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Get Healthy Utah Survey Results

An analysis of municipality leaders' perspectives on factors that affect the health of their community.

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Get Healthy Utah Survey Results

Analysis in Brief

Local governments play an important role in promoting and supporting healthier communities by creating places, programs, policies, and partnerships that encourage healthy behaviors and improve the lives of their residents. This survey sought to understand the perspectives of municipal leaders throughout Utah regarding the interconnectivity between a person's economic, social, environmental, and living situation and their overall health and well-being. Addressing community health, wellness, and access to health care can have positive impacts on workforce retention, supports individual economic mobility, and, in turn, promotes economic development.

Results from the survey show the municipalities represented in this study have different opinions regarding needs and approaches to community health. Understanding these leaders' views on community health can help Get Healthy Utah better understand how and what initiatives to promote to improve health and help support the long-term economic viability of different areas across Utah.

This study compared leader perspectives on both direct and indirect factors that impact a person's health:

Direct health factors:

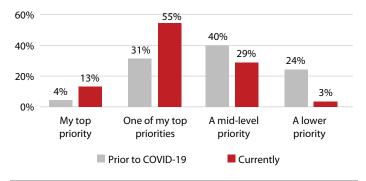
- Increased physical activity
- Reduced opioid misuse
- Improved air quality
- Improved mental health
- Suicide prevention

Social Determinants of Health (indirect):

- · Access to healthy food
- Access to educational opportunities
- Access to employment opportunities
- Access to medical care
- Access to public health
 programs
- Access to affordable housing

- COVID-19 mitigationChronic disease
 - prevention/ Reduced obesity
- Accident and injury prevention
- Adequate income
- Access to safe drinking water, clean air, and toxin-free environments
- Access to affordable transportation options
- Low exposure to crime, violence, and social disorder
- Access to the internet

Community Health as a Priority Before and Since COVID-19



Key Findings:

- Community health grew as a priority during COVID-19 Community health as a top priority, or one of respondents' top priorities, grew 33 percentage points since the onset of the COVID-19 pandemic.
- City government has a role in addressing community health – Almost half of all respondents believe city government has a role in addressing factors that contribute to the health of their community.
- They believe their primary role is to provide infrastructure that supports healthy choices – According to respondents, city governments' role is largely to provide their residents with the infrastructure (buildings, activities) necessary to make healthy decisions.
- Equal access to factors that contribute to the health of a community vary across municipalities Respondents are more likely to agree their residents have equal access to safe drinking water, clean air, and toxin-free environments than equal access to affordable transportation options, adequate income, and affordable housing.
- Affordable housing is a key concern being addressed Compared to other factors, respondents are more likely to have a plan in place to address affordable housing in their municipality.

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Introduction

Get Healthy Utah partnered with the Kem C. Gardner Policy Institute to better understand municipal government leaders' perspectives on and their plans for addressing community health. For purposes of this study, community health is defined as anything that impacts the health and well-being of everyone who lives and works in a community, regardless of income or ethnicity. This includes direct health factors like physical activity, mental health, opioid use, air quality, chronic diseases, and injury prevention. Community health is also influenced by the social determinants of health, which are the conditions in places where people live, learn, work, and play that indirectly affect their health risks and outcomes. Examples include access to healthy food options, education, employment, and medical care, as well as incentives built into a person's physical and policy environments that encourage and promote healthy behavior.

Research Context

A growing body of research demonstrates the interconnectivity between a person's economic, social, environmental, and living situation and their overall health and well-being. As a result, both public and private entities are focusing more on addressing community health, wellness, and access to health care, which can increase workforce retention, support individual economic mobility, and, in turn, promote economic development.

Local governments play an important role in promoting and supporting healthier communities by creating places, programs, policies, and partnerships that encourage healthy behaviors and improve the lives of their residents. Many believe these types of programs, policies, and partnerships are best developed and supported at the local level as municipal governments understand the immediate needs and challenges of their communities. Local governments are also already engaged in the type of work that can be leveraged to support community health. Establishing parks and recreation facilities, maintaining green and open spaces, supporting healthy living programs and health-related policies, and building partnerships with healthfocused community organizations can improve the health of a community.

Municipal leaders who prioritize community health and make decisions that positively impact the immediate health and wellbeing of the residents in their communities are creating structures and systems that support the long-term economic viability of their area.

Methodology

A questionnaire was developed with input from Get Healthy Utah leadership and board members (see Appendix A). Utah League of Cities and Towns (ULCT) assisted with online survey distribution by providing a list of municipal leader contacts and sending an email introducing and describing the importance of the study. The survey was in the field from October 13 to December 1, 2020. While 146 participants started the survey, 107 completed it. Participants represented 66 municipalities. The length of the survey could be a factor in respondent drop off. The average time it took respondents to complete the survey was 25 minutes.

Limitations

While every effort was made to engage all municipalities in this study, only 66 are represented out of 248. Some municipalities had more than one respondent participate in the survey, others had just one. As such, the opinions reflected in these findings are only from a subset of Utah's multiplicities.

Findings

This report follows the order of the questionnaire as taken by respondents. First, the study sought to determine whether community health changed as a priority for municipal leaders due to the COVID-19 pandemic. Second, a set of questions were asked about both direct factors that contribute to community health as well as the more indirect social determinants of health (see text box below). Finally, respondents were asked their opinion about health-promoting, evidence-based policy interventions. All findings were further analyzed by particular respondent characteristics, shown in text boxes throughout the report titled "Diving Deeper."

Respondent Characteristics

This report considers various characteristics of respondents and the municipality they represent, like the municipality's population size (using Utah League of Cities and Towns 2020 population classifications) or its corresponding Utah Health Improvement Index score (HII, see description on p. 5), as well as the respondents' gender, tenure in their position, and household income. Differences in responses by characteristics are described when meaningful. Frequencies of all demographics can be found in Appendix B.

Tables 1-3 help lend context to respondents' characteristics. It's important to note that while six respondents are from areas with over 100,000 residents, these respondents only represent two cities. Four out of the five respondents that represent cities with 65,000–99,000 residents are from the same city. Therefore, findings from larger cities are not generalized in this study.

Definition: Social Determinants of Health

Social determinants of health are the conditions in places where people live, learn, work, and play that affect their health risks and outcomes. For example, a person with food instability or who lacks access to affordable healthy food may have a more difficult time controlling their diabetes. A person with black mold in their home or apartment may visit the doctor or emergency room more frequently for asthma or other lung-related health concerns.

Table 1. Characteristics of Represented Municipalities and Respondents

Population	ULCT Classification	Perc	ent:
100k or more	1		6.3
65k to 99,999	2		5.2
30k to 64,999	3		5.2
10k to 29,999	4		21.9
1k to 9,999	5		42.7
1 to 999	6		18.8
Total Number of Responses			96

Health Improvement Index	Percent
Very high	15.5
High	29.9
Average	12.4
Low	21.6
Very low	20.6
Total Number of Responses	97

Total Number of Responses

Gender of Respondent	Percent
Male	59.8
Female	35.5
Prefer not to say	3.7
Other	0.9
Total Number of Responses	107

Household Income of Respondent	Percent
Less than \$35,000	1.0
\$35,000 to \$59,999	9.0
\$60,000 to \$99,999	31.0
\$100,000 to \$249,999	46.0
\$250,000 or more	3.0
Prefer not to say	10.0
Total Number of Responses	100

Respondent Tenure in Position	Percent
Less than 1 year	16.2
1 to less than 5 years	43.8
5 to less than 10 years	22.9
10 to less than 20 years	13.3
20 years or more	3.8
Total Number of Responses	105

Utah Health Improvement Index Areas

The Utah HII is a composite measure developed by the Utah Department of Health (UDOH) that associates health outcomes to health disparities across different geographic areas in Utah. Health disparities are defined as the "differences in health outcomes closely linked to economic, socio-cultural, and environmental/geographic disadvantage."¹

The HII is based on a combination of social and economic indicators related to health disparities and the social determinants of health, including median family income,

Table 2. Heath Improvement Index of City and PopulationClassification of Sample

ніі	# Cities	Population Classification	Representation in Sample
		1	3
		4	4
Very High	10	5	4
		6	3
		Unknown	1
		2	1
		3	2
High	21	4	1
		5	15
		6	10
		2	4
Average	8	5	5
		6	3
		4	8
Low	15	5	12
		6	1
		1	3
		3	3
Very Low	12	4	8
		5	5
		6	1

Table 3. Health Improvement Index by Population of Sample

education levels, owner-occupied housing units, civilian labor force participation, and single-parent households, among others. The index is geographically based on the Utah Small Areas² and includes five categories: "very high," "high," "average," "low," and "very low."

A higher HII score indicates more improvement may be needed in that area to address health disparities. For example, areas with "very high" HII scores indicate that "substantial improvements are needed to advance health equity and reduce health disparities in that area."³ Areas with "very low" HII scores have much better social and economic outcomes than the average Utah Small Area and differences in health outcomes cannot be attributed to health disparities.

