were some of the unique aspects of this HIA because it was focused on a park renovation?

One of the reasons that the scope of the HIA was broad was because there is a growing appreciation for the myriad ways in which parks and other greenspace (or the lack of them) affect physical, mental, emotional, and social health. Often referred to as "the lungs of a city," parks and greenspace are places to be active, connect with family, friends, and neighbors, and relax and have fun. Increasingly they are also places to grow food – as seen with the Urban Farming and Community Gardening Center proposed for Adams Park. This variety of connections to health provides an HIA practitioner with a challenge for focusing the work, but also provides an opportunity to help others understand that health is not limited to the absence of disease or even just physical health.

Because this HIA focused on better informing the Parks Department on how Adams Park could serve as a catalyst for community revitalization and health, there was not one clear "up or down" decision like with a legislative process. While greater clarity on what decisions the HIA would inform would have been appropriate, this HIA was still a very valuable effort in support of a section of Omaha that experiences significant health disparities.

## What impact did the Adams Park HIA have?

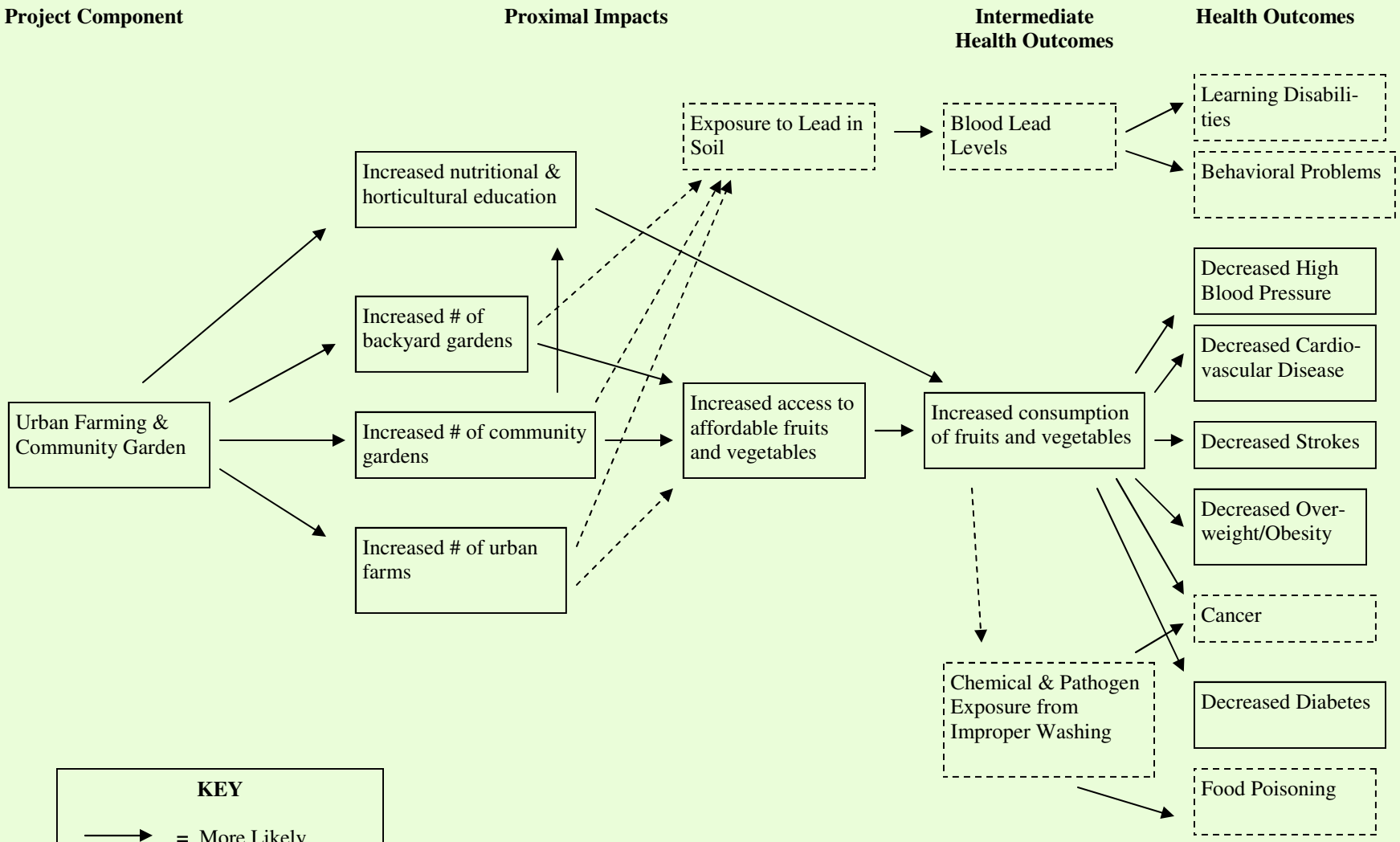
The HIA broadened the discussion about the Adams Park renovation beyond the park boundaries to include neighborhood factors such as vacant land and crime. This allowed for a more concrete recognition of how closely the success of the park renovation was tied to creating a healthy and safe neighborhood surrounding it.

The HIA elevated the profile of this project and its potential for impact to the point that it was included as Omaha's submission to Bloomberg Philanthropy's Mayors Challenge, which was seeking innovative ideas for national problems. It also brought forward some national best practices for improving aging parks and as a result, the Parks Foundation is now exploring park conservancies as a new model for Omaha. Additionally, recommendations for greening vacant lots are being incorporated into the procedures the City of Omaha uses when doing demolition work on condemned structures.

## Was this HIA done in transparent and unbiased manner so that its findings and recommendations are credible?

To help each reader answer this credibility question for himself or herself, one caveat is helpful to consider. DCHD was striving to be **unbiased but not impartial** in conducting this HIA. As a county health department, DCHD is not impartial because its mission is to promote and protect the health of Douglas County residents. As a result, the HIA was focused on better answering question related to the health of people living near or using Adams Park. While it didn't ignore other concerns, the HIA was still looking at the issues from a health lens.

At the same time, DCHD and the Adams Park HIA did strive to be unbiased. This meant DCHD worked diligently to ensure that all findings were based in a combination of scientific research, local data, and community/stakeholder interviews. Additionally, the recommendations were vetted by the members of the advisory committee (the Healthy Community Design Partnership) and community organizations such as the Empowerment Network and the North Omaha Neighborhood Alliance. The overall goal was to offer the decision-makers (the City of Omaha, potential funders, and community members) a lens that is focused on health but not distorted by bias.




