Collaborating for Health

Case Study of the Community, Agency,
Developer Partnership That Created Oakland’s Healthy Development Guidelines 2018

(EOBHC) recognizes the following partners: Communities for Better Environment, East Bay Housing Organizations, HOPE Collaborative, Alameda County Public Health Department Plan Matters, City of Oakland Planning and Building Department. We also acknowledge the original co-authors Sharon Cornu and Constance Slider Pierre of Just Power Consulting. This report was updated in August 2018 by Nehanda Imara of EOBHC. Thank Opportunity Partners for technical assistance; and the residents, staff, and local leadership who worked for four years to create an innovative model of collaboration and engagement.

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Credits East Oakland Building Healthy Communities
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COLLABORATING FOR HEALTH

Executive Summary

The non-traditional collaboration between East Oakland Building Healthy Communities, Communities for a Better Environment, East Bay Housing Organizations and HOPE Collaborative, the City Planning and Building Department, Public Health Department enabled a process that engaged residents, particularly low-income residents of color, early on in the planning process and improved mutual respect, trust and the capacity to collaborate to develop the Healthy Development Guidelines. The process emphasized shared learning and
education—of residents, community-based organizations, developers, public health staff and City planners—on the different priorities and perspectives about land use and development in Oakland. The opportunity to learn from the differing points of view helped all sides to understand each other’s challenges and needs. The Healthy Development Guidelines was a five-year process to engage residents Oakland-wide and from East Oakland, California, community-based organizations, non-profit organizations, City Planning staff, developers and Public Health staff to create recommended policies and guidelines for land use planning and decision-making that promote health equity. East Oakland residents are impacted by legacies of community organizing, environmental injustice, and public disinvestment.

The development of the Healthy Development Guidelines opens a new door for collaboration in Oakland, one that produces a richer product that honors the health and valuable input of community. For the City of Oakland, the process has just begun. It will be necessary that agencies prioritize community engagement and create more opportunities for collaborative work throughout the planning and development processes. Work flow and time will need to be managed to fully and authentically engage stakeholders in the future.

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About Building Communities East Healthy Oakland

Building Healthy Communities is a 10-year, $1 billion program of The California Endowment. Fourteen communities across the state are working to create places where children are healthy, safe, and ready to learn. Building Healthy Communities is focused on prevention and strategies aimed at changing community institutions, policies, and systems. In Building Healthy Communities, a focus on systems change requires work across sectors with multiple stakeholders. Through this cross-sector collaboration, with youth and resident engagement, sites seek to improve environmental conditions, neighborhood safety, access to healthy foods, education, housing, and employment opportunities.

East Oakland Building Healthy Communities seeks to mobilize these change agents to address four current prioritized community outcomes:

- Families have improved access to a health home that supports healthy behaviors;
- Residents live in communities with health-promoting land-use, transportation, and community development;
- Children and their families are safe from violence.
in their homes and neighborhoods; and
  Community health improvements are linked to
economic development.2

**Purpose and Methods**

This case study was commissioned by The California Endowment to serve as a best practices
guideline for residents, community-based organizations, and government agencies across
California on how to better develop a set of Healthy Development Guidelines and how to
develop a new collaborative framework to engage residents in planning processes that support
the creation of equitable and healthy communities for all. Quotations in this case study are from
persons interviewed specifically for the study, and are identified only by the stakeholder group
they represent (e.g., resident, community-based organization, technical advisory group, and
government agency staff).

**Introduction**

The Healthy Development Guidelines are a proposed set of policies and planning guidelines that
would require new development projects in Oakland to consider health equity impacts on
residents and community engagement in the City of Oakland’s planning process. The topics it
covers include Community, Culture and Safety, Economic Opportunity, Environmental Health,
Healthy Food, Housing and Anti-Displacement, Recreation and Active Design and
Transportation Access. The collaborative process design opens up opportunity for deep
community engagement in land use planning and decision-making.

The primary purposes of the Guidelines are:

✓ To build capacity of city planning to incorporate
  an upstream public health lens into the planning and development process;
✓ To build an innovative partnership;
✓ To model a process of community inclusion in
  planning process;
✓ To create policy and guidelines to support healthy
  and equitable development for new development.