To group survey responses by HII, recorded municipalities were mapped to a corresponding Utah Small Area and assigned the Utah Small Area's HII category.⁴ In most cases, the recorded municipalities mapped directly to a single Utah Small Area. In a few cases, however, the municipality crossed multiple Utah Small Areas. In these cases, a Utah Small Area was subjectively assigned based on the "best fit" (i.e., the Utah Small Area with which the municipality seemed to primarily align). As such, it is important to note that some of the assigned HII categories are subjective and that this analysis should be interpreted as only directional. Table 1 shows the percent of survey responses from each HII category. As noted with the population size classification, an HII area may include multiple responses from the same municipality. Similarly, not all survey respondents included their municipality.

Interestingly, the analysis discovered that those representing areas with high and low HII scores often had similar views.

Table 2 shows the HII of the municipalities that responded to the survey, their representation in the sample, and their population classification, where 1 is the largest size and 6 the smallest. Table 3 shows HII areas by population size.

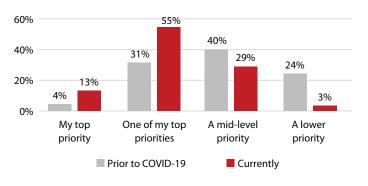
	Population						
н	100k or more	65k to 99,999	30k to 64,999	10k to 29,999	1k to 9,999	1 to 999	N=
Very high	21.4%			28.6%	28.6%	21.4%	14
High	0.0%	3.4%	6.9%	3.4%	51.7%	34.5%	29
Average		33.3%			41.7%	25.0%	12
Low				38.1%	57.1%	4.8%	21
Very low	15.0%		15.0%	40.0%	25.0%	5.0%	20
Total	6.3%	5.2%	5.2%	21.9%	42.7%	18.8%	96

Community Health as a Priority

The survey sought to gauge whether community health had grown as a priority for municipal leaders since the onset of COVID-19. The following question was asked from the perspective of municipal leaders' priorities prior to COVID-19 and their priorities in the midst of the COVID-19 pandemic (the survey was conducted in the fall/winter of 2020).

QUESTION: As a leader in your community, there are many different issues and priorities for you and your organization to focus on. Thinking about community health, would you say it's...?

Figure 1. Community Health as a Priority Before and Since COVID-19



Community health as a top priority, or one of respondents' top priorities, grew 33 percentage points since the onset of the COVID-19 pandemic (see Figure 1). None of the respondents representing municipalities with populations 30,000–64,999 (5) indicated that community health was currently their top priority (see Table 4). Tables 4 through 6 show the percentage point difference between denoted priority pre- and during the pandemic by population size, HII area, and the respondents' tenure in their position. For example, respondents representing municipalities with more than 100,000 residents indicated a 16.7 percentage point increase in prioritizing community health after the onset of COVID-19.

In general, survey respondents from "very high" HII areas were more likely to indicate that community health was their "top priority," both currently and prior to COVID-19 (see Figure 2).

DIRECT HEALTH FACTORS

The survey asked the same questions for two different groups of health factors: (1) direct health factors, such as physical activity, drug use, mental health, and chronic disease; and (2) indirect health factors, or the social determinants of health (see definition on p. 4). This section covers survey findings related to direct health factors.

Table 4. Percentage Point Difference of CommunityHealth as a Priority Before COVID-19 and Currently,by Population Size

Population	My top priority	One of my top priorities	A mid-level priority	A lower priority	N=
100k or more	16.7%	16.7%	-16.7%	-16.7%	6
65k to 99,999	20.0%	-6.7%	20.0%	-33.3%	5
30k to 64,999	0.0%	20.0%	20.0%	-40.0%	5
10k to 29,999	9.5%	14.3%	4.8%	-28.6%	21
1k to 9,999	7.4%	24.4%	-13.7%	-18.1%	40
1 to 999	11.1%	27.8%	-16.7%	-22.2%	18
Total	9.3%	21.2%	- 7.6 %	-22.9%	95

Table 5. Percentage Point Difference of Community Healthas a Priority Before COVID-19 and Currently, by HealthImprovement Index (HII)

ні	My top priority	One of my top priorities	A mid-level priority	A lower priority	N=
Very high	13.3%	20.0%	-20.0%	-13.3%	15
High	6.8%	19.6%	2.2%	-28.6%	29
Average	9.1%	1.0%	16.2%	-26.3%	11
Low	9.5%	19.0%	-14.3%	-14.3%	21
Very low	10.0%	35.0%	-15.0%	-30.0%	20
Total	9.2 %	21.0%	-7.5%	-22.7%	96

Table 6. Percentage Point Difference of Community Healthas a Priority Before COVID-19 and Currently, by Tenure inPosition

Tenure in Position	My top priority	One of my top priorities	A mid-level priority	A lower priority	N=
< 1 year to < 5 years	6.3%	27.7%	-6.0%	-28.0%	63
5 to <10 years	8.3%	7.5%	6.9%	-22.7%	23
10 years or more	16.7%	22.2%	-27.8%	-11.1%	18
Total	8.5%	22.2%	- 6.9 %	-23.8%	104

Figure 2: Share of Respondents Indicating Community Health is their Top Priority by HII Area

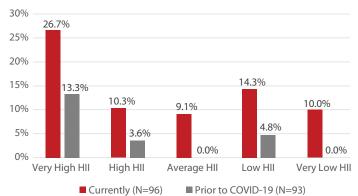
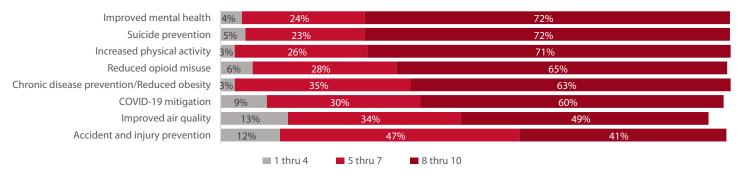


Figure 3. Importance of Direct Health Factors to the Health of a Community



Note: On a scale of 1-10 where 1 is not at all important and 10 is extremely important. Sorted by importance (8 through 10).

DIVING DEEPER

Population Generalizations are not made about towns over 30,000 because of the small sample size and limited representation of municipalities.

Respondents representing municipalities with populations between 10,000–29,999 were more likely to think improved mental health and obesity are very important to the health of their community. The smallest towns (populations of 1-999) are more likely to think COVID-19 mitigation is very important.

Tenure in Position Those who have been in their municipal leadership position for more than ten years are less likely to think that increased physical activity is very important, but more likely to think reducing opioid misuse and COVID-19 mitigation is very important. This same cohort are more likely to think improved air quality is important to community health.

Gender Female respondents are less likely to think suicide prevention is very important to the health of their community.

Household Income Those with a household income of less than \$59,999 are less likely to think improved mental health and chronic disease/reduced obesity are very important to the health of the community, but more likely to think COVID-19 mitigation is very important. Those with incomes between \$60,000 and \$99,999 are more likely to think suicide prevention and accident and injury prevention are very important.

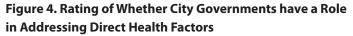
Utah Health Improvement Index Areas Respondents from very high HII (areas with the most room to improve) were less likely to think physical activity is a very important factor compared to those from very low HII areas. Chronic disease prevention and reduced obesity were also less likely to be seen as important compared to responses from very low HII areas. Figure 3 shows that improved mental health topped the list of factors that respondents believe are important for the health all residents in their community, followed closely by physical activity. In comparison, accident and injury prevention and air quality were less likely to be seen as important to the health of a community.

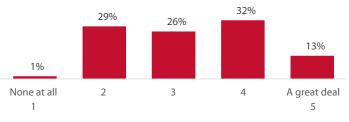
Importance of Direct Factors that Impact Health

QUESTION: Looking at the following factors that impact a person's health, how important do you believe each of them are to the health of all of the residents in your community, regardless of income or ethnicity? (N=146)

Role of Government in Addressing Direct Health Factors

QUESTION: Generally, to what extent do city governments have a role in addressing these factors that impact a person's health? (N=144)





Participants were also given the option to expand on their thoughts if they "would like to say more about the extent that city governments have a role in addressing these factors that impact a person's health." All open-ended comments can be found in Appendix C.

Most municipal leaders responding to the question (30) believe their main role is providing their residents with the infrastructure they need to make healthy decisions, encouraging and educating them about those options (17), and state it is up to the individual to make healthy decisions (10). In some cases,

Table 7. Coded Responses Compared to City Role Rating Regarding Direct Factors that Impact a Person's Health

What extent do city governments have a role in addressing these factors that impact a person's health?	Individual	Provide	Limited Resources	Too Small	Encourage/ Educate	Not city	Partner/ Support	Surounding Cities	Policy	Other	нш	Population Classificatior
1											Average	5
2											Very high	5
2											Very high	6
2											Very high	
2											High	5
2											High	3
2											High	б
2											Average	6
2											Average	2
2											Average	6
2											Very low	4
2											Very low	5
2											Very low	4
2											Very low	4
2												
2												
2												
3											Very high	4
3											Very high	6
3											Very high	5
3											Very high	1
3											High	6
3											High	6
3											Low	5
3											Low	5
3											Low	5
3											Low	5
3											Very low	3
3											Very low	1
3											Very low	3
3											Very low	4
3												
4											Very high	4
4											Very high	4
4 4											Very high	1
4											Very high	1
4											High	6
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4											High	5
4											High	5
4											High	4
4											High	6
4											High	6
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4											Very low	5
4											Very low	5
4											Very low	1
4												
4												
4												
5											Very high	5
5											High	6
5											Low	5
5											Very low	4
5											Very low	3
5											Very low	4
			1								Very low	4
5											verylow	4

Note: The rating for the first column is where 1 is "not at all," and 5 is "a great deal."