**KEY**

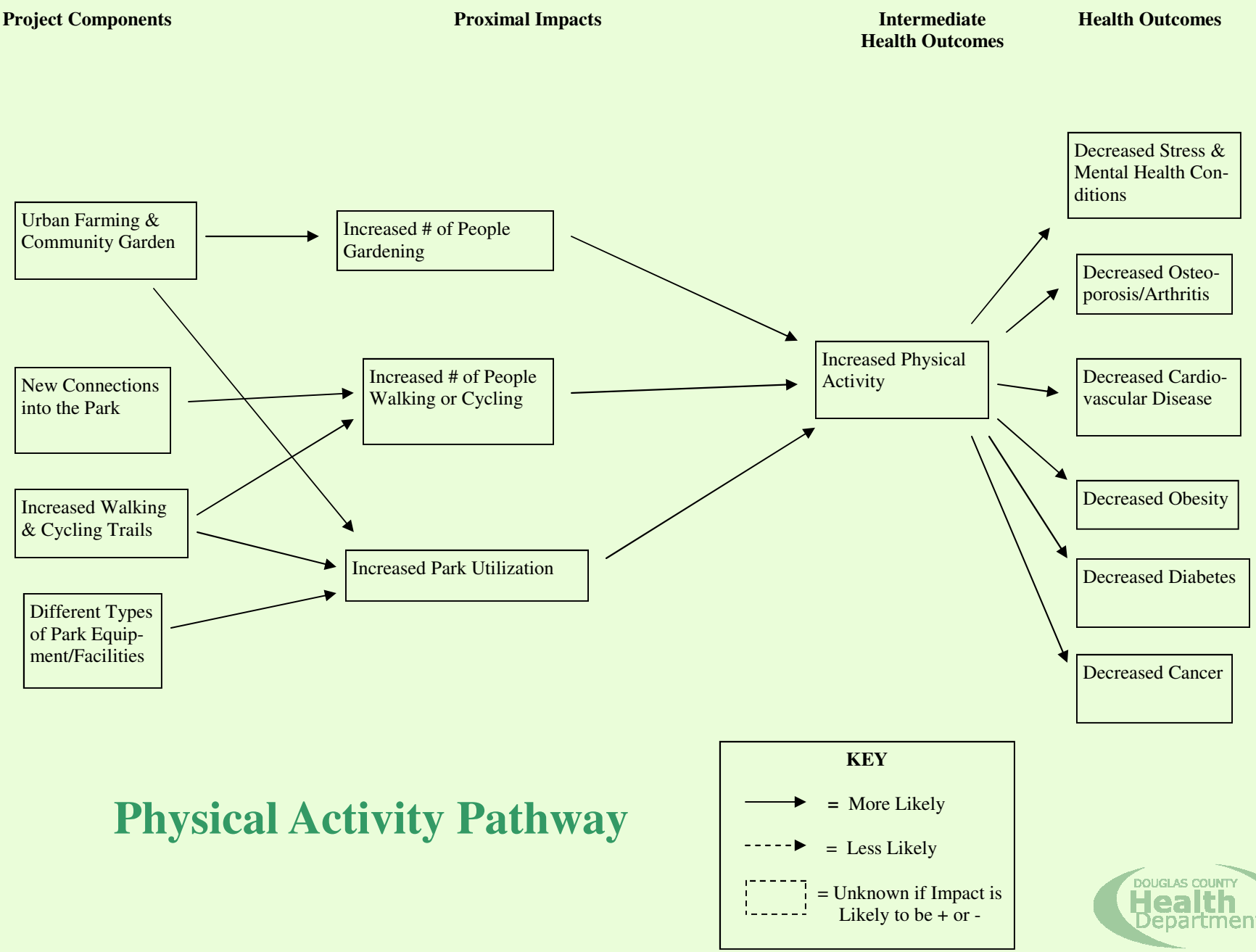
= More Likely

= Less Likely

= Unknown if Impact is Likely to be + or -

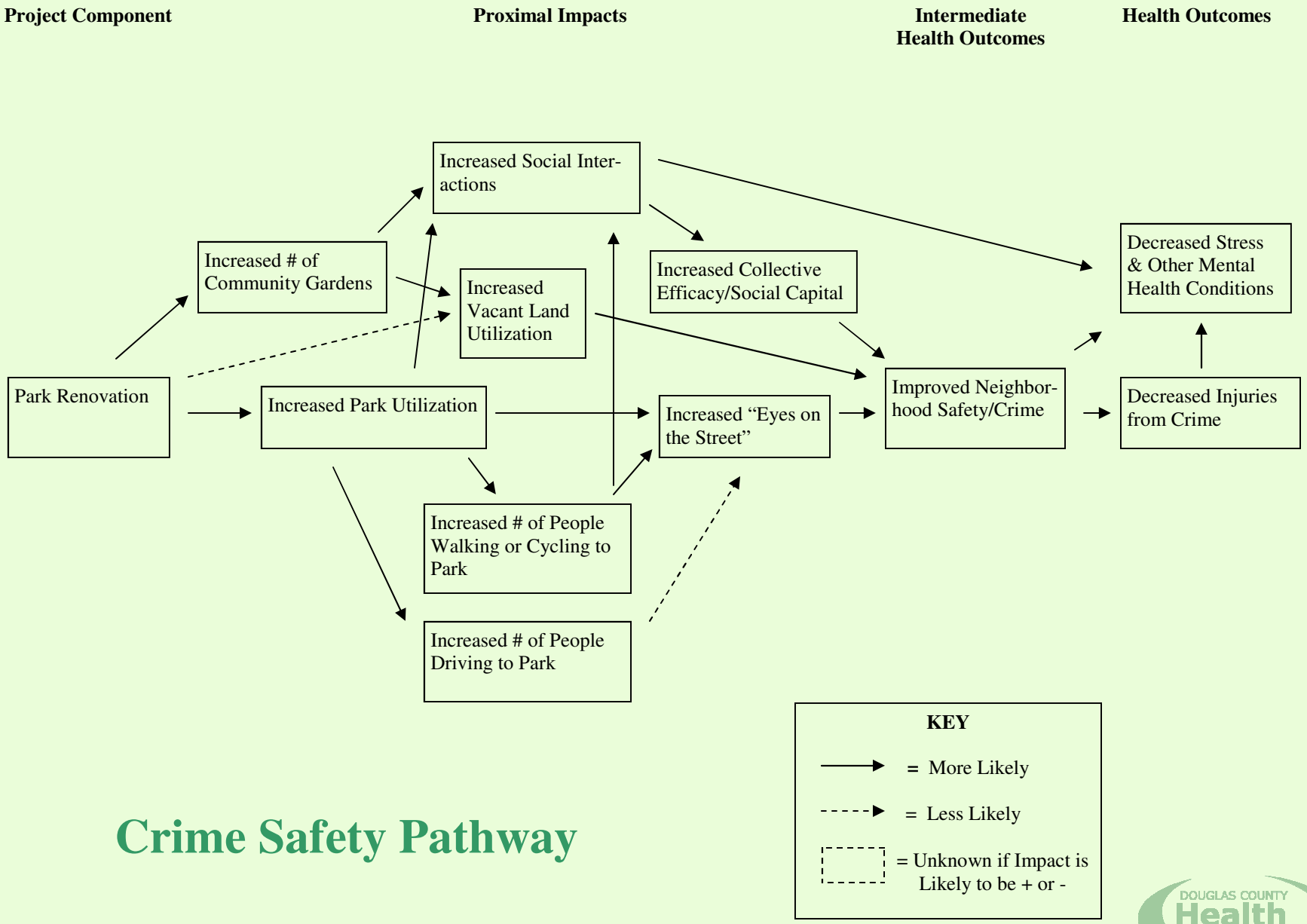
# Nutrition Pathway

DOUGLAS COUNTY Health Department



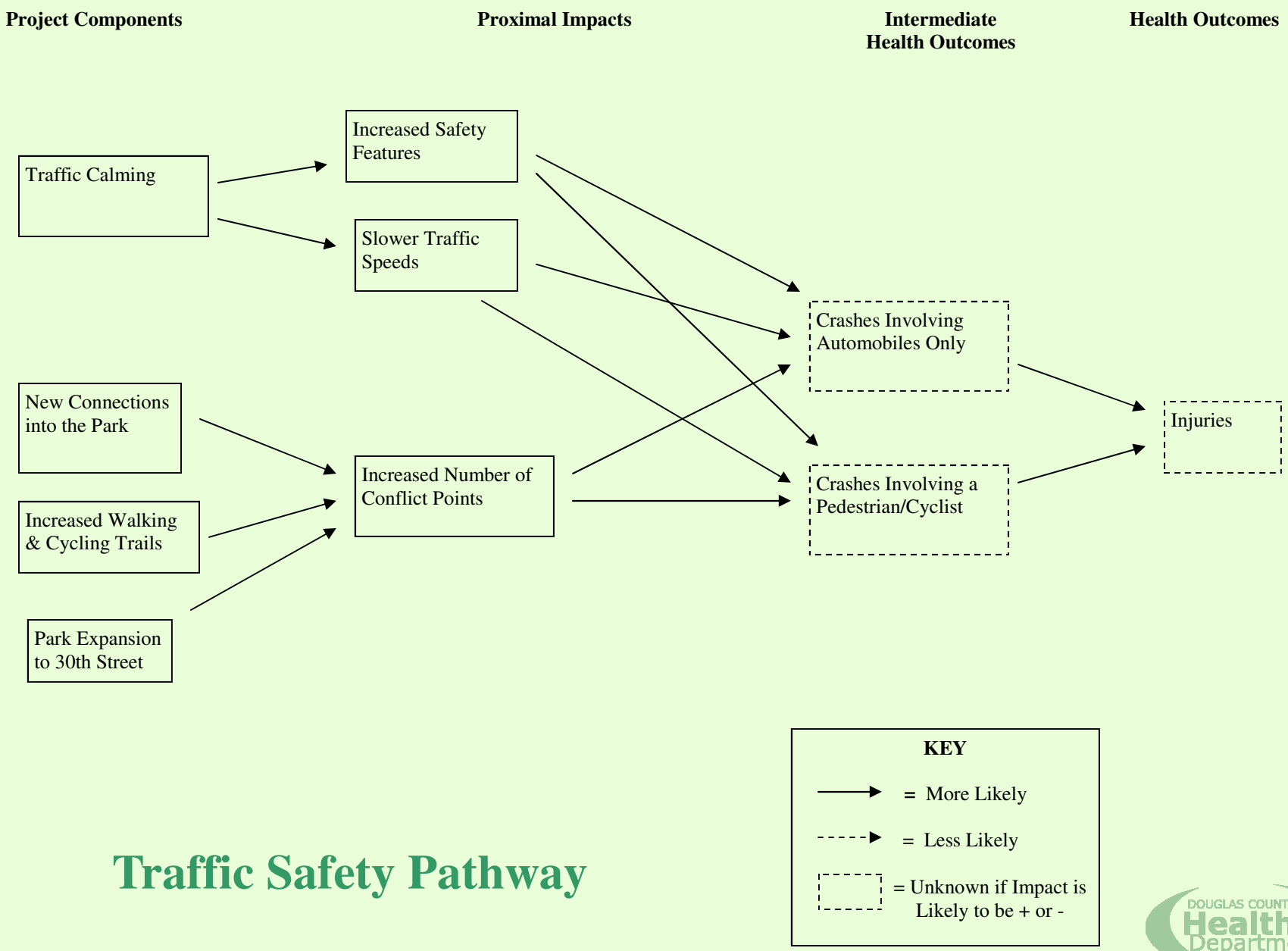

