HEALTHY COMMUNITIES TASK FORCE

DELAWARE VALLEY dvrpc REGIONAL PLANNING COMMISSION

# Meeting Summary

## Welcome

Patty Elkis, Director of Planning at the Delaware Valley Regional Planning Commission, welcomed meeting participants.

Elkis reminded participants that materials from past meetings are available on the Healthy Communities Task Force webpage (http://www.dvrpc.org/Committees/HCTF/).

Elkis thanked DVRPC staff and co-chairs of the Healthy Communities Task Force, Montgomery County Commissioner Valarie Arkoosh, MD, MPH and Christina Miller, MSS, Executive Director of the Health Promotion Council, an affiliate of the Public Health Management Corporation.

Christina Miller introduced the speakers below.

## Presentations and Q&A

**Case Study: Climate Change and Public Health Planning in Maryland**

Dr. Clifford S. Mitchell, Director of the Environmental Health Bureau at the Maryland Department of Health and Mental Hygiene presented on Maryland's efforts to prepare for the health impacts of climate change. Dr. Mitchell noted that when Maryland began discussions about climate change adaptation, public health was an afterthought. He stated that public health has become part of the conversation only in the last five to seven years. However, public health is one of the top reasons why people care about climate change, according to surveys.

Dr. Mitchell noted that Maryland uses the CDC's Building Resilience Against Climate Effects (BRACE) framework in its climate change adaptation planning. The Department uses health data and climate forecast models to estimate health impacts in specific areas in the future. The dose-response curve determines the likely impact of climate change on a population. The Department also works to identify vulnerable populations. Their process for identifying vulnerable populations is very data-driven. Finally, the Department takes steps to reduce or eliminate hazards.

Maryland started a Climate Commission in 2007, followed by a Climate Action Plan in 2008. In 2016, they signed a 5-year cooperative agreement with the CDC on climate change. Today they have a Maryland Climate Change Community Adaptation and Response Working Group. They have found that climate change adaptation is all about communicating with people. Dr. Mitchell concluded by noting that the federal government's commitment to climate change adaptation might change, but Maryland's commitment won't.

**Climate Change and Public Health**

Kevin McNally, President of the New Jersey Public Health Association discussed the work that New Jersey has undertaken to understand and address the effects of climate change on health. McNally noted that New Jersey will experience more warm extremes and more coastal flooding as a result of

climate change. The NJ Climate Change Adaptation Alliance, formed in 2011 and predating Hurricane Sandy, is a diverse group made up of policymakers, the private sectors, and non-governmental organizations. Their work to date includes sector specific reports (e.g., agricultural, environmental justice, coastal communities, public health, transportation, emergency management, the environment, natural resources, and utilities), stakeholder engagement, focus groups, and expert interviews. Tools include www.njadapt.org and NJ Floodmapper, as well as videos and online storymaps. They released a major report on Sea Level Rise. They also hosted a conference on climate change and public health in the summer of 2016. A draft copy of their report on climate change and public health is available online.

**Climate Change and Health in Philadelphia: Preparing for a Hotter, Wetter Future**
Jessica Caum, Assistant Program Manager with the Philadelphia Department of Public Health's (PDPH) Division of Public Health Preparedness, discussed the city's efforts to identify the health impacts of future climate projections, identify vulnerable populations, and develop recommendations and actions to mitigate future climate-related health impacts.

Philadelphia began their work on health and climate change as a result that the Public Health Preparedness Program at PDPH received from the Public Health Institute to develop outreach materials about climate change and asthma. As they developed their asthma-specific program, they learned more about the effects of climate factors on other chronic conditions and vector-borne diseases. They were also exposed to related climate change work that other local health departments had undertaken.

