



Pathways to Wellness in the World Around Us

“Conditions in the environments in which people are born, live, learn, work, play, worship, and age affect a wide range of health outcomes.”
 -Healthy People 2020

Historically, when talking about health, the focus has been on a single chronic disease, lifestyle factor such as nutrition or physical activity, and/or one’s personal responsibility for health. However, many other factors influence health. Research shows that individual choices determine a person’s health but so do the individual’s surroundings. The rainbow model in Figure 1 shows the relationship between people and their environment and health. This model demonstrates how important it is to understand a wider range of social, environmental, and societal factors that affect health and well-being and highlights the importance of moving beyond a focus on personal behavior.

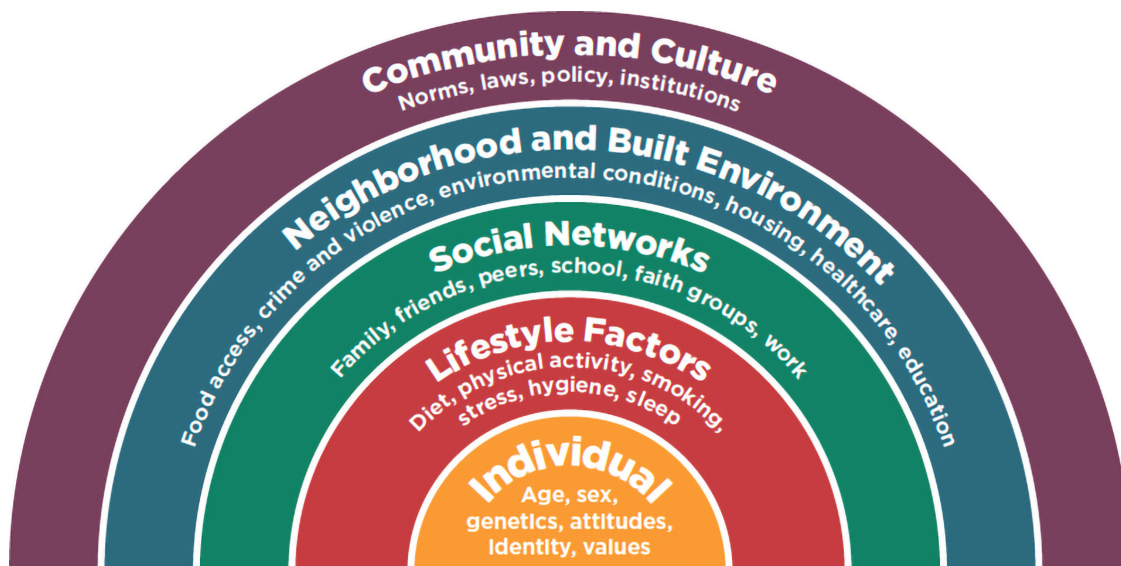
The conditions in which people live, learn, work, and play can positively or negatively influence overall health and life quality. The social, cultural, and environmental settings in which people live influence their choices. These conditions are called social determinants of health. The social determinants of health include factors such as access to food or quality education, income, safe and affordable housing, generational influences, local emergency and health services, safe neighborhoods, the built environment, and the overarching social and political influences on these factors.

Health Starts in Our Communities

The “built environment” of a community includes all buildings and physical spaces created or modified by people. Physical settings influence health both directly and indirectly. The types of resources to which people have access—such as health care or safe drinking water—directly influence health. Similarly, resources and services—such as the walkability of a community or availability of public transportation—can indirectly influence health behaviors. The design of and the ways in which developed land is used has a large impact on health behaviors and outcomes. For example, if a community has no sidewalks or bicycle or walking paths, it could be harder for people to be safely active.

Local leaders form local policies that affect a community’s built environment. These leaders include city planners, employers, school districts, public service agencies, and community organizations. Their decisions shape systems, services, and resources for education, health care, housing, employment, public safety, transportation, and more. Ultimately, these decisions affect health equity, meaning whether all people have a fair and just opportunity to be healthy. Due

Figure 1. Placing the influence of neighborhoods and the built environment within the multiple levels of influence on health and wellness.



Adapted from Dahlgren and Whitehead, 1991

to social, economic, political, and environmental factors, not everyone has the same opportunity to be as healthy as possible. The unequal distribution of power and resources among social groups based on race, class, gender, sexual orientation, or other identities cause adverse conditions that lead to poorer health outcomes.