# Physical Activity Pathway

DOUGLAS COUNTY Health Department

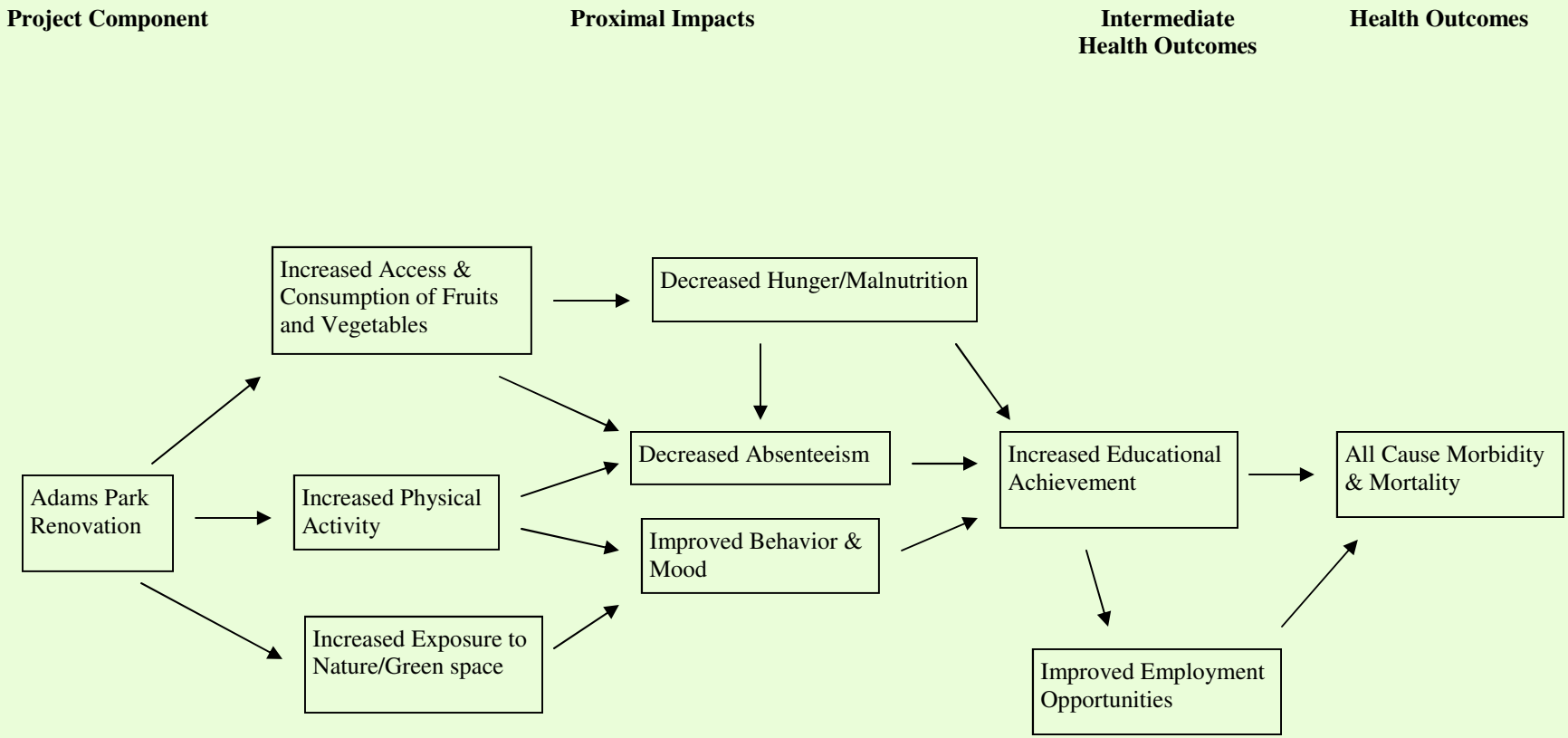



# Crime Safety Pathway

DOUGLAS COUNTY Health Department




# Traffic Safety Pathway




**KEY**

= More Likely

= Less Likely

