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Commentary

“Pushing” physical activity, and justice

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ABSTRACT

Objective. There has been an increasing realization of the need for environmental interventions to increase physical activity levels in the population. Although promising, the impact of these strategies in reducing obesity-related disparities will be limited by the presence of inequities in the distribution of activity-related resources in the community. Advocacy efforts are critically needed to ensure that all communities benefit from environmental strategies being implemented.

Method and results. This paper describes two activist community-based organizations in Southern California, The City Project and Latino Health Access, and their successful efforts to mandate equitable access to public resources critical for reducing obesity-related disparities.

Conclusion. Principles for equitable development of public land are also presented as well as lessons learned that can inform future advocacy efforts.

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Introduction

Increasing the availability of safe-space for physical activity (Babey et al., 2008), opportunities to engage in physical activity during the school day (Cawley et al., 2007), and access to and use of public transportation (Lachapelle and Frank, 2009) are environmental strategies that have been found to be related to increased physical activity levels. Low-income, ethnic minority families are less likely to have access to parks or other space for physical activity (Estabrooks et al., 2003), less likely to engage in physical activity during leisure time (Brown et al., 2005) and are more dependent on public transportation (Mather, 2009). Evidence is accumulating that promoting mass transit use may be a promising strategy to increase physical activity levels (Lachapelle and Frank, 2009). However, low-income and minority communities, those most likely to need public transit and who may be more likely to benefit from its use from a physical activity standpoint often have poorest access to these resources. Thus, these environmental change approaches hold the promise of being particularly beneficial for socioeconomically marginalized groups. Therefore, we propose that efforts should be made to mandate the equitable distribution of public resources that will ultimately increase physical activity levels in the population.

The purpose of this article is to propose steps that may be necessary to bring about population-wide increases in physical activity

level and ultimately to reduce obesity-related disparities. California, the only “majority minority” state in the continental U.S. and a leader in health promotion, is host to a number of activist community-based organizations engaged in grassroots advocacy. Case studies of two such agencies, The City Project and Latino Health Access, are included to illustrate how these organizations have spearheaded efforts to mandate equitable access to public resources critical for reducing obesity-related disparities. Finally, we put forth principles of equitable development to guide others in their efforts to advocate for the health of their respective communities.

Steps in public health advocacy

First, there is a need to bring people together through coalition building and a shared vision based on diverse values. Grassroots engagement is a necessity, and may require the development of coalitions with broad agendas and working across multiple issues as has been noted by others (Tajik and Minkler, 2007). The composition and nature of the coalition that are likely to be successful will depend on the timeline for achieving the goal, characteristics of the affected community and the health topic of concern among other factors.

Second, sophisticated analytic approaches and broad frameworks are needed when conducting research to understand the relationship between obesity and its multiple environmental determinants including the implications of laws and public policies as well as the built environment (Sacks et al., 2009). Health Impact Assessments can

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be valuable tools in assessing both the intentional and unintentional effects of public policies and programs (Dannenberg et al., 2008). Community-based participatory research (CBPR) approaches should be used to ensure that results are meaningful to the community and provide the foundation for future advocacy efforts (Tajik and Minkler, 2007). CBPR methods can be used to systematically study the process of advocacy (e.g., assessing quality and nature of partnerships and coalitions) as well as the outcomes of advocacy efforts (e.g., improvements in perceived and objective health). Evaluation of health outcomes is particularly important in ensuring that programs and policies that improve health are sustained.

Third, strategic media campaigns can focus attention on the need for systemic change and increase your likelihood of success (Tajik and Minkler, 2007). Taking advantage of traditional media and new social media (including GIS mapping, blogs, flickr, YouTube, and podcasts) can lead to increased visibility and support for your cause.

Fourth, taking advantage of available policy and legal advocacy resources outside the courts may be effective in persuading public officials to take action. For example, the Robert Wood Johnson Foundation-funded National Policy and Legal Action Network (NPLAN) provides legal and policy analyses as a national resource to policymakers and advocacy groups seeking to change physical activity and nutrition environments to address childhood obesity.