Individual: It is up to the individual to lead a healthy life.

health.

factors.

example).

Surrounding cities: Smaller towns are impacted by bigger cities that surround them, and often can't help certain factors (air quality, for

Policy: Cities can impact or enact policies to help address these factors.

Encourage/Educate: The city can provide information or outreach that encourages or educates the public on healthy behaviors. Not city: It is not under the city's jurisdiction to address these factors. Partner/support: City's can partner or support local organizations that exist to impact these

Provide: City government can provide facilities to help community be healthy, and events that encourage exercise. Limited resources: The city only has so many resources to impact a person's health. Too small: The city or town is too small to have an impact on a person's some respondents mention all three. Some respondents specify that the government should stay out of it all together. There were no discernable demographic differences in how respondents answered these questions.

Most of the respondents who indicated that city governments don't have much of a role in addressing these factors (2 on a 1–5 scale) said that it isn't the city's responsibility, but the responsibility of the county, state, or community partners to address these issues. Those that indicated that city governments have a role (4 or 5 on a 1–5 scale) were more likely to be from urban areas and more likely to include policy solutions in their responses about plans to address community health. Respondents from areas with a low HII score are more likely to think city government does not have a role in addressing direct health factors.

Survey respondents that selected a 3 on the scale were more likely to say it's the government's role to provide opportunities if they were from low HII areas, whereas those that selected a 4 were more likely to say it's the government's role to provide opportunities if they were from high HII areas. See Table 7 for more detail.

Plans to Address Direct Health Factors

For factors survey respondents rated as important to the health of all residents in their community (6 and above on the 1–10 scale), a follow up question was asked if the respondents had plans in place or plans they are considering to address those important factors. This section provides details on the responses that indicate a municipality does have plans to address these factors, and what those plans entail.

Responses from this section were analyzed by size of the city or town, as classified into urban and rural categories where population classifications 1–4 are considered more urban, and 5–6 are considered more rural. A few exceptions were made for areas that are adjacent to an urban area. Please see Appendix D for all plans mentioned by each municipality.

For those with plans to **increase physical activity** (72 respondents), most municipalities mentioned the building and maintenance of parks, trails, and recreation spaces, and providing active classes and events. Respondents also mentioned encouraging campaigns and certain policy interventions like "requiring housing developments to include walking, biking, and jogging paths."

Bigger goals, like active transportation plans, were mostly mentioned by urban area respondents. Only a few areas specifically mentioned accessible options for all. The plans mentioned in the open-ended responses align with comments about a city's role being mostly to "provide" the infrastructure necessary to make healthy decisions (see Table 7).

COVID-19 mitigation strategies (67) include (1) following state guidelines, (2) encouraging mask wearing and social distancing to the general public and requiring the same in

Figure 5. Direct Factors that have a Plan in Place or Plan Being Considered



public facilities, (3) limiting functions of public buildings, (4) allowing city employees to work remotely, (5) holding public hearings online, (6) providing personal protective equipment, and (6) helping small businesses stay open. There was no discernable difference between city size in terms of the responses related to COVID-19 mitigation strategies.

Plans for **suicide prevention** (36) were largely the same as plans to improve mental health (below), but included a particular focus on suicide prevention expertise or emphasized training and programming. Some mentioned focusing on a particular population like older adults or students.

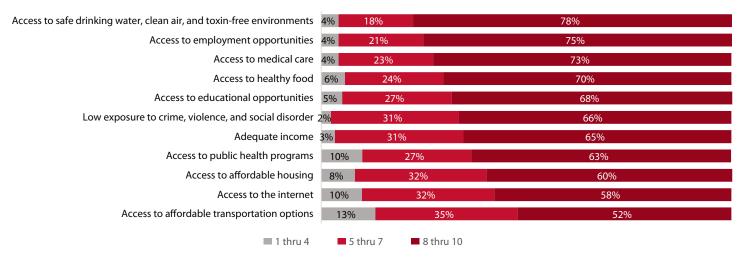
Thirty-three respondents detailed plans to **improve mental health**. Some interventions are broad as some respondents (mostly from smaller towns) noted that improving factors like jobs, walkable developments, and social and recreational activities will have a positive impact on mental health. Others plan to partner with health providers to improve mental health, focus on law enforcement training, develop mental health related programs for specific populations, and implement public outreach information campaigns.

Plans to prevent **accidents and injuries** (34) include building and traffic safety, public facility inspection and improvements, proactive law enforcement, and public awareness campaigns. One non-urban town mentioned a transportation master plan specifically to reduce accident and injury. There was no discernable difference between city sizes in terms of mentioned prevention strategies.

Plans to improve **air quality** (30) varied, even among representatives from the same city. Most urban areas only mentioned idle-free initiatives and monitoring, although some also mentioned shared refinery and sewage treatment regulations and energy efficient building upgrades. Smaller cities mentioned improving public transportation options and planning that encourages walkability.

For respondents with plans to reduce **opioid misuse** (20 respondents), most mentioned their partnership with police, fire, EMT, and health departments. Most of these plans simply included the mention of the relationship. A couple of additional

Figure 6. Importance of Social Determinates to the Health of a Community



Note: On a scale of 1-10 where 1 is not at all important and 10 is extremely important. Sorted by importance (8 through 10).

plans mentioned included improving public awareness. Differences between urban and rural areas were not discernable. An interesting finding were the different plan descriptions noted by different respondents from the same city:

"We are partnering with a local company that offers an opioid nullifying solution."

"We are looking into purchasing a NarcX disposal container for opioids."

"The city puts out education material and data in coordination with the local hospitals, public health systems, and federal health networks. The city has provided Narcam, and Narcx to our officers, as well as with in communal settings for disposing drugs. The city collaborates on public private partnerships to get Narcx into each home, and reports on our needs to our health systems. The city partners with several private entities dealing with crisis, physical therapy, addiction, and others to engage in preventative and post engagement."

"Multiple programs with our Sheriffs here to educate our students on this important topic. Drop boxes."

Plans to **prevent chronic disease and obesity** (20) mostly focus on promoting and providing opportunities for active lifestyles. Only a few respondents mentioned education and prevention programming and resources.

Utah Health Improvement Index Areas

The majority of respondents across all HII areas noted that they are currently addressing or have plans to address "increased physical activity" in the near future. COVID-19 mitigation is the other commonly selected factor that respondents in all HII areas are addressing or plan to address, followed by suicide prevention (largely driven by responses from "low" and "very low" areas) and accident and injury prevention.

SOCIAL DETERMINANTS OF HEALTH

Importance of Social Determinants of Health

QUESTION: How important do you believe each of these social determinants of health are to the health of all of the residents in your community, regardless of income or ethnicity? Access means it's affordable, available, and proximate. (N=122)

Figure 6 shows that access to safe drinking water, clean air, and toxin-free environments is believed to be the social determinant most important to the health of all the residents in a community, followed by access to employment opportunities and medical care. Access to the internet and affordable transportation options were less likely to be seen as important factors to the health of a community.

DIVING DEEPER

Population Generalizations are not made about towns over 30,000 because of the small sample size and limited representation of municipalities.

Respondents from the smallest towns (populations of 1–999) are more likely to say access to healthy food, medical care, public health programs, adequate income, safe drinking water, clean air, and toxin-free environments, affordable transportation options, and the internet are very important.

Respondents representing towns of 1,000–9,999 people are less likely to think access to affordable transportation options are important to the health of their community.

Respondents representing towns of 10,000–29,999 people are less likely to think access to healthy food, employment and educational opportunities, medical care, public health programs, and adequate income are important to the health of their community.

Tenure in Position Respondents who have been in their position of leadership for ten years or more are more likely to think that access to medical care, public health programs, and adequate income affect the health of their community.

Respondents who have been in their position for 5–10 years are less likely to think access to affordable transportation options and adequate income are important to the health of their community.

Gender Female respondents are more likely to think access to medical care is very important to the health of their community.

Household Income Those with incomes between \$60,000 and \$99,999 are more likely to think access to affordable transportation and medical care are very important.

Utah Health Improvement Index Areas Table 8 shows the top factors believed to impact a person's health as selected by survey respondents in each HII category. These lists include both direct health factors and the social determinants of health that received the highest percent of survey respondents selecting them as being "very important" in terms of impacting the health of all of the residents in their community, regardless of income or ethnicity. Factors are listed in order of highest to lowest percent of responses. Only factors that received 70% or more of survey respondents selecting them as "very important" are listed. The majority of respondents in all HII areas selected "access to education opportunities" and "access to employment opportunities" as being very important to the health of all of the residents in their communities. Very high and high areas had a higher share of respondents noting access to medical care, affordable housing, and access to affordable transportation options as being very important, while low and very low areas were more likely to note increased physical activity and improved mental health. Only 40% of survey respondents in very high HII areas noted increased physical activity as being very important in terms of impacting the health of the residents in their community.