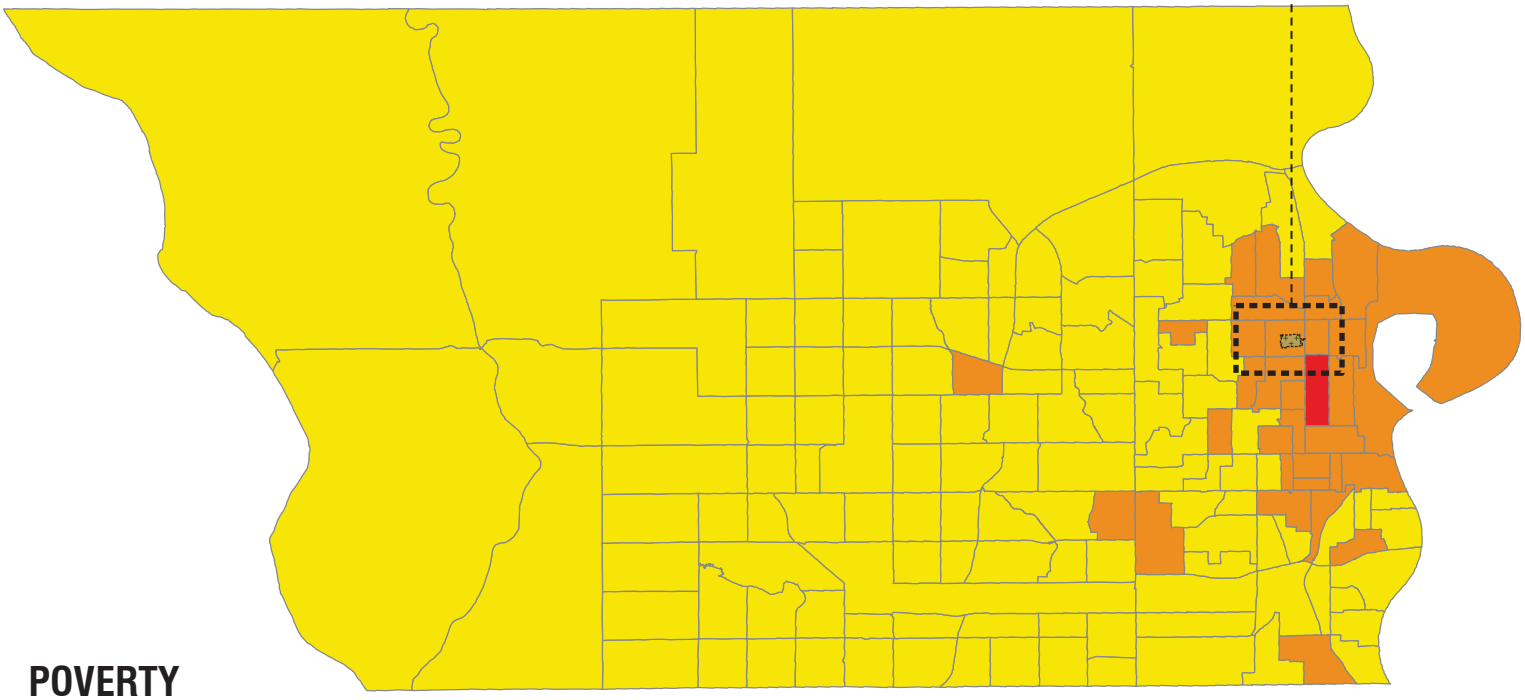
= Unknown if Impact is Likely to be + or -

# Educational Achievement Pathway

DOUGLAS COUNTY Health Department

# CONTEXTUAL DEMOGRAPHICS

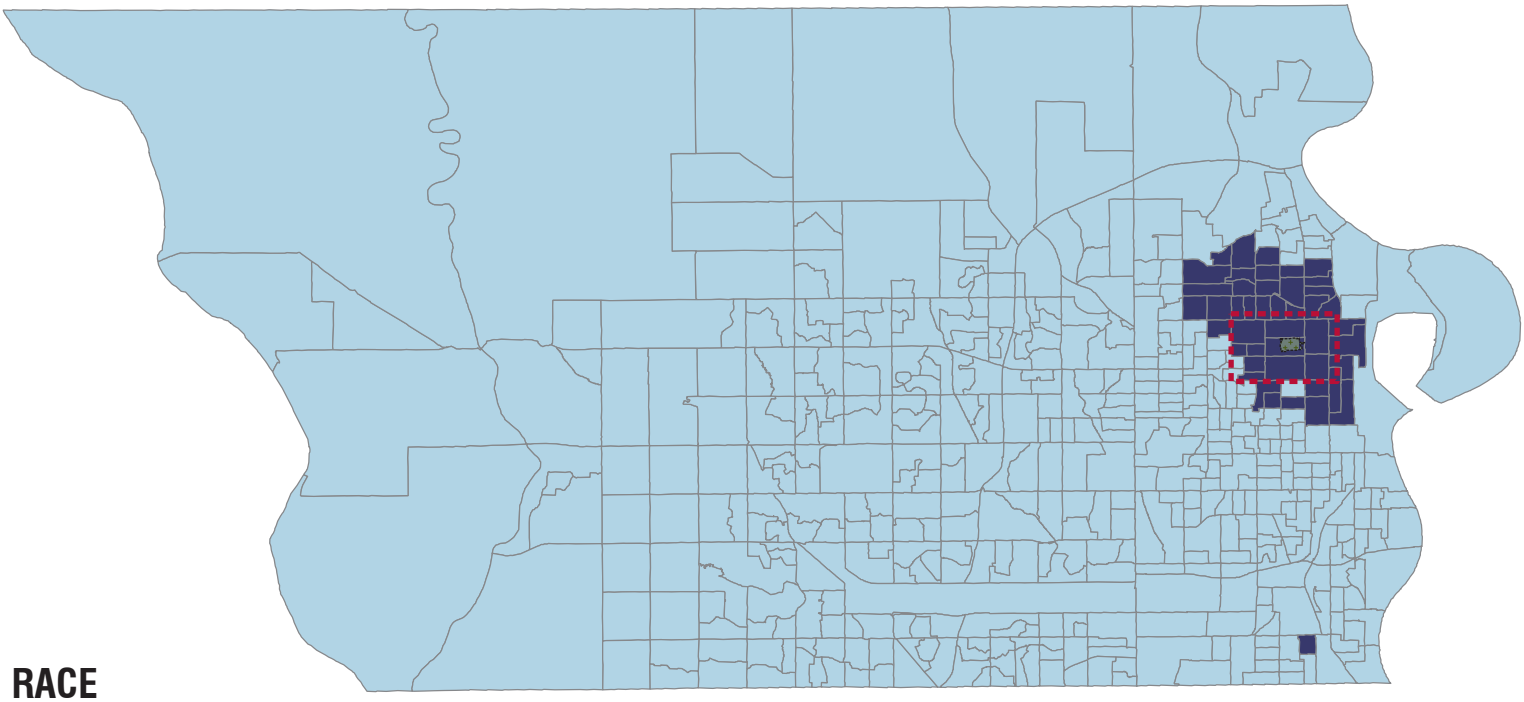
## HEALTH IMPACT ASSESSMENT | ADAMS PARK