**COLLABORATING FOR HEALTH**

For this case study, Just Power Consulting provided
information gathering and summaries, including reviewed notes and meeting materials, and
conducted independent interviews of stakeholders, including Oakland residents,
community-based organization staff, and government agency staff to identify key successes,
challenges, and lessons learned. The Consultants also reviewed a partnership evaluation
conducted in 2015 part-way through the process, examining what had been learned in the project partnership, what challenges arose and how they were addressed.3

Context: Factors Supporting Success

Oakland, and East Oakland in particular, has a deep and accomplished history of community organizing, including work by the Black Panther Party to address neighborhood needs. The success of the partnership is due in large part to this history of civic engagement and advocacy in Oakland by community members to address needs of affordable housing and tenant rights, equitable access to food and transit, worker rights, and environmental and economic justice. Another key component of its success is the investment by the California Endowment in East Oakland Building Healthy Communities to provide resources and staffing infrastructure to support bringing together community-based organizations around shared goals. Also, Alameda County Public Health Department’s commitment to addressing placed-based health inequities and social justice through the Place Matters Initiative brought more capacity that helped with the success of the process.

How It Got Started

The Alameda County Public Health Department (ACPHD) and HOPE Collaborative had a long-term goal to get a Health Element for Oakland’s General Plan to ensure health equity was considered in land use planning decision-making. Efforts to engage and partner with the City of Oakland Planning and Building Department led to the City Council approving dedicated staff time to apply for funding for a Health Element in 2010. In 2012, the community galvanized around the need for a health-equity lens on new development in Oakland after an industrial-sized crematorium, known to emit pollutants such as dioxin and mercury, was approved in East Oakland by the City of Oakland without community engagement or environmental review. Residents and community-based organizations led by Communities for a Better Environment (CBE) mobilized, filed petitions, and subsequently filed a lawsuit to have the permit revoked, but was unsuccessful. The crematorium campaign highlighted the need to have planning and development processes that take into consideration the health impact of affected communities, particularly communities that already have high health burdens, before decisions are made. It also underscored the detriment when community residents are not engaged in decisions that affect the health of their communities.

ACPHD, HOPE Collaborative, EOBHC and partners used this as an opportunity to get the City Planning Department to commit to working together on developing the Healthy Development Guidelines. The group could not find sufficient funding for a Health Element, so the Healthy Development Guidelines concept was developed as an interim step.

Project Design
partners to create the Healthy Development Guidelines included East Oakland Building Healthy Communities, Causa Justa: Just Cause, Communities for a Better Environment, East Bay Housing Organizations, HOPE Collaborative, Alameda County Public Health Department Place Matters, City of Oakland Planning and Building Department. These groups comprised the Project Management Team who would oversee the work and keep it on track. Each organization that is on the Project Management Team has specific technical expertise to contribute. As a resident led project, the Project Management Team put residents needs and voices central to decision-making, which meant community-based organizations votes carried the most weight. Raimi & Associates, and ChangeLab Solutions provided technical assistance. The former Interim City Planning Director was also a technical adviser. The process launched in 2014 after resident leaders involved with East Oakland Building Healthy Communities and the community-based organizations conducted an Oakland resident survey. The survey included over 550 Oakland residents that spoke diverse languages. The results highlighted Housing and Displacement; Food, Community Gardens & Urban Farms; Environment and Transportation; Economic Development and Safety. These priorities informed the framework of the Healthy Development Guidelines. A key aspect was the creation of a Technical Advisory Group that existed alongside resident engagement whose charge was to develop guidelines, standards and goals, and a set of indicators that planners would use in a development project emphasizing community health and equity. The Public Health Department convened a Technical Advisory Group that included community-based organizations, the City Planning staff, Public Health staff, developers and Consultants that met after the resident meetings to take the resident input and draft policy goals and development guidelines. After six months of meetings that went back and forth with the community resident meetings, issue-based workgroups met to do additional editing, including edits to ensure the guidelines were accounting for displacement prevention. Additional focus groups for non-profit and for-profit developers provided additional insights into the feasibility of the guidelines. City Planning staff also provided helpful feedback about what is already on the books and technical details to make standards implementable. Meetings with community leaders occurred after the Technical Advisory Group meetings to develop the vision and priorities for the Guidelines, offer training and share various versions of the Guidelines to ensure the revisions reflected their vision and get feedback and receive trainings on various topics related to development. This created a circular, feedback loop process between the TAG and EOBHC residents, partners and youth, they were moving in tandem, communicating regularly, toward the creation of the Guidelines. East Oakland Building Healthy Communities and the community-based organizations convened residents in these meetings over a half year. This created a cohort of resident leaders that have become deeply invested in seeing
implementation of the Healthy Development Guidelines.