Table 8: Top Factors Considered to be Very Important in terms of Impacting a Person's Health in a Community, Regardless of Income or Ethnicity, by HII Area

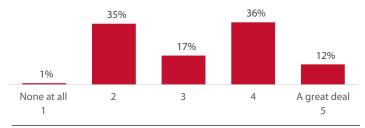
Very High	High	Average	Low	Very Low
Access to education opportunities	Access to education opportunities	Access to education opportunities	Access to education opportunities	Access to education opportunities
Access to employment opportunities	Access to employment opportunities	Access to employment opportunities	Access to employment opportunities	Access to employment opportunities
Access to medical care	Access to safe drinking water,	Access to safe drinking water,	Increased physical activity	Increased physical activity
Access to affordable	clean air, and toxin-free environments	clean air, and toxin-free environments	Access to safe drinking water,	Improved mental health
housing Access to safe drinking	Access to medical care	Increased physical activity	clean air, and toxin-free environments	Chronic disease prevention/ Reduced obesity
water, clean air, and	Access to healthy food	Reduced opioid misuse	Improved mental health	Suicide prevention
toxin-free environments	Improved mental health		Suicide prevention	Improved air quality
Access to affordable transportation options	Suicide prevention		Low exposure to crime,	Access to safe drinking
Low exposure to crime, violence, and social	Access to public health programs		violence, and social disorder	water, clean air, and toxin-free environments
disorder	Adequate income			
	Access to affordable housing			
	Increased physical activity			
	Reduced opioid misuse			

Note: Only factors that received 70% or more of survey respondents selecting them as "very important" are listed. Those in color are factors that repeat in every HII area.

Role of Government

QUESTION: Generally, to what extent do city governments have a role in addressing these social determinants of health? (N=120)

Figure 7. Rating of Whether City Governments have a Role in Addressing Social Determinants of Health



Participants were also given the option to expand on their thoughts if they "would like to say more about the extent that city governments have a role in addressing social determinants of health." Of the 36 that responded, 10 mentioned how most social determinants of health are not under a city's purview, especially small cities. A few example comments include:

"These are all areas that Cities do not have explicit authority or funding. Generally, these are addressed at other levels of government."

"Our town is mostly a bedroom community so most of these issues are taken care of on a county level."

"Many of the items are best addressed at a state or federal level."

"Again, most of these are so far outside of the roles that cities play. We are not equipped to deal with these, and I'm not sure we should be. Do cities need to be everything to everyone? How will we pay for these additional services?"

"For most of these factors, cities rarely provide solutions. However, we need to take extra care that we do not create policy that makes these factors worse." However, some respondents specified where the city does have role and where it doesn't.

"Local government is charged with providing essential services to health, including public utilities (potentially including reliable internet during COVID times), reliable roads, public safety, clean water, etc."

"Yes on clean water, garbage pickup. Yes on handling crime. These are all valuable components, but how do we expand our role as cities, and therefore our budget, to deal with these other items."

"Some of the above issues a city is charged with addressing as core functions, such as safe drinking water, crime, transportation and housing. We can promote other programs by bringing in farmer's markets and encouraging public health programs."

Table 9 compares these comments to the rating respondents gave to the question "Generally, to what extent do city governments have a role in addressing these social determinants of health?" These responses are also compared with respondents' characteristics to determine any trends. Interestingly, those from very high and very low HII areas have similar responses, where respondents are more likely to say that city governments have a great deal (4 and 5 combined) of a role in addressing social determinants of health. Females are also more likely to say that government has a role in addressing these factors. See Appendix C for all comments.

Opinions Regarding Equal Access to Social Determinants of Health

QUESTION: Please tell us whether you agree or disagree that all residents in your community, regardless of income or ethnicity, have equal access to social determinants of health. (N=119) (See Figure 8)

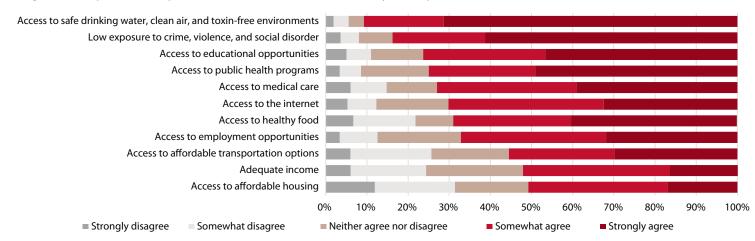


Figure 8. Respondents' Opinions on Whether Their Community has Equal Access to Social Determinants of Health

Table 9. Coded Responses Compared to City Role Rating for Impacting Social Determinants of Health

Generally, to what extent do city governments have a role in addressing these social determinants of health?	Private sector	Not gov role	City/Gov role	Against city role	Too small	Limited resources	Limited power	Not city	Partner	Provide what we can	Individual Responsibility	Other	HII	Population Classification
1													Average	6
2													Very high	
2													High	6
2													High	5
2													High	6
2													Average	2
2													Average	5
2													Very low	4
2													Very low	4
2														
3													High	6
3													High	6
3													High	5
3													High	3
3													High	4
3													Low	4
3													Low	5
3													Low	5
3													Very low	4
3														
4													Very high	4
4													Very high	4
4													Very high	5
4	1												High	5
4													High	5
4													High	6
4													Average	5
4													Very low	5
4													Very low	4
5													High	6
5													High	3
5													Very low	5
5													Very low	3
5	1												Very low	3
5	1												Very low	1
5	1													L
Total	3	3	3	2	3	3	3	10	2	2	2	5		

DEFINITIONS

Private sector: It is the role of the private sector and free market to impact social determinants of health.

Not gov role: It is not the government's role to impact social determinants of health.

City/gov role: It is the role of the city and government to impact social determinants of health.

Against city role:

Respondent is explicitly against their city having a role in impacting social determinants of health.

Too small: The city or town is too small to have an impact on social determinants of health.

Limited resources: The city only has so many resources to have an impact on social determinants of health.

Limited power: Cities

have limited power and influence to address all social determinants of health, especially if small.

Not city: It is not under the city's jurisdiction to address social determinants of health.

Partner: Cities can partner or support local organizations that exist to impact social determinants of health.

Provide what we can:

City government can try to provide infrastructure and information necessary to address these factors.

Individual responsibility: It is up to the individual to lead a healthy life.

Note: The rating for the first column is where 1 is "not at all," and 5 is "a great deal."

DIVING DEEPER

Population Generalizations are not made about towns over 30,000 because of the small sample size and limited representation of municipalities.

Respondents from municipalities with populations between 10,000–64,999 are more likely to disagree their residents have equal access to healthy food, educational and employment opportunities, affordable transportation options, and low exposure to crime and violence. Further, those representing municipalities with populations between 30,000–64,999 are more likely to disagree that their residents have equal access to medical care, public health programs, affordable housing, adequate income (same as those from areas with 65,000–99,999 residents), and the internet.

Respondents representing the smallest municipalities are more likely to agree that their residents have equal access to public health programs and the internet.

Tenure in Position Respondents who have been in their position of leadership for ten years or more are more likely to disagree their residents have equal access to healthy food and affordable transportation options. This same cohort is more likely to agree their residents have equal access to educational opportunities.

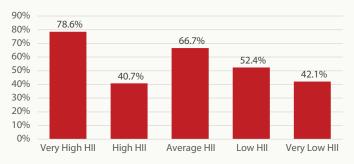
Gender Female respondents are more likely to agree that their residents have equal access to educational opportunities, low exposure to crime and violence, and the internet.

Household Income Respondents with household incomes less than \$59,999 are more likely to disagree their residents have equal access to medical care, and safe drinking water, clean air, and toxin-free environments. Those with household incomes between \$60,000 and \$99,999 are more likely to agree their residents have equal access to adequate income, affordable housing, educational opportunities, and healthy food.

Utah Health Improvement Index Areas No clear findings emerged among HII areas regarding which factors they believe their residents have equal access to; however, some interesting findings did emerge. For example, Figure 9 shows that a higher share of respondents from very high HII areas indicated that they agree all residents in their community have equal access to adequate income than respondents in very low HII areas. Similar relationships exist for affordable housing, affordable transportation options, and access to the Internet.

This seems counter-intuitive, given the indicators used to develop HII scores include median family income, income disparity, owner-occupied housing units, unemployment,

Figure 9: Share of Respondents That Agree that All Residents in their Community, Regardless of Income or Ethnicity, Have Equal Access to Adequate Income by HII Area (N=93)



Note: Strongly and somewhat agree were combined.

Figure 10: Share of Adults with Annual Household Income under \$25,000 by HII Classification, 2015–2019



Note: Age-adjusted. Data shown are from combined years. Source: Utah Behavioral Risk Factor Surveillance System, Office of Public Health Assessment, Utah Department of Health. Retrieved Fri. 7 May 2021 from the Utah Department of Health, Indicator-Based Information System for Public Health Web site: http://ibis.health.utah.gov.

and poverty. Figure 10 illustrates this by showing the share of adults with annual household income under \$25,000 by HII classification. Almost 30% of adults living in very high HII areas have annual household income under \$25,000 compared to only 6.7% in very low HII areas.