**POVERTY**

Percent of Population at or below Federal Poverty Line

- 0-25%
- 25%-50%
- 50% +



**RACE**

Percent of Population Identifying as African-American

- < 50%
- > 50%

1:120,000 scale

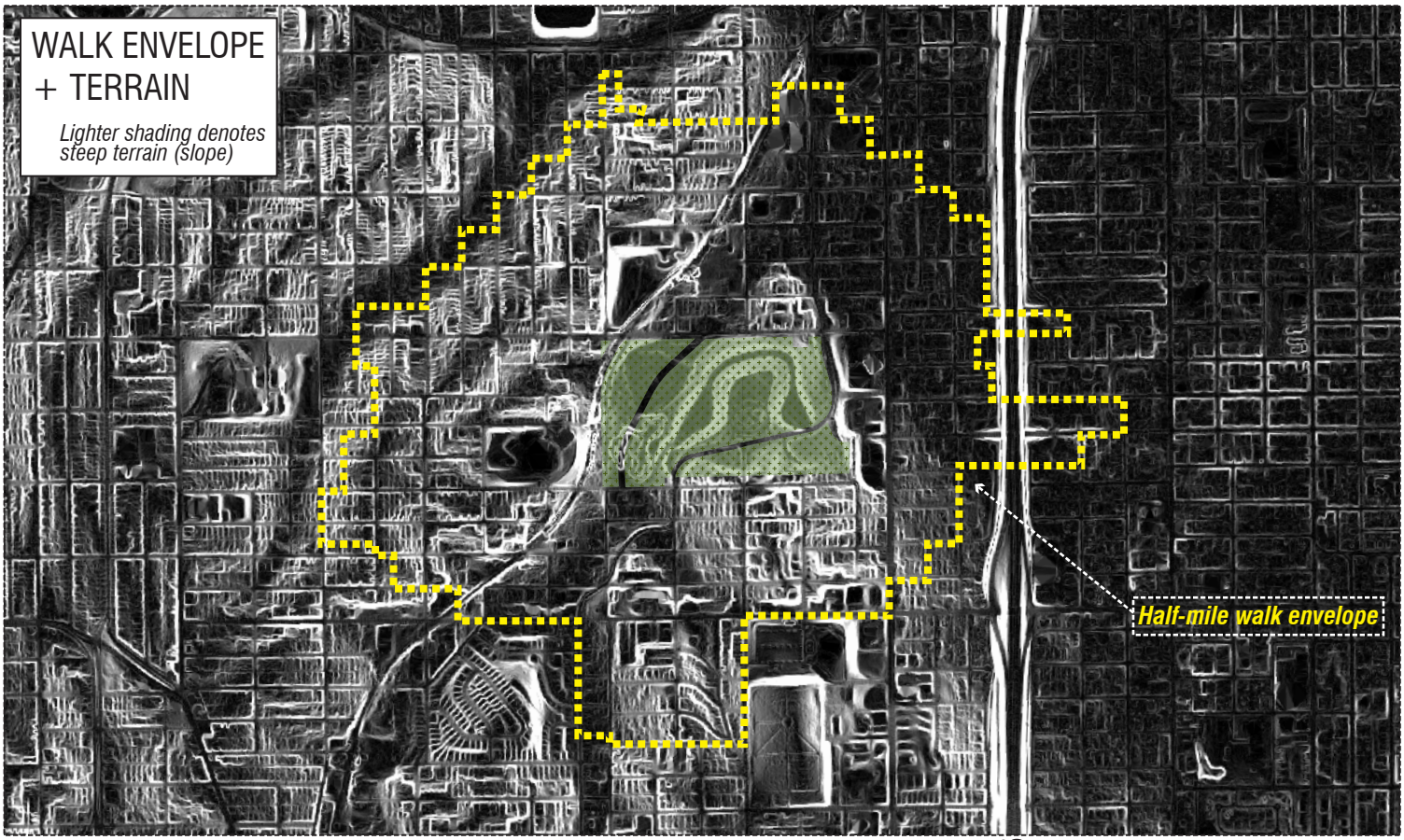
0 1.25 2.5 5 7.5 10 Miles