At the end of the six-month process of engaging both the TAG and residents, EOBHC partners were left with several tasks: the refinement of the tool, what to do with the list of recommendations, continuing to engage in authentic ways to refine the tool, and creating authentic resident engagement model the City could use. **Project Strengths**

Members of the various stakeholder groups appreciated the opportunity to work together on this collaboration. There is a general positive consensus that the bridging of non-traditional partners, including Oakland residents, the Public Health Department and City of Oakland Planning Department, community-based organizations, and market-rate and affordable housing developers led to a shared vision of health equity for all of Oakland.

**COLLABORATING FOR HEALTH**

As one resident said, *What I like about working in a coalition is you bring all these ideas to the table; none of us are against each other. Even if we focus on different ideas, we are working on the same goal of justice.*

The shifting of traditional roles for the various stakeholders in the process allowed for greater buy-in, inclusiveness, and overall positive participation from the members of the collaborative. Residents felt that their voices were heard, as one resident stated, “I think we moved up the scale of getting the City Council’s attention; we ultimately got the Mayor’s office to notice us...I feel like it’s an accomplishment.” As part of parallel activities in East Oakland Building Healthy Communities, residents educated Mayoral candidates about the Guidelines and presented an update to the newly elected Mayor in an accountability session.

Residents seized the opportunity to act as policy-makers and create a policy document instead of the traditional role of providing feedback after action.

*Government agency staff tend to want to lead processes and sometimes that's appropriate and sometimes it's not. It was useful, in this case, to step back and let the group work through some difficult spots on their own.*

- AGENCY STAFF

Stakeholders had many successful interactions. Resident engagement activities were designed to build resident power and capacity to engage in planning processes and policy change. Residents expressed increased understanding about planning and development, and appreciated the effective facilitation, thus sustaining their participation throughout the process. The inclusiveness of the resident engagement process—across racial, language and issue lines—built social capital and cohesion in historically disempowered and disinvested communities. Even if expectations were not initially optimistic, the outcome was positive:

*Although we may suffer the bitter defeat, what we got out of it was a strong coalition. We gained so much out of it and learned to work together!*
Additionally, relationship building, openness, and sharing among the Technical Advisory Group (TAG) members provided an opportunity for real learning about the diverse needs and challenges of stakeholders. Although there were concerns that not all voices were heard by all participants, it was appreciated that community-based organizations were involved as both part of the TAG and resident groups to provide ‘expert’ insight for the TAG while also providing a voice for the community. City staff said, “The dialogue was great! It doesn’t always happen and they felt they learned a lot and benefitted from the dialogue.”

**Project Challenges**

**HISTORIC RELATIONSHIPS AND MISTRUST**

The issues of time and trust were repeatedly reported as the biggest challenges facing the Healthy Development Guideline creation process. The project took hundreds of hours over five years, more than many of the stakeholders planned to invest in the project. All stakeholders raised the issue of time as a challenge throughout the process. From the Agency standpoint, expectations around deadlines made this process somewhat frustrating as time was necessary to get through the process ensuring voices were heard and everyone understood the process itself. Not only did it take a lot of time, but also there was a loss of consistency among government and CBO staff and residents, knowledge, and institutional/community history due to turnover, in part because of the length of the project, which has been approximately five years. This turnover impacted all stakeholders at all points of involvement from the resident and grassroots organizations all the way up to the shift from one Mayor to the next. Where fresh eyes and ideas were beneficial, they also slowed progress as participants need to be brought to the same level of information and knowledge of the project. CBOs faced capacity challenges to participation. A tension existed between each organization focusing on their individual mission while also being committed to a project like this where the magnitude was not properly assessed.

There was a parallel process between the TAG and EOBHC residents, partners and youth, they were moving in tandem, communicating regularly, toward the creation of the HDG, bringing it together throughout. At the end of the six-month process of engaging both the TAG and residents, EOBHC partners were left with several tasks: the refinement of the tool, what to do with the list of recommendations, continuing to engage in authentic ways to refine the tool, and creating authentic resident engagement. Residents and staff from community-based model the City could use. Organizations were wary of government agencies and the technical advisory group and that promises made would be broken. Residents had a healthy dose of skepticism and doubt because of prior experience with the City from the crematorium.