This led PDPH to begin developing a Climate Change and Health Adaptation Plan using the CDC's BRACE framework (although they are not BRACE funded). As part of their planning process, PDPH created an Advisory Group with over fifty members that meets quarterly. PDPH drew on the climate projections that the Mayor's Office of Sustainability developed for their report, *Growing Stronger: Toward a Climate-Ready Philadelphia*. The report estimates that Philadelphia will be hotter and wetter in the future. More specifically, Philadelphians can expect to see more days of extreme heat, more consecutive "extremely hot" days, increased precipitation, and more extreme weather events (e.g., hurricanes). PDPH estimates that these climate events may have a number of health impacts including dehydration and heat stroke, respiratory disease exacerbations (e.g., COPD, asthma, bronchitis), and vector- and water-borne diseases (e.g., West Nile Virus and Zika). In addition to identifying potential health impacts, PDPH also identified potential populations with an increased risk for poor health outcomes including, seniors, children, persons below the poverty level, individuals with chronic health conditions, and individuals that speak a language other than English at home.

Once they have completed their initial analysis around climate change projections, health impacts, and vulnerable populations, PDPH will develop a number of adaptation strategies to build resilience and minimize the adverse impacts of climate change. Most of the strategies will be actions that PDPH can implement however some will be actions that individuals can take, while other may be policy recommendations.

Ms. Caum also presented on PDPH's work with Extreme Heat Planning. PDPH is currently working with the Philadelphia Office of Emergency Management to update its Citywide Excessive Heat Plan for 2017. This update will include an emphasis on outreach to vulnerable populations, both before and during excessive heat events. Additionally, the plan will include both short and longer term strategies for extreme heat adaption, including community outreach and education in the short term, and implementing heat island cooling strategies like constructing green roofs and planting trees in the longer term.

**Selected Questions and Answers:**
Q: How do you engage people around climate change?
A: Jessica Caum health is a great way to engage people around climate change issues because it is relatable. It can be helpful to talk to people about the health conditions that they already have and discuss how weather can impact their health.

Kevin McNally noted that it can be hard to talk to some local health departments about climate change because they often have short planning windows of one to five years. However if you talk about health impacts you can often get around to adaptation strategies without ever mentioning climate change. Additionally, McNally mentioned that it can be easier to engage New Jersey residents around flooding and sea level rise since many of them have recent, direct experience as a result of Hurricane Sandy.

Q: How do you engage the community?
A: Jessica Caum noted that PDPH generally works with service provider agencies to represent vulnerable populations in their climate adaptation planning process.
Dr. Clifford Mitchel recommended that people ask "what is important to you?" when approaching communities about climate change. In doing so, you may find a nugget of an adaptation strategy.
Kevin McNally noted that local health departments have to participate in the county community health needs assessment. This process could be an opportunity for the community to get engaged.

Q: Where are cooling centers located?
A: Jessica Caum noted that most of Philadelphia's cooling centers are free libraries. Free libraries work as cooling centers because they have working AC as well as staff that can open them. Pools, recreation centers, and spray grounds also serve as cooling centers; however these locations are not appropriate for everyone. PDPH and OEM are working on identifying improvements and programming to make the cooling centers more enticing.

Q: Is there funding available through health-related streams for built environment projects?
A: Speakers mentioned that Medicaid is currently looking into funding health-related built environment projects; however there are currently a lot of unknowns around federal funding.
Other attendees mentioned that the utility companies had been enthusiastic partners in their working groups. Energy companies are looking for ways to reduce their costs and saving energy is cheaper than generating it. This attendee encouraged the group to work with energy companies to make them aware of some of the co- benefits of built environment improvements like green roofs and street trees.
Q: Have any of the panelists or attendees looked into the dangers of improperly built and/or managed stormwater infrastructure (e.g., rats, allergies, mosquitoes that may accumulate around standing water)?
A: Jessica Caum mentioned that PDPH is talking to PHS about the different types of trees available through their TreePhilly program and as street trees. They are having conversations about selecting non-allergy- and non-pollen-producing trees.

## Be Active Break

Facilitated by Megan Valeski, *West Chester University*

## Facilitated Discussion

*What can your community do to protect public health in a changing climate?*

Moderated by Shawn Megill Legendre, AICP, *Senior Research Analyst, DVRPC*

The next HCTF meeting is scheduled for June 6, 2017 at DVRPC. The topic is to be determined.