One explanation for these counter-intuitive results may be that survey respondents in very high HII areas feel all residents in their area have equal access to adequate income, affordable housing, affordable transportation options, and the Internet, even if this access is not good access particularly since these factors were also noted to be very important to impacting a person's health by these respondents. Whereas, respondents in very low HII areas could be acknowledging that not all residents in their communities have equal access to these factors, even if most do. Further analyses are needed to better understand these relationships and respondents' thinking on these issues.

Plans to Address Social Determinants of Health

QUESTION: These are the social determinants of health you believe aren't equally accessible to your residents (based on answer to question from Figure 8). Please select those of which you have a plan to address (or improve) equal access. (N=43, 78 total choices selected) (See Figure 11)

Fewer open-ended responses detailing plans to address social determinants of health were provided compared to the number of plans related to addressing direct health factors. This may be because respondents were asked to detail plans being considered or implemented if unequal access is believed to exist, rather than based on their perceived importance of the factor.

Some of the plans mentioned are repeated across multiple determinants as they address more than one social determinant of health. For example, improved public transit connections improves employment, air quality, and transportation access. For the most part, there was no discernable difference of plans between urban and rural areas. Please see Appendix D for all plans mentioned by each municipality.

Most plans to increase access to affordable housing (23) involve working with developers and planning commissions to provide a variety of housing (especially encouraging higherdensity housing and accessory dwelling units), and policy decisions involving tax increments, relaxing regulations, and updating zone ordinances. Big and small cities alike had similar plans.

Plans to improve access to affordable transportation options (10) involve mostly working with the state transportation agency to learn how their transportation plans can be improved and planning to mitigate commuting times.

Efforts to improve access to healthy food (5) include school food programs, food banks and pantries, recruiting grocery stores to areas with food deserts, encouraging gardening, and providing education on healthy foods.

Improving access to employment opportunities (6) is being addressed by offering job fairs, attracting businesses to the area, updating zoning policy so lower-income families can qualify for a home loan, and thus be able to work inside city boundaries, and connecting low-income students with opportunities and employers.

Plans to improve access to the internet (6) include creating infrastructure for fiber internet, incorporating digital equity in franchise agreements with internet providers, and one small city is exploring the option to own their own internet utility.

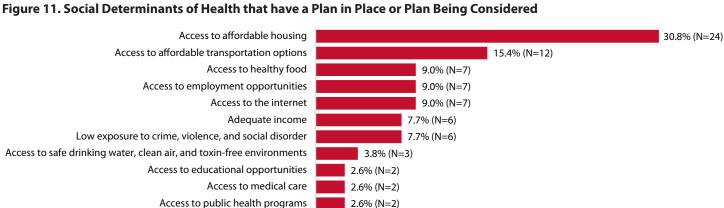
Plans to increase access to adequate income (6) were similar to the plans associated with employment opportunities: recruiting high-paying jobs and employers, and partnering with schools to develop employment pipelines.

Four respondents addressed plans to ensure low exposure to crime, violence, and social disorder. These plans include funding police, first responders, and community-policing efforts, addressing racial bias in police departments, and providing opportunities that prevent idleness.

Three respondents from urban areas described plans to increase access to safe drinking water, clean air, and toxinfree environments. These include working with government agencies to improve air guality, providing charging stations, and facilitating remote work so workers reduce commutes.

Improving access to educational opportunities (2) include afterschool tutoring, affordable college for low-income students, and trade training.

Improving access to medical care (2) and public health programs (1) involve partnering and helping improve staffing at local health clinics.



Current and Future Importance of All Health Factors

QUESTION: Please select the direct factors and social determinants of health that have increased in importance for your residents due to COVID-19. (See Figure 12)

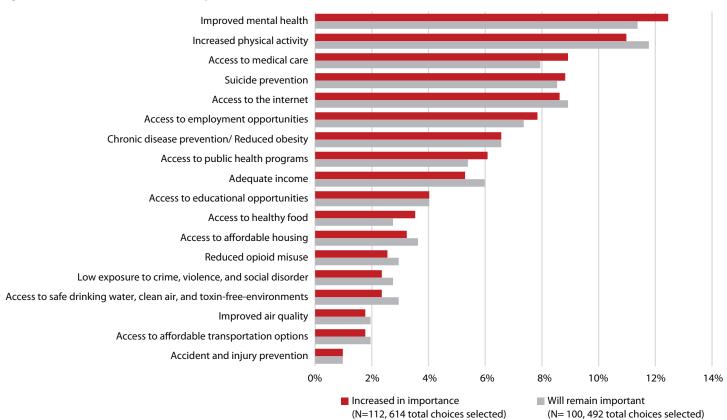
Factors that will remain important after becoming a higher priority due to COVID-19 include increased physical activity, reduced opioid misuse, improved air quality, access to the internet, adequate income, affordable housing, low exposure to crime and violence, safe drinking water, clean air and toxin-free environments, and affordable transportation options. Factors that may not remain as important after COVID-19 are improved mental health and suicide prevention, access to medical care, access

Figure 12. Increased and Future Importance of Factors that Affect Health

to public health programs, employment opportunities, and healthy foods. These data do not show the importance level before COVID-19, so we are not able to show whether these factors decrease in importance compared to before the pandemic.

Utah Health Improvement Index Areas

Similar to the breakdown of total survey responses, the factors and social determinants of health that have increased in importance due to COVID-19-across all HII areas-are increased physical activity and improved mental health. These two factors are also most likely to remain important to each HII area after the threat of COVID-19 has passed.



Policy Interventions

This section covers questions about specific evidence-based nutrition and physical activity-promoting policies and interventions municipalities think are or would be effective in improving community health.

NUTRITION Policy Effectiveness

QUESTION: If done well, how effective do you think each action is, or would be, in improving community health in your area? On a scale from 1 to 10, where 1 is not at all effective, and 10 is extremely effective. (N=111) (See Figure 13)

Figure 13. Respondents' Opinions About the Effectiveness of Evidence-Based Nutritional-Promoting Plans

Support universal free school meals at all schools	38%	36%	26%	
Introduce or modify land use and zoning policies to impact health	42%	32%	25%	
Incentivize supermarkets and grocery stores to move into areas that lack access to healthy foods	40%	37%	23%	
Encourage farmers markets to accept SNAP cards	arkets to accept SNAP cards 47% 38			
Develop healthy food policies for city/county government programs and facilities	53%	33%	15%	
Implement a sugar sweetened beverage tax	70%		21% 9%	
	1 thru 4 5	thru 7 📕 8 thru	10	

DIVING DEEPER

Population Generalizations are not made about towns over 30,000 because of the small sample size and limited representation of municipalities.

Respondents from the smallest towns (populations between 1–999) are more likely to believe the following evidence-based interventions are **ineffective**: encouraging farmers markets to accept SNAP cards, building and maintaining trails and paths, adopting pedestrian and bicycle master plans and complete streets policy, collaborating with schools to develop a Safe Routes to School program, acquiring green space, and adopting policies that require new subdivisions to provide sidewalks, street lights, and walking/biking paths.

Those representing populations between 10,000–29,999 are more likely think acquiring and maintaining green space and adopting pedestrian and bicycle master plans are **effective**.

Tenure in Position Municipality leaders that have been in their position for over ten years are more likely to think modifying land use and zoning, universal school meals, building trails and paths, adopting a pedestrian and bicycle master plan, a Safe Routes to School program, and subdivision requirements to provide sidewalks, street lights, and walking/biking paths are **effective**.

Gender Female respondents are more likely to believe that building trails and paths accessible to all, adopting a pedestrian and bicycle master plan, and Safe Routes to School programs are **effective**.

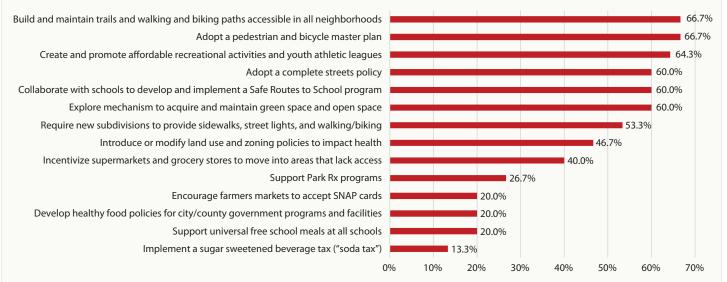
Household income Respondents with a household income less than \$59,999 were more likely to believe the following policies to be **ineffective**: modifying land use and zoning policies, building trails and paths, adopting a pedestrian and bicycle master plan, complete streets policies, Safe Routes to School programs, creating recreational activities and leagues, acquiring green space, subdivision requirements, Park Rx programs, and farmers markets accepting SNAP cards.

Utah Health Improvement Index Areas While each HII category is comprised of a mix of different municipalities located in different areas across the state (e.g., some urban, some rural, etc.), it can be helpful to examine which policies survey respondents believe would be most effective in improving community health in very high HII areas compared to very low HII areas.