Finally, access to justice through the courts is available as a last resort if all else fails in the context of an overall campaign (García and White, 2006). Lessons learned from tobacco litigation in the U.S. may have application to other areas, and indeed, many grassroots advocates “cut their teeth” on public health tobacco control efforts.

The following case studies illustrate efforts undertaken by The City Project and Latino Health Access to ensure equitable access to public resources relevant to physical activity in Southern California.

Case studies

The City Project

The City Project, located in Los Angeles, California, is a non-profit policy and legal problem solving organization whose work includes specific strategies to build healthy, livable communities for all, and principles for equitable development to achieve systemic change and real choice. In Los Angeles County, children of color and those living in poverty have the highest levels of obesity. These children also have the least access to parks, to schools with at least 5 acres of playing field, and to mass transit (García and White, 2006). Thus, the City Project has engaged in a number of initiatives that have laid the groundwork for reducing obesity disparities in the county and throughout California.

Creation of safe-space for physical activity

Activists and attorneys worked with the community through policy and legal advocacy to help create the forty-acre Rio de Los Angeles State Park on a former rail yard in one of the most park-starved communities in the region and stop a commercial project there. This is part of a broader campaign in what is now known as the Urban Park Movement to revitalize the 52-mile Los Angeles River (which was lined with concrete as flood control measure in the 1930s) with parks, schools, affordable housing, local green jobs, and multi-use green spaces that help clean the air and water and promote climate justice. The parks and school fields should provide places for physical activity to alleviate obesity and promote physical and mental health of the people (García and White, 2006).

Ensuring opportunities for PA during school for low-income and minority children

More than half of the public school districts in California do not enforce physical education requirements (California Center for Public

Health Advocacy, 2006). In response, The City Project is working with the United Teachers of Los Angeles (the teachers' union) and others to enforce the physical education laws in the Los Angeles Unified School District, the second largest in the nation with more than 700,000 students—91% are children of color and 74% are low income. The teachers' union launched a physical education campaign to build public support among teachers, parents, students and the public. The City Project filed an administrative (Williams) complaint under civil rights and education laws. The board of education passed a resolution to enforce the physical education and civil rights laws. Teachers, lawyers, and school officials are working together to draft a far-reaching plan to implement the resolution, enforce the law, and resolve the complaint. Each of these elements is based, in part, on evidence from studies investigating public school physical education inequities commissioned by The California Endowment (García and Fenwick, 2009).

Increasing access to public transportation

In 1994, lawyers and organizers working together filed a historic civil rights and environmental justice lawsuit against the Los Angeles County Metropolitan Transportation Agency (MTA) on the grounds that it operated separate and unequal bus and rail systems that discriminated against the working poor with little or no access to a car. MTA agreed to settle the case in 1996 and invested over \$2 billion to improve transit throughout the county and keep fares low over the next ten years (García and Rubin, 2004).

Latino Health Access

Latino Health Access (LHA) is a non-profit public health organization founded in 1993. It assists in improving the quality of life of underserved Latino residents in Orange County, California. The majority of the services (66%) are provided to residents of Santa Ana, one of the poorest and densest cities in the state. LHA was one of the early innovators in the development of the *Promotor* (Community Health Worker) model of community outreach and health education.

One of the focuses of LHA's work is creating an environmental change to support responsible personal and family food choices and physical activity participation. For example, as one of six Healthy Eating Active Communities sites in California, LHA engages the community, city officials, the Orange County Health Care Agency, and the Santa Ana Unified School District in discussions on wellness policies, often involving their youth *Promotores* in door-to-door outreach, hosting town hall meetings and forums, and testifying before school boards and city councils.

LHA has been focused, for the past six years, on addressing the inequity in park distribution in Santa Ana. They partnered with Trust for Public Land to conduct a feasibility study demonstrating that Santa Ana has roughly 1 acre of park land per 1120 residents compared with 7.9 acres per 1000 residents for other large California communities (Fig. 1). As shown in Fig. 1, the darkest areas on the map surrounding the 92701 zip code represent the highest park poor area in Santa Ana with only 0.5 acres of land per 1000 residents (Trust for Public Land, 2005).