*My one regret is not being involved in the resident engagement piece. I feel like there is a piece going on that is exciting and unique, and I am sorry to have not seen it.*

*Biggest challenge, as far as residents*
- AGENCY STAFF
dealing with ‘these’ groups is learning how to overcome the insinuated ‘no’ with
As a government agency person, I didn’t their double speak.
realize [before this process] how
- OAKLAND RESIDENT
important an understanding of the work and interests of CBOs and the community
would be
One thing I definitely learned is that we the people are strong and I keep that in mind
At the end of the day, all stakeholders felt that everyone’s voice had been heard. The process was
designed to try to ensure the resident perspectives were included, but one lesson learned that was
voiced by multiple stakeholders, was to have joint meetings between the residents and the
technical advisory group members and integrate the processes more. and how beneficial [to the
process].
- AGENCY STAFF
with City officials and ‘power people.’ They may not think that we the people are the
‘bosses,’ but as long as we know we are the bosses, we are not going to let them get
away with what they continue to try and get away with.
- OAKLAND RESIDENT
Aware of distrust between Oakland [government] and its residents...it’s not something
we are trying to brush under the rug...It will take a long time to build trust and this
[process] is one small step.
- AGENCY STAFF

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PROJECT COMPLEXITY AND BROAD VISION OF COPE

The beginning, after determining roles, responsibilities, and objectives, there were still challenges and a lack of clarity. For example, depending upon which group was leading the discussion, the guidelines were referred to as "guidelines," "checklists," and "toolkits" reflecting inconsistent understanding of project outcomes. Multiple stakeholders stated that they would have preferred more of a top-down approach to guiding process, up to and including the Mayor’s office. Ency staff were wary of this approach as they work to balance their responsibilities to serve as both partners with stakeholders and regulators.

Major challenge was the level of technical knowledge needed to engage and conduct the work and the expertise varied dramatically by stakeholder up as well. At times, this made it difficult to merge differing stakeholder thoughts and viewpoints. The language of the Healthy Development Guidelines, in later iterations, made it inaccessible to participants with non-technical experience as City and regulatory limitations were added to the guidelines. The increased complexity and technical nature of the process required more time and resources placed training and educating residents “getting everyone to a similar starting place.”

All stakeholders raised the issue of time as a challenge throughout the process. From the Agency standpoint, expectations around deadlines made this process somewhat frustrating as time was necessary to get through the process ensuring voices were heard and everyone understood the process itself. Not only did it take a lot of time, but also there was a loss of consistency among government and CBO staff and
residents, knowledge, and institutional/community history due to turnover/mobility, in part because of the length of the project, which has been approximately five years. This turnover impacted all stakeholders at all points of involvement from the resident and grassroots organizations all the way up to the shift from one Mayor to the next. Where fresh eyes and ideas were beneficial, they also slowed progress as participants need to be brought to the same level of information and knowledge of the project.

CBOs faced capacity challenges to participation. A tension existed between each organization focusing on their individual mission while also being committed to a project like this where the magnitude was not properly assessed.

The same strong desire to provide a healthy and safe environment for families exist, but there is less time and energy to put toward it because families are working more and longer hours just to make ends meet. Therefore, it behooves the government to fight for the people who at least try to live a good life.

-OAKLAND RESIDENT

Lessons Learned for Future Projects and Collaborations

Improved organization from the beginning and CBOs want agencies and developers to learn was expressed as an important lesson from this resident engagement model and engage and learned during this process. A clearer sustain residents throughout the lifecycle of future understanding of the magnitude of the project with planning processes. A member of the TAG recognized appropriately allocated funds, resources, and other that while it would be better to prioritize community types of compensation for all stakeholders involved engagement when designing a development project as well as transparency and sharing of information instead of after the fact, there often is not enough time among stakeholders at all points. Due to the size and to do so before the property is purchased. There is also length of the project, stakeholders all indicated that room for improvement, as a CBO staff member stated, a project manager position would have been very

“We got all we could, but didn’t get all we wanted.” useful both in ensuring the flow and
timeliness of the project, but also to address challenges as they arose. Even though the process was prolonged, slowing it
down from their usual pace, Agency staff felt the time allowed for more thoughtful and deliberative work “do so more effectively even though it’s challenging,” “allowed for more thoughtful and deliberative work”
expensive, and time-consuming...It needs and provided them with greater understanding of the to be done. value of input by the community and CBOs.

