

## ENCHIA Mid-term Stakeholder Evaluation

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This document reports findings from a series of interviews with ENCHIA participants about what is working with the Health Impact Assessment process and what might be improved. Interviews were conducted by phone between April 6 and April 19, 2005. Since only 19 people were interviewed, representing less than half the regular participants in the process, these findings may reflect a limited view of the process.

### I. Methods

An email explaining the purpose of the interview and five interview questions was sent to all ENCHIA participants, asking each to respond with a day and time where they could spend 15 minutes completing an interview. The interview questions included: (1) What would be your optimal land use, zoning and/or public health changes for the Eastern Neighborhoods? (2) How, if at all, has the HIA process influenced the work of your organization? (3) How, if at all, has the HIA process influenced relationships you have with other stakeholder groups, the SFDPH, and/or other city agencies? (4) What aspects of the HIA process could be improved and can you offer specific recommendations for improving the process? (5) How, if at all, do you think the findings/outcomes from this process will influence the rezoning proposals and neighborhood planning more generally?

Only 11 participants responded to my email request. I followed-up the email with telephone calls to 15 participants that did not respond to the email in an attempt to schedule an interview. Due to the birth of my daughter, I was not able to follow-up with additional participants.

### II. Findings

I have divided the interview findings into two categories: *what is working* and *what can be improved*. Many interviewees talked openly about the process and did not need to be prompted with questions. Only a few need prodding. As you will see, some of the same issues came up as both a positive and negative aspect of the process.

The comments are listed in descending order; in other words, the comments heard most frequently are listed first and those that were raised only a few times or once come later. Under each comment, I have tried to capture what interviewees said verbatim, pulling direct quotes from my notes.

#### A. WHAT IS WORKING

##### **Process impact**

“The process is original and innovative.” “I’ve been in community planning processes before, but not one that involved thinking about health in this broad a way.” “The process is very interesting and I’m learning a lot.” “The process has helped me articulate the health angle to land use issues.” “If you asked me five years ago what is need for a

healthy neighborhood, I would have said safe streets, after-school programs, maybe air pollution, but this process has made me aware that *the* key issue is housing.” “The process has sharpened my understanding of how gentrification works and its cascading effects on low-income groups.”

### **Process Management**

“The staff at the DPH are responsive to participant concerns/questions.” “The DPH staff are knowledgeable, hard working and know their stuff.” “The meetings are well organized and they never seem to waste any time.” “The meetings have a good balance of information sharing and discussion.” “The DPH has made a good effort to access data that has never been brought together before or sits in some agency without much public review.” “The representation of different groups is good and the process is not unbalanced in one direction or the other.” “It takes great courage to take on something like this in any government agency, and I commend them immensely.” “With such a large group, they are managing the process surprisingly very well.” “I’m not sure where this process is going, but I trust in it because I trust the people running it.”

### **Impact on other work/relationships**

“I’ve met people and organizations in this process that I knew existed but just never worked with.” “My network has increased through coming to this process.” “I see a lot of these same people at other meetings, but now I’m more likely to go talk with them or try and work with them now that I know them better.” “My relationships with the DPH have improved through this process. I trust them more and want to work with them now.” “The relationship with the DPH we have built through this process has helped us deal with other city agencies because we can call on them [DPH] for help when we need it.”

### **Impact on EIS/rezoning**

“The DPH is using this process to organize groups against unfettered developed, through the guise of public health.” “This process is bigger than just the rezoning. It is giving data and information for other processes, whether they realize this or not.” “The DPH has opened up the workings of the development process to a lot of people and groups that didn’t know the details before, and these groups will take what they learn from this and the data released, and organize to change things long-term.” “This is a good forum for me because, as a public agency representative, it is good to see community groups raise issues that I would like to but can’t.”

## **B. WHAT NEEDS IMPROVEMENT**

### **Process management**

“Amorphous process. Not sure where we are going month-to-month and what the end-product will be.” “Focused too much on process and not enough on product.” “It still isn’t clear to me what consensus means.” “I’m not sure how this process will impact the EIA, which is already hijacked by city planning and private developers.”

### **Recommendations:**

- Be more clear about final product
- More analysis of data and generating recommendations, and less talking about doing it.
- Clarify what consensus recommendations will look like and whether we can have a weighted-voting system based on group size
- Focus more on needs of Eastern neighborhoods, not general neighborhood health

### **Relationship of ENCHIA to other work**

“The process has had benefits to me personally, but I haven’t really found ways to bring these insights back into my organization or my other work.” “We have not developed a strategy to inform the communities, residents I mean, of what we are doing. Not clear whose job this is.” “We are dealing with and organizing to address state-wide issues that will have an impact on the same issues we are talking about in the HIA, but there doesn’t seem to be an awareness of regional, state and national issues that are impacting our work.” “Not all organizations participating in this are in the same place. Some are paid to be there, others not. The capacity of groups to work on this and bring it back to their organization differs.”

### **Recommendations:**

- Have groups present what they are doing outside ENCHIA to group
- Review and discuss how state legislation/changes, especially to CEQR, will impact the ideas coming from the HIA
- Invite groups from other cities that have been through similar processes to discuss what they did to make the process work for them
- DPH provide assistance to groups to help them bring HIA work into organization

### **Content/Issues**

“The process has not taken air quality seriously enough in these neighborhoods where the asthma rates are alarmingly high.” “The process has barely scratched the real issue here, which is racism and class. Unless we can talk about this publicly and acknowledge the historic racism and current disregard of class issues from planning/development decisions, this process will look like too many others that meant well but didn’t change anything.” “We need to be real about who gets impacted and who benefits, not in the abstract but in real life.” “The group has too many community-based groups and is unbalanced in representing other interests. There are not enough private interests, small business owners, contractors, etc., as part of the group.” “We have not dealt with unemployment, job training and the mentally ill. This is a big issue in these neighborhoods.” “The process is misleading because planning is not progressive; it is funded by private developers and is at their mercy. We need to trace the money trail of real estate development projects as closely as the health impacts.”

### **Recommendations**

- The DPH should initiate a discussion about how racism and economic discrimination impacts development and planning decisions
- Get more EJ and social justice groups at the table

- Invite residents not affiliated with any groups into process
- Discuss how planning projects/EIA reviews are funded and how real-estate development happens
- Develop a way to track progress on our “healthy neighborhoods” after this is over and the rezoning happens.

### **Impact on rezoning/planning generally**

“Unless we can get the planning director and mayor’s office to endorse this process, it will likely be ignored no matter how good our recommendations are.” “People are not going to read a book of recommendations and it seems we will come-up with so many things it will need a book. How will we generate something people will read and take seriously?” “The recommendations need to have good pictures or people won’t read it.” “We need to discuss how to ensure community-owned and serving business are developed and preserved. This is what has made these neighborhoods so supportive for local folks and interesting to outsiders.”

### **Recommendations**

- Get political power behind the process before its over
- Organize community support for the HIA process
- Need to be more focused on specific needs of the Eastern neighborhoods
- Respond directly to EIR findings, methods, or recommendations
- Develop a creative way to release findings, not just a report
- Discuss how HIA process might go beyond EIR process and become institutionalized process itself for planning decisions
- Develop recommendations to reform EIR process