DIVING DEEPER (Continued,

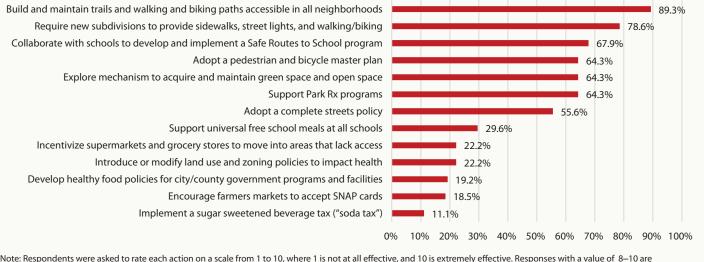
Figures 14-18 list the prioritized responses for each HII category. The majority of respondents from very high HII areas felt building and maintaining accessible trails and walking and biking paths, adopting a pedestrian and bicycle master plan, and creating and promoting affordable recreational activities and youth athletic leagues would be most **effective** in improving community health. High, average, low, and very low HII areas prioritized similar evidence-based policies, with the addition of requiring new subdivisions to provide sidewalks, street lights, and walking/ biking paths; collaborating with schools to develop and implement a Safe Routes to School program; and exploring mechanisms to acquire and maintain green space and open space. The fewest number of respondents—across all HII categories—felt implementing a sugar sweetened beverage tax ("soda tax") would be effective.

Figure 14: Share of Very High HII Respondents That Feel the Following Evidence-Based Actions Are, or Would Be, Effective in Improving Community Health in their Area

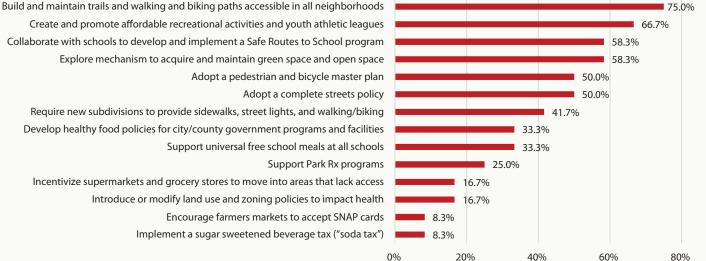


Note: Respondents were asked to rate each action on a scale from 1 to 10, where 1 is not at all effective, and 10 is extremely effective. Responses with a value of 8–10 are considered effective. Response sizes (N) vary from 93-95).

Figure 15: Share of High HII Respondents That Feel the Following Evidence-Based Actions Are, or Would Be, Effective in Improving Community Health in their Area



Note: Respondents were asked to rate each action on a scale from 1 to 10, where 1 is not at all effective, and 10 is extremely effective. Responses with a value of 8–10 are considered effective. Response sizes (N) vary from 93-95).

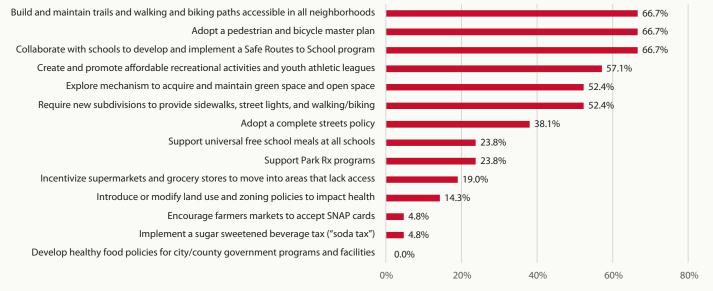


Effective in Improving Community Health in their Area

Note: Respondents were asked to rate each action on a scale from 1 to 10, where 1 is not at all effective, and 10 is extremely effective. Responses with a value of 8–10 are considered effective. Response sizes (N) vary from 93-95).

Figure 16: Share of Average HII Respondents That Feel the Following Evidence-Based Actions Are, or Would Be,

Figure 17: Share of Low HII Respondents That Feel the Following Evidence-Based Actions Are, or Would Be, Effective in Improving Community Health in their Area

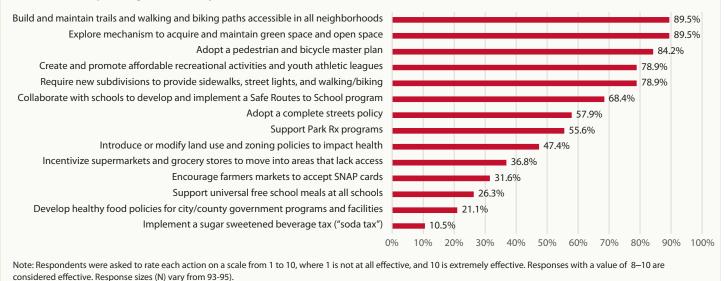


Note: Respondents were asked to rate each action on a scale from 1 to 10, where 1 is not at all effective, and 10 is extremely effective. Responses with a value of 8–10 are considered effective. Response sizes (N) vary from 93-95).

75.0%

DIVING DEEPER (Continued)

Figure 18: Share of Very Low HII Respondents That Feel the Following Evidence-Based Actions Are, or Would Be, Effective in Improving Community Health in their Area

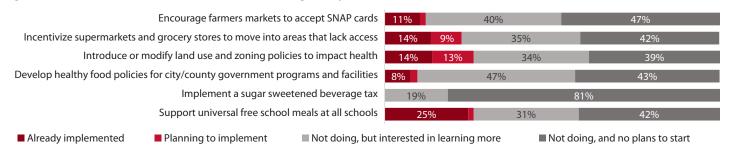


isidered encetive. Response sizes (ii) valy nom 25 25).

Implementation of Effective Policy

QUESTION: Of those actions you rated as effective, please indicate which of the following actions your community is already doing or planning to start in the near future. (N=64)

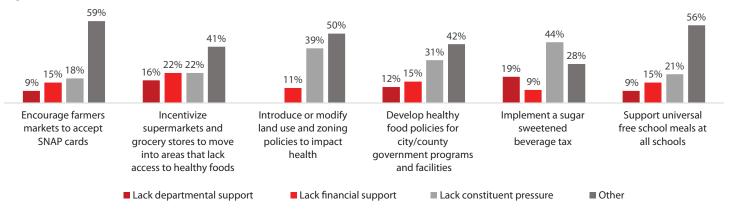
Figure 19. Status of Effective Nutritional-Promoting Policy Plans



Preventing Implementation of Effective Policy

QUESTION: [For those who answered "Not doing, and no plans to start]: *What is preventing you and your community from implementing these actions?* (N=37)

Figure 20. Prevention of Effective Nutritional Plans



"Other" Prevention Reasons

"Other" reasons are detailed below since it was often the most selected choice.

Encouraging SNAP cards at farmers markets: Ten of 16 responses cited their municipality does not have a farmer's market. Others say their municipality is too small, or that it is a state function.

Incentivizing supermarkets into food deserts: The ten "other" reasons noted include not being big enough to have grocery stores, current coverage is adequate, and that it is a market solution, not government's role.

Modifying land use/zoning: Eight of the 11 responses were from small populations (classification 5 and 6) and varied around issues like that type of zoning already being in place,

not being able to afford dis-incentivizing business growth, not seeing a need, being too small, or already having built out land use policies to impact health.

Developing healthy food policies: Most of the eight "other" reasons given centered on not having programs of that nature, and it being out of their jurisdiction (and being the jurisdiction of the county, state, or federal government instead).

Implementing a soda tax: The seven "other" responses either didn't see it as within their jurisdiction, didn't believe it would be effective ("like the tobacco tax, people still smoke"), didn't see it as the role of government, or felt they needed more information.

Supporting universal free school meals: The 17 responses mostly indicated that it is a school district issue and not under the purview of municipalities.

PHYSICAL ACTIVITY

Policy Effectiveness

QUESTION: If done well, how effective do you think each action is, or would be, in improving community health in your area? On a scale from 1 to 10, where 1 is not at all effective, and 10 is extremely effective. (N=110)

Figure 21. Respondents' Opinions About the Effectiveness of Evidence-Based Physical Activity Promoting Plans

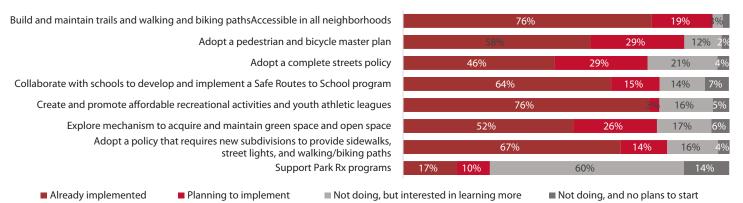
Build and maintain trails and walking and biking pathsAccessible in all neighborhoods Create and promote affordable recreational activities and youth athletic leagues Adopt a pedestrian and bicycle master plan Collaborate with schools to develop and implement a Safe Routes to School program Explore mechanism to acquire and maintain green space and open space Adopt a policy that requires new subdivisions to provide sidewalks, street lights, and walking/biking paths Adopt a complete streets policy Support Park Rx programs

9%	14%	6		77%					
8%	20)%		71%					
19	9%	15%		66%					
13%		25%		63%					
15%	ó	24%		62%					
9%		30%		61%					
2	2%		30%	4	48%				
	26%		34%		40%				
		■ 1 thru 4	■ 5 thru 7	■ 8 thru 10					

Implementation of Effective Policy

QUESTION: Of those actions you rated as effective, please indicate which of the following actions your community is already doing or planning to start in the near future. (N=97)