Building healthier communities does not guarantee healthier people, but creating equitable communities can make healthier lifestyles easier and more accessible for all people. To build a healthy community, Healthy People 2030 identified four key areas of the neighborhood and built environment to address:

- Access to nutritious foods
- Crime and violence
- Environmental conditions
- Quality of housing

Access to Nutritious Foods

Access to nutritious foods, such as a variety of vegetables, fruits, whole grains, lean meats, and low-fat dairy, allow people to have healthier eating patterns. Healthier eating patterns lower the risk for chronic health conditions, such as obesity, high blood pressure, heart disease, stroke, diabetes, cancer, and brain deficits. However, some people do not have access to healthy foods. Access to healthy foods can be affected by the location of food stores, transportation to food stores, what is available within food stores as well as the cost of food. The cost of purchasing and maintaining a vehicle is expensive. When combined with stagnant wages and wealth inequality, many people may not be able to afford their own transportation and need to rely on public transportation. However, some communities have not invested in reliable public transportation. Additionally, policies and attitudes discourage food stores from operating in certain neighborhoods. This and broader discrimination of communities of color and rural areas limit economic opportunities in communities, further limiting the types of food stores that are available, what is available, and what can be purchased affordably.

Crime and Violence

Community crime and violence directly affect a person's health choices. For example, people who do not feel safe in their neighborhoods get less physical activity, which can be linked with higher rates of obesity in a community. Exposure to crime and violence can happen in many ways. People can be a direct victim, see violence, or hear about crime and violence from neighbors. Like other structural problems in society, crime rates vary by neighborhood. Crime rates are higher in areas where people are unable to meet basic needs due to redlining of neighborhoods, increased police presence, low wages, and reliance of childhood education quality on property taxes. These established systemic social inequi-

ties have put many racial- and ethnic-minoritized groups as well as low-income families at an increased risk of short- and long-term health effects from exposure to crime and violence. Reforming or abolishing oppressive systems and policies and environments that initiate crime and violence can ensure people's basic needs are met, improve ability to heal trauma, and prevent or reduce crime and violence.

Environmental Conditions

The environmental conditions of a person's home, neighborhood, and community contribute to their health. Three specific environmental conditions—polluted air, extreme heat, and contaminated water—negatively influence health.

Ongoing contact to outdoor and indoor air pollutants has the potential to harm health. Pollutants come from cigarette smoke, gas fumes, mold spores, household chemicals, wildfires, deforestation, car or truck exhaust, factories, dust and dirt, dirty air conditioner filters, pollution from factories, and more. Pollutants can increase the risk of cardiovascular disease, lung cancer, and even death. In addition to air pollution, air temperature affects health. As temperatures rise, there are increased reports of older adults, children, and racial- and ethnic-minoritized groups falling prey to heat-related disease and death. Finally, if a community has poor water quality, that puts everyone in that area at risk. In some cases, groundwater sources used for drinking water and crop irrigation could be contaminated. For example, rural communities often rely on private well water. Well water may have high levels of nitrates, which are connected to certain forms of cancer.

Location, exposure to racism, and socioeconomic status strongly affect a person's and a community's environmental exposures. Policy and system decisions leave people with limited options and resources to live in areas with less pollution or afford air conditioning. These exposures lead to health disparities, which means preventable differences in health risk or outcomes based on social group status.

Housing Quality

Health is also connected to the home environment. The quality of how and where people live explain in part why some people are healthier than others. Housing quality refers to the physical condition of a person's home as well as the social and physical environment in which the home is located. Access to high quality and affordable housing is a social determinant of health. Poor quality housing is linked to many negative health outcomes, including chronic disease, injury, and poor mental health. For example, plumbing issues may cause water leaks that lead to mold and other allergens that trigger respiratory issues, such as asthma. In some communities, a lack of quality housing options makes it hard to attract and keep a skilled workforce. Healthy housing is critical for all communities. Improving housing quality is one way to reduce harmful surroundings and improve overall health and well-being.

Changes that Support Healthier Built Environments

The built environment of the neighborhoods and communities we live in strongly affects health and well-being. The Health Impact Pyramid (Figure 2) shows ways that people and communities can successfully tackle social determinants of health. For many years, health programs have focused on individual behavior. Examples of individual-focused interventions include health education programs, counseling, and medical care. These types of interventions are at the top of the Health Impact Pyramid. Even though these interventions can be effective, small numbers of people have access to them and programs often assume if you teach people health, they will be healthy. But we now know achieving optimal health depends on addressing root causes of health issues. At the base of the pyramid are the types of interventions that have the greatest potential for impact on health because they reach entire groups of people. Instead of focusing on one person, these actions address social and economic structures of a community that will have the greatest population impact. These types of interventions are known as policy, systems, and environmental (PSE) change. They aim to address the root causes of the conditions that people are living, learning, and aging in.

Making PSE changes modifies the built environment to make healthy choices easier and more accessible to all community members. Changing laws and shaping the built environment can encourage, create, and enable healthy lifestyle choices. PSE change strategies have the potential to create positive changes in neighborhood and community settings as a whole. Policy, systems, and environmental change are best used in combination with one another. Communities can promote health equity by clearly identifying needs of a neighborhood, community, or system and then customizing support to address those needs by fixing the policies and systems that are the root cause of unequal conditions or supports.