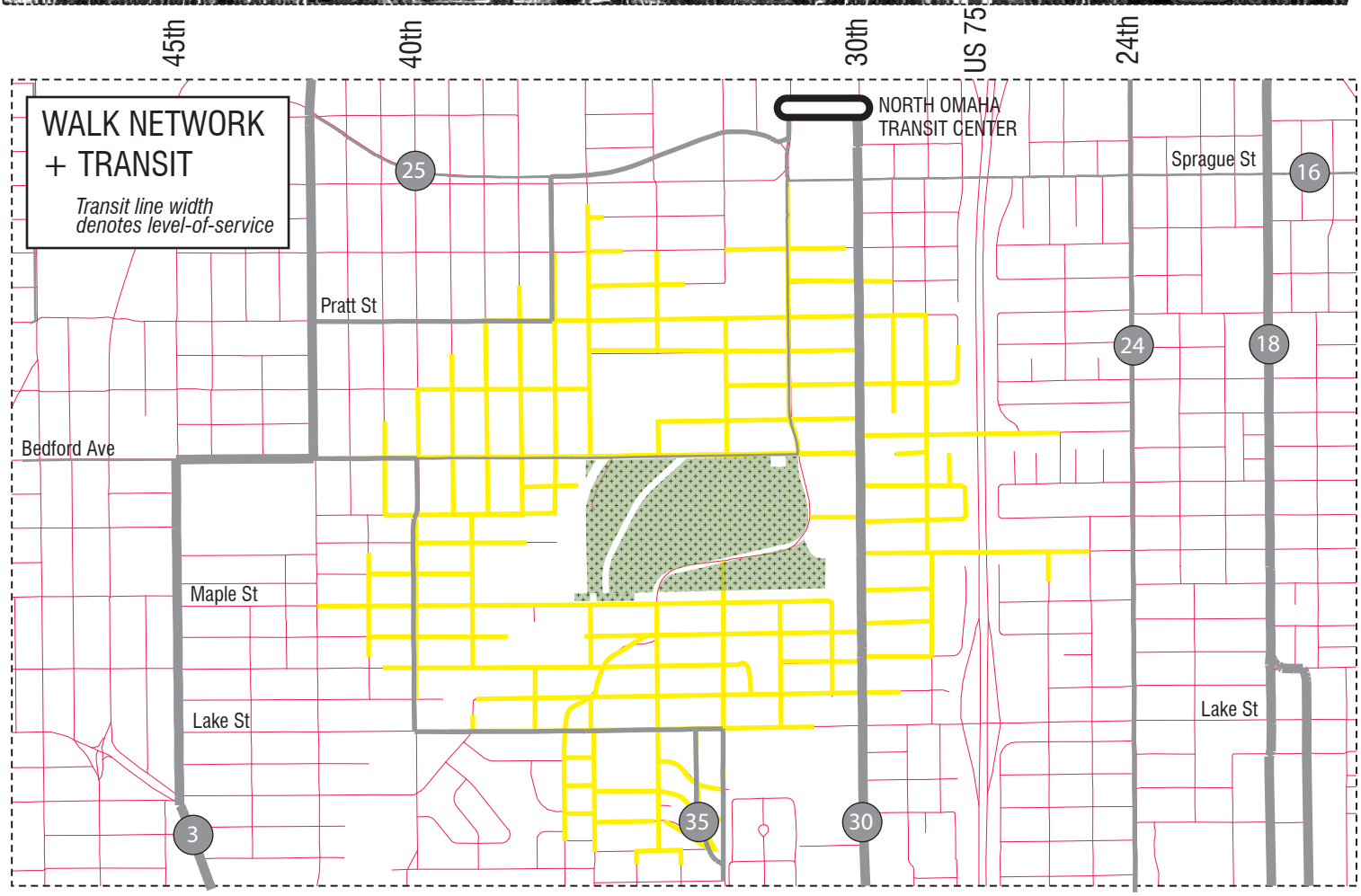
# CONNECTIVITY + MOBILITY

## HEALTH IMPACT ASSESSMENT | ADAMS PARK

1:20,000 scale

0 0.1 0.2 0.4 0.6 0.8 Miles



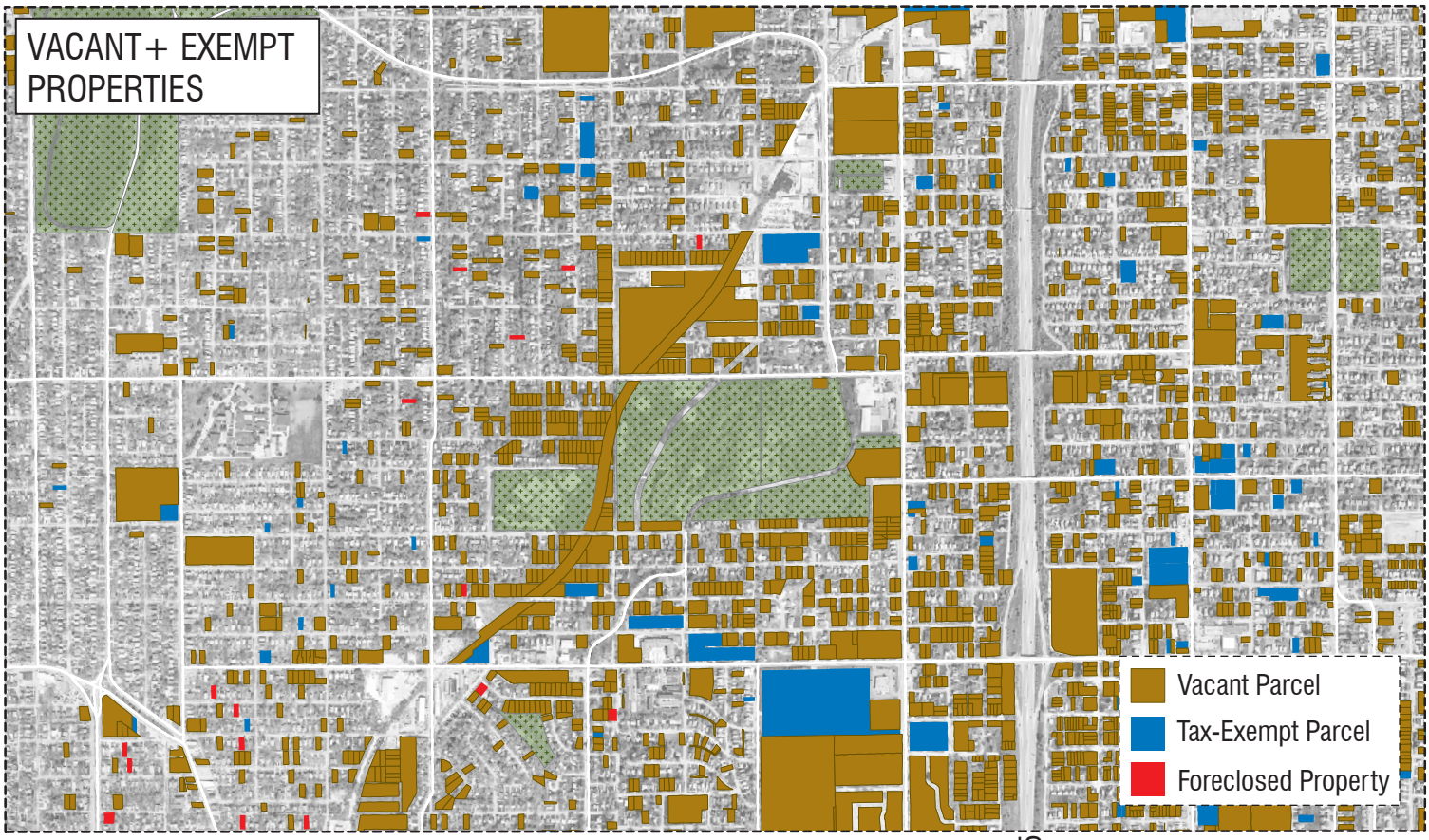



# LAND USE + DISUSE

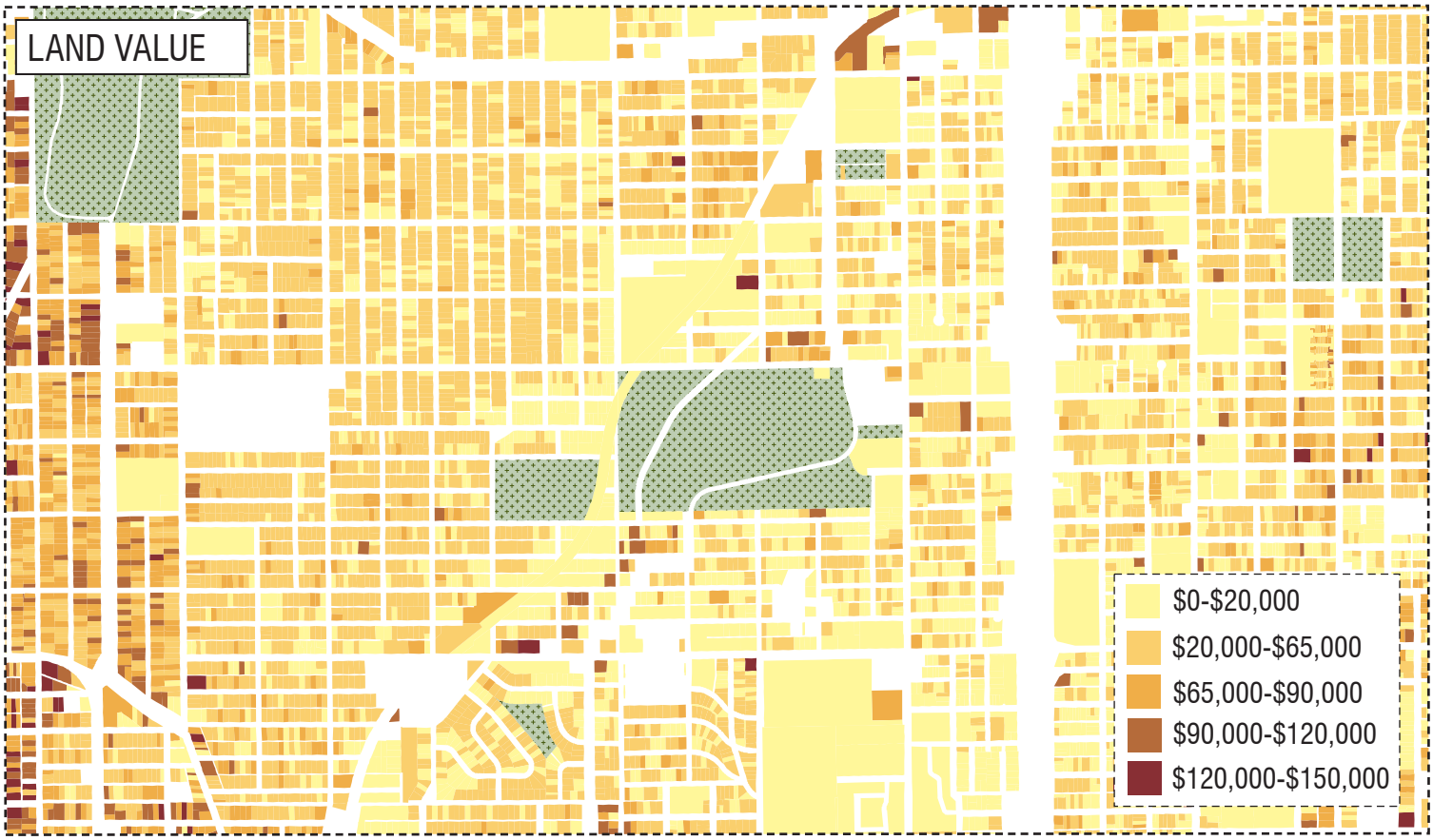
## HEALTH IMPACT ASSESSMENT | ADAMS PARK