Figure 22. Status of Effective Physical Activity Promoting Plans



Preventing Implementation of Effective Policy

QUESTION: [For those who answered "Not doing, and no plans to start]: *What is preventing you and your community from implementing these actions?* (N too small for meaningful graph and analysis)

Table 10. Prevention of Effective Physical Activity Plans

	Lack departmental support	Lack financial support	Lack constituent pressure	Other	Total
Build and maintain trails and walking and biking paths		100%			2
Provide recreational activities available to families from all income levels					0
Adopt a pedestrian and bicycle master plan		50%		50%	2
Adopt a complete streets policy			33%	67%	3
Collaborate with schools to develop and implement a Safe Routes to School program	10%	20%	30%	40%	10
Create and promote youth athletic leagues affordable for families from all income levels	17%	50%	17%	17%	6
Explore mechanism to acquire and maintain green space and open space	17%	67%		17%	6
Adopt a policy that requires new subdivisions to provide sidewalks, street lights, and walking/biking paths.		67%		33%	3
Support Park Rx programs	13%	20%	33%	33%	15

"Other" Prevention Reasons

- Adopting a pedestrian/bicycle master plan: Too small.
- Developing a Safe Routes to School program: There are no schools in their town.
- Creating athletic leagues: Not a city function.
- Acquiring green space: City already built out.
- Adopting policies that require new subdivisions to provide sidewalks, street lights, and walking/biking paths: Not applicable due to small size.
- Supporting Park Rx programs: Need more information, not role of city to "prescribe."

Conclusion

Every municipality represented in this survey has different needs and challenges, and no one characteristic (population size, HII area, etc.) produced a consistent perspective. As such, efforts to work with city leaders to help them improve the health of their community would benefit from a tailored approach.

It's clear, however, that Utah's municipalities are fortunate to be led by thoughtful, engaged leaders. Better understanding these leaders thoughts on community health can help Get Healthy Utah better understand how and what initiatives to promote to improve health, and in turn, help municipal leaders create structures and systems that support the long-term economic viability of their area.

Endnotes

- 1. https://ruralhealth.health.utah.gov/wp-content/uploads/2019/03/UtahHII.pdf
- 2. For more information about Utah Small Areas see https://ibis.health.utah.gov/ibisph-view/pdf/resource/UtahSmallAreaInfo.pdf
- $3. \ https://ruralhealth.health.utah.gov/wp-content/uploads/2019/03/UtahHII.pdf$
- 4. For a list of Utah Health Improvement Index Scores by Utah Small Area, see https://ibis.health.utah.gov/ibisph-view/indicator/view/HII.html

Appendix A. Survey Instrument

Where we live, work, and play has a significant impact on our health. Cities and towns are uniquely positioned to improve local health conditions for all residents. We are asking you to complete this survey to help us have a better understanding of your perspective about community health and learn more about how you are addressing the health of residents. The results of the survey will be used to help guide the development and distribution of programs and support for local communities.

Please think of community health as the things that impact the health and well being of everyone who lives and works in your community regardless of income or ethnicity.

Please answer all questions through the lens of your professional role – not from a personal standpoint.

1. As a leader in your community, there are many different issues and priorities for you and your organization to focus on. Thinking about community health, would you say it's...?

	My top priority	One of my top priorities	A mid-level priority – other priorities are more/less important	A lower priority
Currently				
Prior to COVID-19				

2. Looking at the following factors that impact a person's health, how important do you believe each of them are to the health of all of the residents in your community, regardless of income or ethnicity?

	Not at all important 1	2	3	4	5	6	7	8	9	Extremely important 10
Increased physical activity										
Reduced opioid misuse										
Improved air quality										
Improved mental health										
Suicide prevention										
Chronic disease prevention/ Reduced obesity (i.e., diabetes, asthma, etc.)										
Accident and injury prevention										
COVID-19 mitigation										

3. Q4 Generally, to what extent do city governments have a role in addressing these factors that impact a person's health?

None at all 1	2	3	4	A great deal 5

4. Please use this space if you would like to say more about the extent that city governments have a role in addressing these factors that impact a person's health.

- 5. These are the factors you rated important. Please select those you are currently addressing or have plans to address in the near future.
 - □ Increased physical activity
 - □ Reduced opioid misuse
 - □ Improved air quality
 - □ Improved mental health
 - $\hfill\square$ Suicide prevention
 - $\hfill\square$ Chronic disease prevention/Reduced obesity
 - □ Accident and injury prevention
 - COVID-19 mitigation

6. Please briefly describe your plan or strategy to address the selected factors.

- Increased physical activity ______
- Reduced opioid misuse ______
- Improved air quality______
- Improved mental health ______
- □ Suicide prevention____
- Chronic disease prevention/Reduced obesity _____
- Accident and injury prevention_____
- COVID-19 mitigation _____

7. Social Determinants of Health are the conditions in places where people live, learn, work, and play that affect their health risks and outcomes. For example, a person with food instability or who lacks access to affordable healthy food may have a more difficult time controlling their diabetes. Or, a person with black mold in their home or apartment may visit the doctor or ER more frequently for asthma or other lung-related issues. How important do you believe each of these social determinants of health are to the health of all of the residents in your community, regardless of income or ethnicity? Access means it's affordable, available, and proximate.

	Not at all important 1	2	3	4	5	6	7	8	9	Extremely important 10	
Access to healthy food											
Access to educational opportunities											
Access to employment opportunities											
Access to medical care (physicians, hospitals, etc.											
Access to public health programs (flu shots or tobacco cessation)											
Access to affordable housing											
Adequate income											
Access to safe drinking water, clean air, and toxin-free environments											
Access to affordable transportation options											
Low exposure to crime, violence, and social disorder											
Access to the internet											
Generally, to what extent do city governments have a role in addressing these social determinants of health?											
None at all 1 2		3			4		A great	t deal 5			

8.

- 9. Please use this space if you would like to say more about the extent that city governments have a role in addressing social determinants of health.
- 10. Please tell us whether you agree or disagree that all residents in your community, *regardless of income or ethnicity*, **have equal access** to the following:

	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	Unsure
Access to healthy food						
Access to educational opportunities						
Access to employment opportunities						
Access to medical care (physicians, hospitals, etc.)						
Access to public health programs (flu shots or tobacco cessation)						
Access to affordable housing						
Adequate income						
Access to safe drinking water, clean air, and toxin-free environments						
Access to affordable transportation options						
Low exposure to crime, violence, and social disorder						
Access to the internet						

- 11. These are the social determinants of health you believe aren't equally accessible to your residents. Please select those of which you have a plan to address (or improve) equal access.
 - □ Access to healthy food
 - □ Access to educational opportunities
 - □ Access to employment opportunities
 - □ Access to medical care
 - □ Access to public health programs
 - Access to affordable housing
 - □ Adequate income
 - □ Access to safe drinking water, clean air, and toxin-free environments
 - □ Access to affordable transportation options
 - $\hfill\square$ Low exposure to crime, violence, and social disorder
 - $\hfill\square$ Access to the internet
- 12. Please briefly describe what interventions are you implementing, or are planning to implement in the near future, to ensure equal access

Access to healthy food
Access to educational opportunities
Access to employment opportunities
Access to medical care
Access to public health programs
Access to affordable housing
Adequate income
Access to safe drinking water, clean air, and toxin-free environments
Access to affordable transportation options
Low exposure to crime, violence, and social disorder
Access to the internet

- 13. Please select the factors and social determinants of health that have increased in importance for your residents due to COVID-19.
 - Increased physical activity
 - Reduced opioid misuse
 - □ Improved air quality
 - □ Improved mental health
 - □ Suicide prevention
 - $\hfill\square$ Chronic disease prevention/ Reduced obesity
 - □ Accident and injury prevention
 - □ Access to healthy food
 - □ Access to educational opportunities
 - □ Access to employment opportunities

- □ Access to medical care (physicians, hospitals, etc.)
- Access to public health programs (flu shots or tobacco cessation)
- □ Access to affordable housing
- □ Adequate income
- Access to safe drinking water, clean air, and toxin-free environments
- □ Access to affordable transportation options
- □ Low exposure to crime, violence, and social disorder
- Access to the internet
- 14. Please select the factors and social determinants of health that you believe will remain important to your city after the threat of COVID-19 has passed.
 - □ Increased physical activity
 - □ Reduced opioid misuse
 - □ Improved air quality
 - □ Improved mental health
 - □ Suicide prevention
 - □ Chronic disease prevention/ Reduced obesity
 - □ Accident and injury prevention
 - $\hfill\square$ Access to healthy food
 - $\hfill\square$ Access to educational opportunities
 - □ Access to employment opportunities

- □ Access to medical care (physicians, hospitals, etc.)
- Access to public health programs (flu shots or tobacco cessation)
- □ Access to affordable housing
- □ Adequate income
- Access to safe drinking water, clean air, and toxin-free environments
- □ Access to affordable transportation options
- □ Low exposure to crime, violence, and social disorder
- \Box Access to the internet

In this next section, you're going to see two different lists of interventions that could potentially improve community health for Utah residents, and be asked some questions related to them. As a reminder, please consider community health as the things that impact the health and wellbeing of everyone who lives and works in your community, regardless of income or ethnicity.