They organized residents to identify a vacant lot central to the 92701 zip code. The identified parcels had three owners, the city, a community redevelopment agency and a private market. Advocacy efforts included: (1) prominent media engagement—an exposé feature article in *La Opinión*, a leading Spanish-speaking newspaper; (2) collecting and disseminating local surveillance data, where the overweight rate was 85% among children and youth living in a large condominium complex adjacent to the park construction site; and (3) leveraging resources—space for health promotion activities at the condominium complex home to an estimated 1000 residents. The market donated and transferred the ownership of their parcel to LHA at no cost. LHA negotiated a 40-year leasing agreement with the city

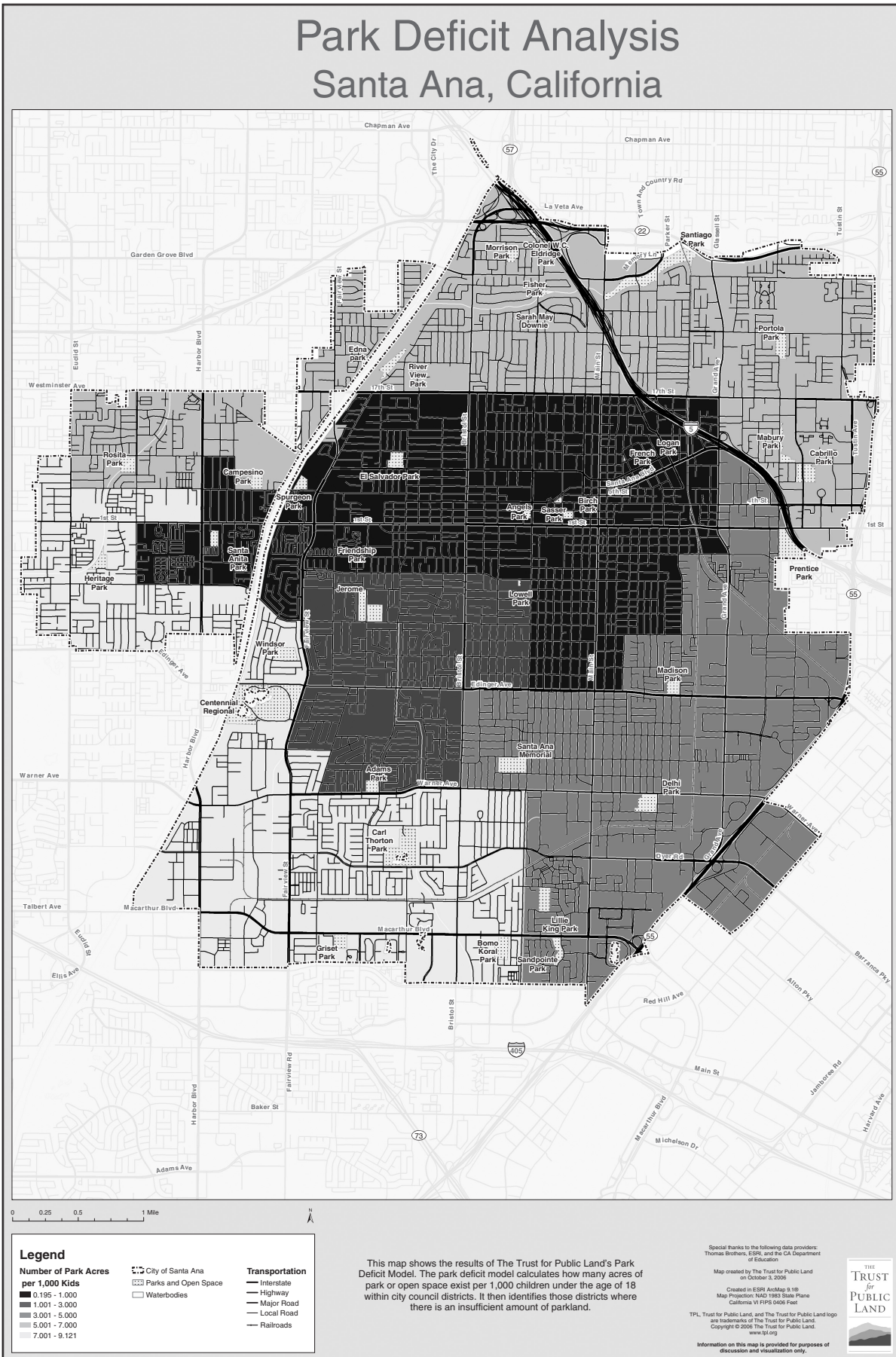


Fig. 1. Park deficit analysis.