Policy change is a tool for achieving both personal health goals and disease prevention goals in a community. Policies can be “big,” such as laws and regulations for cities or states. Policies can also be “small,” such as protocols or practices where people work, learn, or worship. An example of a policy change at an office or place of worship is a water policy. Such a policy would say water will be served at all events or meetings where beverages are served, and pitchers of water will be available for refills. These

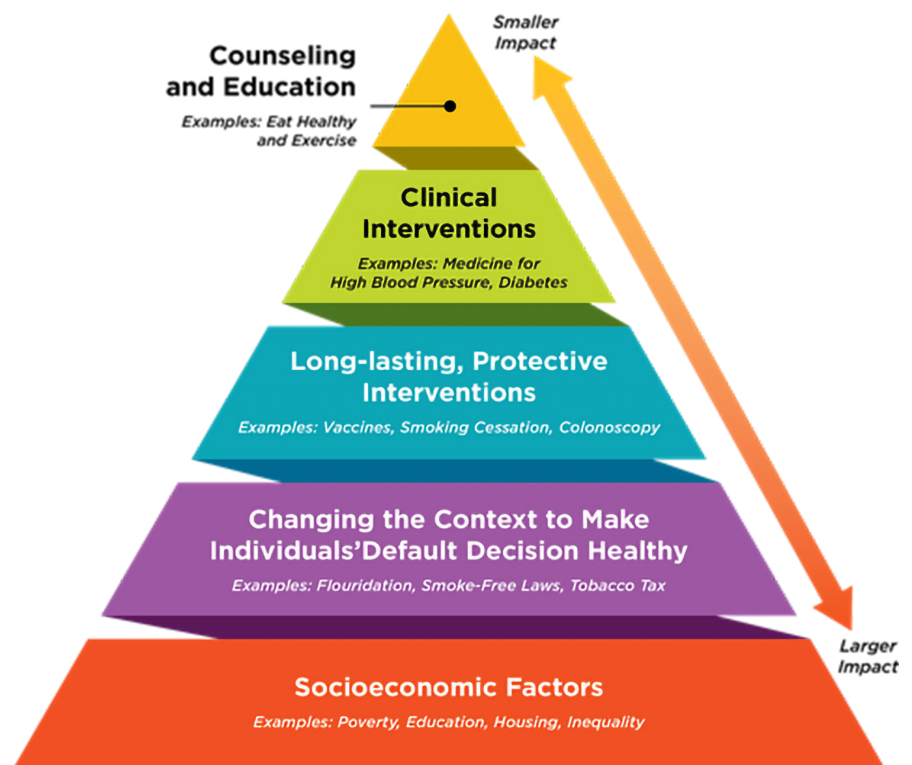
policy changes can bring about environmental changes. On an even smaller level, family rules about things such as screen time or what is served at family meals could be examples of policies. Other examples of health promotion and disease prevention policies include the following:

- Smoke-free zones at public events
- Healthy food options in vending machines in public places
- Fruits and vegetables served first at gatherings
- A tax on unhealthy food options
- Requiring the use of safety equipment in a work setting to prevent injury
- Adding a movement break to meetings lasting more than an hour

Systems change involves transforming the processes within an organization, institution, or a community to shift the culture to ensure healthier practices. This can affect many people, such as an entire school system or health-care system. System change and policy change often work together. System change can also expose historical power relationships and shift power to the collective people rather than a small group. Examples may include:

- Understanding the needs of neighborhoods, communities, and systems
- Changing social norms
- Normalizing smoke-free buildings
- Adapting creative, locally generated, and co-owned solutions to the specific community culture and location

Figure 2. Health Impact Pyramid.



Source: Frieden, 2010

- Collaboration and clear communication between different systems

Environmental change strategies involve changing the economic, social, or physical surroundings of a community that affect health outcomes. Environmental strategies address population health outcomes. They are best used in combination with policy and systems change. Examples of environmental strategies for health promotion and disease prevention include:

- Increasing the number of parks, greenways, and trails in the community
- Putting fruits and vegetables first at food gatherings
- Installing signs that promote use of walking and biking paths
- Adding bike racks to community buildings
- Increasing the availability of fresh, healthy foods in schools, restaurants, and cafeterias
- Building infrastructure, such as wider paved shoulders along rural road and pedestrian crossings

Conclusion

By working to change policies, systems, and environments in ways that positively affect a person's behavior, communities can improve the health of everyone in sustainable ways. Improving the conditions in which we are born, live, learn, work, play, worship, and age will create a healthier population, society, and workforce.

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