- AGENCY STAFF

I have learned that community needs Current Status of Healthy aren’t always obvious and many may not be already represented via policy. I also know now that

Development Guidelines

community needs can and should be represented

Between 2016 and 2018, the Healthy Development better/more often in public process. Guidelines Project Management Team worked on

- TAG MEMBER

implementation with the City of Oakland. The Team
An Oakland resident had a similar notion that residents need to be engaged from the beginning of achieved major accomplishments in collaboration with the Planning and Building Department: projects instead of an afterthought:
1. Updates to the City’s Standard Conditions of Approval, which are requirements that apply to all I would like to see a very strong City new development; policy developed that would apply to all planning projects instead of reinventing the wheel for every development...I would like to see an overall City policy that incorporates residents from day one...where residents have a seat at the table
2. Updates to the City’s Basic Application for Development Review that include collection of tenant eviction data and guidelines for community engagement. The Team presents to City Council in September. and are part of the development...Not coming later, like, ‘Oh we will build you a park or plant a tree.’

OAKLAND RESIDENT

The Project Management Team gave a presentation to City Council in September and received a Commendation for the work and are currently Stakeholders have high hopes and expectations for working on an implementation plan with City staff.
Lessons Learned

ENGAGEMENT

✓ Resident engagement is critical to drive the conversation and process. Resident leaders are vital at all planning tables.
✓ Resident leaders have a lot to teach and to learn by having access to technical training and growing their knowledge of the planning process.

CLARIFICATION OF ROLES AND COMMUNICATION

✓ Create an organizational chart that includes roles and identifies decision making authority
✓ Assign a point person that is responsible for the overall project management
✓ Identify other key roles and assign point person to oversee other areas (i.e.: communication, outreach)
✓ Implement a system for sharing data and resources

TECHNICAL ASSISTANCE (TA)

✓ TA support staffing be vetted by the CBOs and residents
✓ TA providers be chosen based on their expertise, project needs and community connections
✓ TA support should be present at all tables to support full perspective of the project to the extent that the budget allows
✓ TA support should provide meeting facilitation to relieve stakeholders from excessive burdens

SUSTAINABILITY

✓ Identify and apply for appropriate funding
necessary to allow for equitable participation in future engagements with government agencies and residents

**IMPACT HEALTH EQUITY**

✓ Take major role and primary responsibility

**OPERATIONALIZE COMMITMENT TO HEALTH EQUITY**

for supporting and shepherding the implementation of the Healthy Development Guidelines

✓ Participate in training that will allow staff and management to better understand what working from an equity framework entails

✓ Establish shared language and clear understanding of the intended outcomes of the project

✓ Adopt a racial and health equity focused mission for the City

✓ Develop a mission driven funding plan

**BUILD COMMUNITY TRUST**

✓ Create a community engagement platform that support engagement early in the planning process

✓ Allocate staff time and department leadership to community and cross-agency collaboration

✓ Educate staff on historical and ongoing
community challenges regarding inequity, oppression, and environmental injustice
✓ Identify and assign key decision making staff
to support collaborative process

✓ Lead evaluation efforts of the process in conjunction with other participating governmental agencies

✓ Engage other agencies and cities in theprocess and potential implementation opportunities

leadership for additional cross-agency relationships, cross division engagement

✓ Implement a community engagement toolkit

SUSTAINABILITY

✓ Identify and apply for appropriate funding to
ensure equitable participation of community- based organizations and residents
✓ Strengthen internal capacity to provide
to help guide the community engagement process
Honoring and Engagement

Community Health

The development of the Healthy Development Guidelines has been a tremendous learning process for all stakeholders involved. The process opened a new door for discussion and collaboration between residents, community-based organizations and governmental agencies. With all relationships, it takes time to build authentic trust and mutual understanding.

Endnotes

The process was iterative: Residents gave their vision and priorities, the Technical Assistance Group worked with developing policy and development language from that with help from the technical assistance providers, then this was brought back to the residents to show what we did with their input, organizing and massaging the language. It wasn’t perfect, but that was how we designed the process to try to ensure the resident perspectives were included. The lesson we learned was to have the process with everyone in the room together.

These kinds of processes take time and it’s always a challenge to keep residents excited and engaged and prevent turnover. Displacement has also played a huge challenge in community engagement and informed the work / beckoned the need for figuring out how the tool could benefit existing residents... It’s a challenge around technical expertise and working with technical assistance providers. Finding the right one with the right expertise is important to help push the process along.
Let’s raise up the importance of capacity on the outreach team to do education with residents to bring them up to speed so they can engage on informing this tool.”

- AGENCY
  STAFF
This document was originally written in 2016, in August 2018 it was updated with input from ACDPH and facilitated by Nehanda Imara of EOBHC.

Original design updated by Anna Gagliuffi. Photo credit Esther Goolsby 2016.
For more information contact: Nehanda Imara at nehanda@east oaklandbhc.org