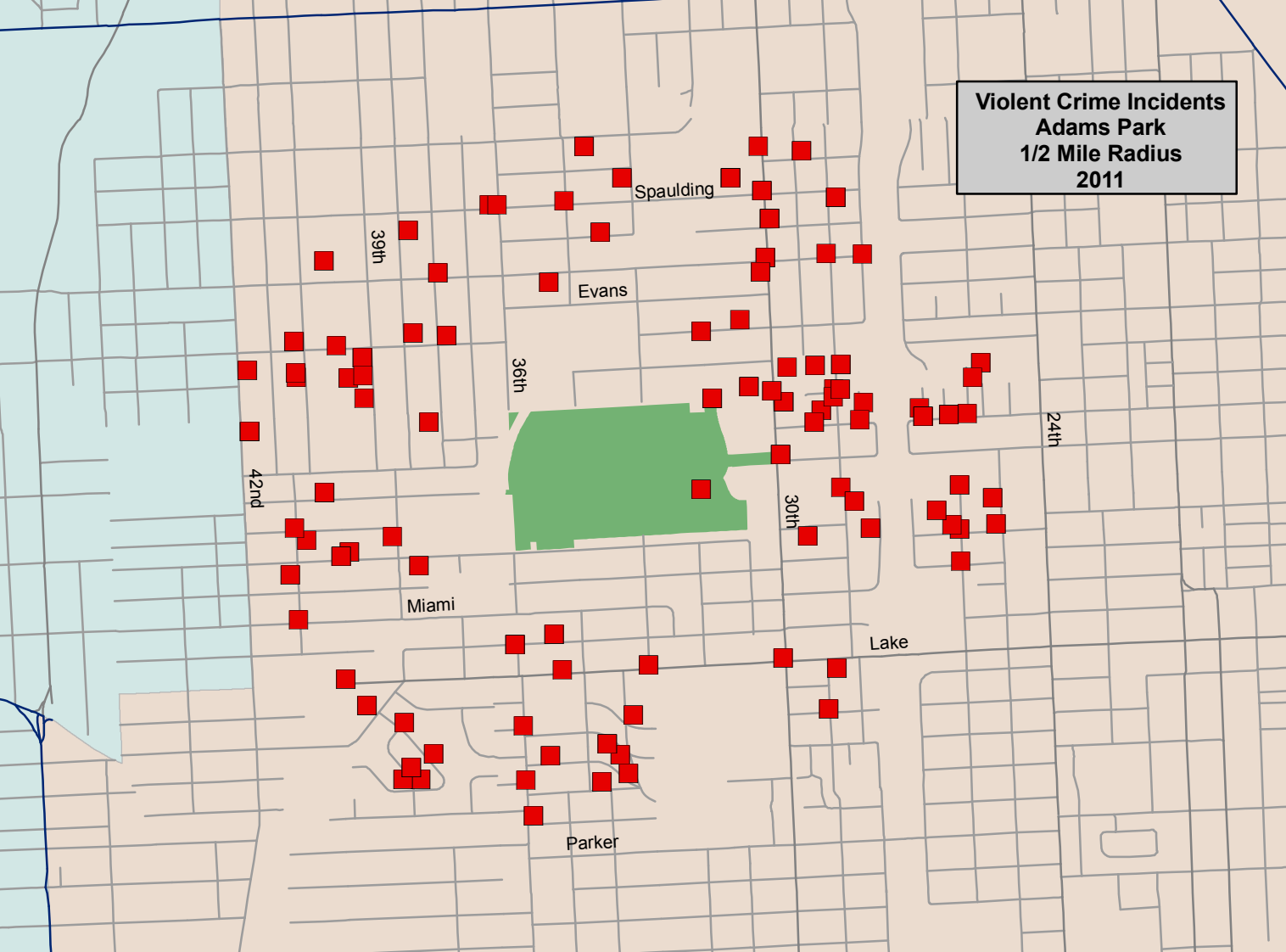
1:20,000 scale

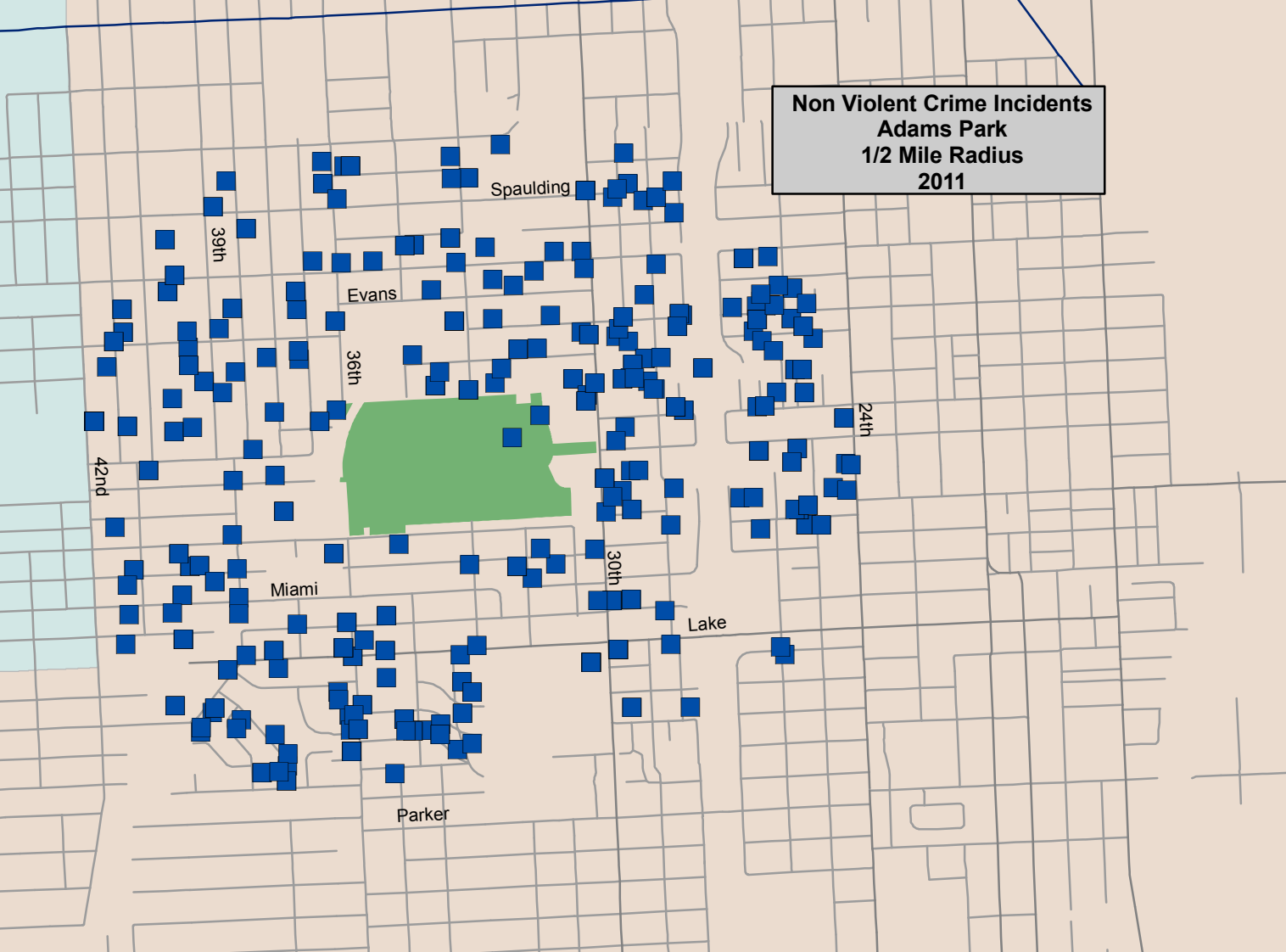
0 0.1 0.2 0.4 0.6 0.8 Miles

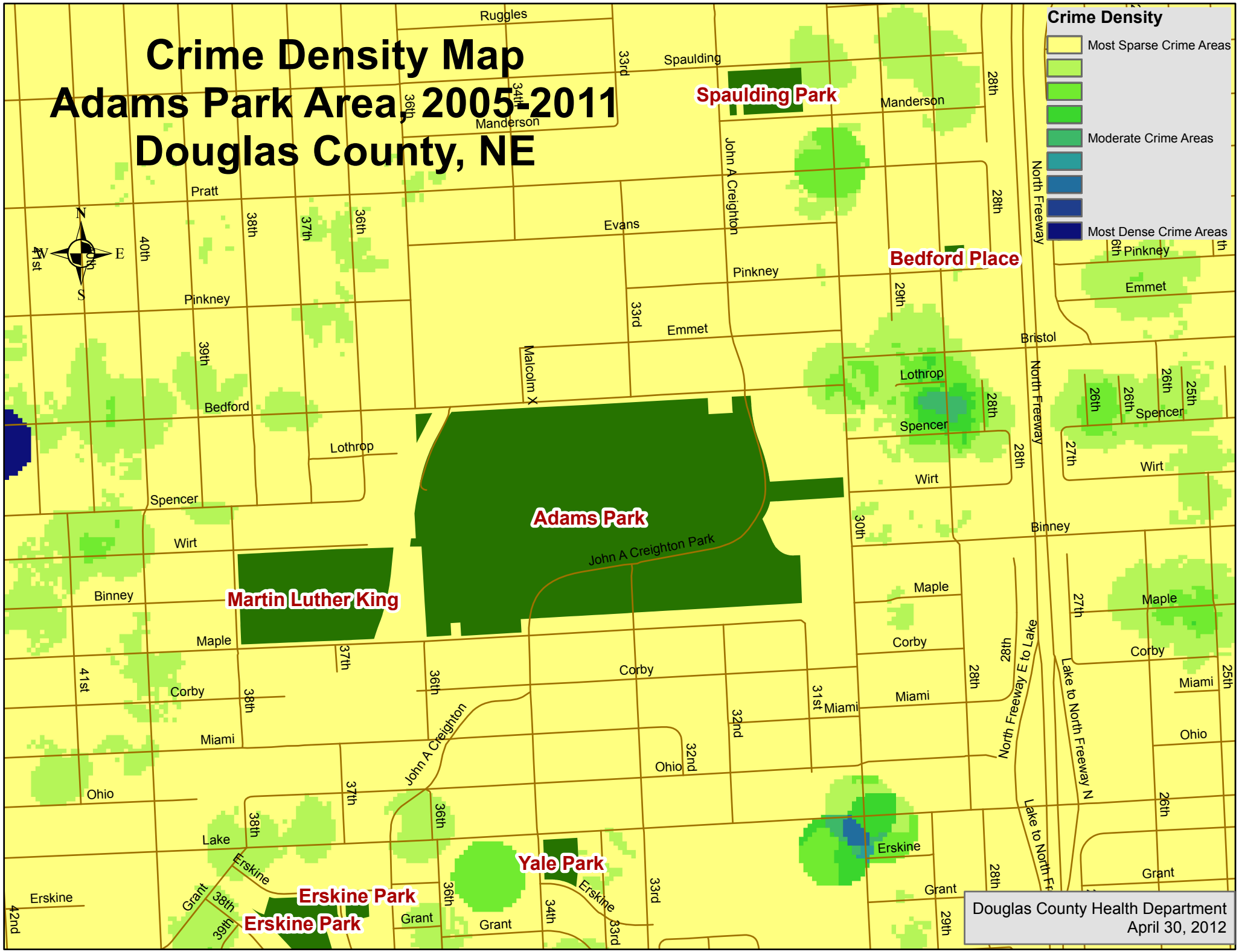



45th 40th 30th US 75 24th




Violent Crime Incidents
Adams Park
1/2 Mile Radius
2011
Spaulding
Evans
39th
36th
42nd
30th
24th
Miami
Lake
Parker


Non Violent Crime Incidents
Adams Park
1/2 Mile Radius
2011
Spaulding
39th
Evans
36th
42nd
24th
30th
Miami
Lake
Parker




Douglas County Health Department
April 30, 2012

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