for the remaining parcels at a cost of \$2 per year, for a combined open space of 0.5 acres. In conjunction with a local hospital, LHA secured the pro bono services of two Southern California-based firms to build a safe, environmentally conscious and LEED-certified community center and park. The park will feature a basketball half-court, toddler playground, adolescent jungle gym, and walking path. Security features include wrought iron gates surrounding the park area, safety night lighting, and rest points for elderly users. These features and amenities were included to increase physical activity opportunities for children and their families, and promote community mobilization for a healthy community.

Discussion

These case studies illustrate how advocacy efforts have resulted in increased access to public resources related to physical activity in several Southern California communities. Given the current inequities in access to public resources in poor and ethnic minority communities, continued advocacy efforts are vital.

With regard to the development and use of public lands, we have proposed ten principles to guide policy makers, which we summarize here (See full text of principles in García and White, 2006). The process of decision-making regarding investment of public monies in the built environment need to be transparent and fair and guided by a comprehensive vision for promoting the health of the entire community. Policy-makers should prioritize projects that can meet multiple community needs as well as promote community health such as establishing public parks within the campuses of new and remodeled schools that can provide safe-space for physical activity and potentially remove pollutants from the water and mitigate runoff. Resources should first be allocated to low-income and ethnic minority communities in order to overcome the legacy of inequities in access to high quality public parks and schools. Standards for measuring equity must be established for agencies in order to track progress in building healthy and livable communities for all. Increased attention should be paid to ensuring that recipients of public funds comply with federal and state laws designed to achieve equal access to all public resources including Title VI of the Civil Rights Act of 1964 (i.e., prohibits discrimination on basis of race, color, or national origin for programs and activities conducted with federal funding) and parallel state laws. Finally, the community needs to be engaged and empowered to take part in all aspects of infrastructure decision-making and prepared to engage in advocacy efforts if the outcome of the decision-making process is not satisfactory.

Given the agenda of the new federal administration and availability of stimulus funds, many transportation infrastructure projects are underway. These projects must focus attention on ensuring that the low-income and ethnic minority communities benefit at least equally, and efforts should be made to redress past inequities. The subgroups most likely to benefit from increased access are low-income men and women living in resource-poor communities. They have likely devoted their scarce resources to car ownership given the significant obstacles faced in accessing reliable public transport. Individuals in these same communities likely have little leisure time to spend in physical activity and reduced access to recreational facilities, parks or walking trails.

Existing educational laws (i.e., “No Child Left Behind” and similar state laws) developed to primarily improve standard academic metrics should be amended to mandate the inclusion of physical education in federal monitoring and accountability. These efforts are likely to have the most benefit for low-income and ethnic minority populations for whom the childhood obesity epidemic is most severe and opportunities for physical activity outside of school are limited. Integration of physical activity into the school day is a prime example

of a “push” strategy designed to make the healthy choice easier and unhealthy choice (i.e., remaining inactive) more difficult. Such strategies rely less on individual motivation and choice and thus may be more successful in engaging populations who typically do not participate in physical activity and who may be more likely to benefit (Yancey et al., 2007).

Realization of the severity of the obesity and chronic disease epidemics and failure of individually focused interventions has led to heightened interest in implementing environmental interventions to increase physical activity. Although promising, the impact of these strategies in ultimately reducing the obesity epidemic will be limited by the presence of continued inequities in the distribution of physical activity-related resources in the community. Advocacy efforts are critically needed to ensure that all communities benefit equally from infrastructure projects designed to build healthy communities, effective public schools and safe and reliable transportation. Without continued advocacy efforts, the environmental strategies being implemented to increase physical activity levels in the population will lead to a widening versus narrowing of the gap between the health status of the wealthy and poor in this country.

Conflict of interest statement

The authors declare that there are no conflicts of interest.

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