NUTRITION

15. If done well, how effective do you think each action is, or would be, in improving community health in your area?

	Not at all effective 1	2	3	4	5	6	7	8	9	Extremely effective 10
Encourage farmers markets to accept SNAP cards (i.e., food stamps)										
Incentivize supermarkets and grocery stores to move into areas that lack access to healthy foods										
Introduce or modify land use and zoning policies to impact health (i.e. expand or protect sites for gardens and farmers markets, restrict fast food establishments near schools, promote urban agriculture, etc)										
Develop healthy food policies for city/county government programs and facilities										
Implement a sugar sweetened beverage tax ("soda tax")										
Support universal free school meals at all schools										

16. Of those actions you rated as effective, please indicate which of the following actions your community is already doing or planning to start in the near future.

	Already implemented	Planning to implement	Not doing, but interested in learning more	Not doing, and no plans to start
Encourage farmers markets to accept SNAP cards (i.e., food stamps)				
Incentivize supermarkets and grocery stores to move into areas that lack access to healthy foods				
Introduce or modify land use and zoning policies to impact health (i.e. expand or protect sites for gardens and farmers markets, restrict fast food establishments near schools, promote urban agriculture, etc)				
Develop healthy food policies for city/county government programs and facilities				
Implement a sugar sweetened beverage tax ("soda tax")				
Support universal free school meals at all schools				

17. What is preventing you and your community from implementing these actions?

	Lack departmental support	Lack financial support	Lack constituent pressure	Other
Encourage farmers markets to accept SNAP cards (i.e., food stamps)				
Incentivize supermarkets and grocery stores to move into areas that lack access to healthy foods				
Introduce or modify land use and zoning policies to impact health (i.e. expand or protect sites for gardens and farmers markets, restrict fast food establishments near schools, promote urban agriculture, etc)				
Develop healthy food policies for city/county government programs and facilities				
Implement a sugar sweetened beverage tax ("soda tax")				
Support universal free school meals at all schools				

- 18. Please specify the "other" reason that is preventing you from implementing this action.
 - Encourage farmers markets to accept SNAP cards (i.e., food stamps)
 - □ Incentivize supermarkets and grocery stores to move into areas that lack access to healthy foods____
 - Introduce or modify land use and zoning policies to impact health (i.e. expand or protect sites for gardens and farmers markets, restrict fast food establishments near schools, promote urban agriculture, etc)
 - Develop healthy food policies for city/county government programs and facilities
 - Implement a sugar sweetened beverage tax ("soda tax") ______
 - Support universal free school meals at all schools_____

PHYSICAL ACTIVITY

19. If done well, how effective do you think each action is, or would be, in improving community health in your area?

	Not at all effective 1	2	3	4	5	6	7	8	9	Extremely effective 10
Build and maintain trails and walking and biking paths accessible in all neighborhoods										
Adopt a pedestrian and bicycle master plan										
Adopt a complete streets policy										
Collaborate with schools to develop and implement a Safe Routes to School program to increase the number of children safely walking and bicycling to school										
Create and promote recreational activities and youth athletic leagues affordable for families from all income levels										
Explore mechanism to acquire and maintain green space and open space										
Adopt a policy that requires new subdivisions to provide sidewalks, street lights, and walking/ biking paths.										
Support Park Rx programs (a "prescription" that encourages individuals to go visit parks, trails, green space, and other outdoor recreational facilities)										

20. Of those actions you rated as effective, please indicate which of the following actions your community is already doing or planning to start in the near future.

	Already implemented	Planning to implement	Not doing, but interested in learning more	Not doing, and no plans to start
Build and maintain trails and walking and biking paths accessible in all neighborhoods				
Adopt a pedestrian and bicycle master plan				
Adopt a complete streets policy				
Collaborate with schools to develop and implement a Safe Routes to School program to increase the number of children safely walking and bicycling to school				
Create and promote recreational activities and youth athletic leagues affordable for families from all income levels				
Explore mechanism to acquire and maintain green space and open space				
Adopt a policy that requires new subdivisions to provide sidewalks, street lights, and walking/ biking paths.				
Support Park Rx				

21. What is preventing you and your community from implementing these actions?

	Lack departmental support	Lack financial support	Lack constituent pressure	Other
Build and maintain trails and walking and biking paths accessible in all neighborhoods				
Adopt a pedestrian and bicycle master plan				
Adopt a complete streets policy				
Collaborate with schools to develop and implement a Safe Routes to School program to increase the number of children safely walking and bicycling to school				
Create and promote recreational activities and youth athletic leagues affordable for families from all income levels				
Explore mechanism to acquire and maintain green space and open space				
Adopt a policy that requires new subdivisions to provide sidewalks, street lights, and walking/ biking paths.				
Support Park Rx				

22. Please specify the "other" reason that is preventing you from implementing this action.

- Build and maintain trails and walking and biking paths ____
- Provide recreational activities available to families from all income levels_______
- Adopt a pedestrian and bicycle master plan ______
- Adopt a complete streets policy _____
- Collaborate with schools to develop and implement a Safe Routes to School program ______
- Create and promote youth athletic leagues affordable for families from all income levels
- □ Explore mechanism to acquire and maintain green space and open space_____
- Adopt a policy that requires new subdivisions to provide sidewalks, street lights, and walking/biking paths.
- Support Park Rx programs______
- 23. Get Healthy Utah and the Utah League of Cities and Towns have recently introduced Healthy Utah Community, a designation program for cities and towns. The award is designed to highlight work being done in communities throughout Utah to support and improve the health of residents. Are you interested in learning more about community health and the award?
 - □ Yes
 - 🗆 No
- 24. Great. Please fill out the following and Get Healthy Utah will be in touch.
 - Name ____
 - Organization _____
 - Email address
- 25. Are there any other thoughts you have about community health you'd like to share?

DEMOGRAPHICS

- 26. In what age bracket do you fall?
 - □ 18-24
 - □ 25-34
 - 35-54
 - 55-64
 - 65-74
 - □ 75+

27. What is your gender

- □ Male
- Female
- □ Other_
- \Box Prefer not to say
- 28. What is your race/ethnicity
 - □ Caucasian
 - □ African-American
 - Latino or Hispanic
 - Asian
 - Native American
 - Native Hawaiian or Pacific Islander
 - Two or more
 - Other ____
 - Prefer not to say

- 29. What is your approximate annual household income category?
 - □ Less than \$35,000
 - □ \$35,000 to \$59,999
 - □ \$60,000 to \$99,999
 - □ \$100,000 to \$249,999
 - □ \$250,000 or more
 - Prefer not to say
- 30. What municipality do you represent___
- 31. Which of the following best describes the organization you represent?
 - □ City Government Elected Official
 - □ City Government Staff
 - County Government Elected Official
 - County Government Staff
 - Other (please specify) ______
- 32. How long have you been in your current position?
 - □ Less than 1 year
 - □ 1 to less than 5 years
 - □ 5 to less than 10 years
 - □ 10 to less than 20 years
 - □ 20 years or more

Appendix B. Frequencies

As a leader in your community, there are many different issues and priorities for you and your organization to focus on. Thinking about community health, would you say it:

	My top priority	One of my top priorities	A mid-level priority	A lower priority	Total
Prior to COVID-19	4%	31%	40%	24%	140
Currently	13%	55%	29%	3%	145

Looking at the following factors that impact a person's health, how important do you believe each of them are to the health of all of the residents in your community, regardless of income or ethnicity?

	Not at all important 1	2	3	4	5	6	7	8	9	Extremely important 10	Total
Increased physical activity	0%	0%	1%	2%	4%	6%	16%	25%	11%	36%	146
Reduced opioid misuse	1%	2%	1%	3%	6%	8%	15%	15%	13%	37%	145
Improved air quality	4%	4%	1%	8%	16%	8%	10%	15%	15%	19%	144
Improved mental health	0%	1%	1%	2%	6%	6%	13%	19%	17%	35%	145
Suicide prevention	0%	3%	0%	2%	7%	5%	12%	19%	15%	37%	145
Chronic disease prevention/Reduced obesity	0%	1%	1%	1%	11%	9%	15%	28%	17%	19%	145
Accident and injury prevention	1%	1%	4%	6%	9%	15%	23%	16%	11%	14%	145
COVID-19 mitigation	1%	4%	3%	2%	11%	7%	12%	20%	13%	27%	143

Generally, to what extent do city governments have a role in addressing these factors that impact a person's health?

	Percentage
None at all – 1	1%
2	29%
3	26%
4	32%
A great deal – 5	13%
Total	144

These are the factors you rated important. Please select those you are currently addressing or have plans to address in the near future. N=125

	Percentage
Increased physical activity	23%
COVID-19 mitigation	22%
Suicide prevention	12%
Improved mental health	11%
Accident and injury prevention	10%
Improved air quality	10%
Reduced opioid misuse	7%
Chronic disease prevention/Reduced obesity	6%
Total	369

How important do you believe each of these social determinants of health are to the health of all of the residents in your community, regardless of income or ethnicity? Access means it's affordable, available, and proximate. (1, not at all important, to 10, extremely important)

	1	2	3	4	5	6	7	8	9	10	Total
Access to healthy food	0.0%	1.7%	0.8%	3.3%	8.3%	5.0%	10.7%	19.8%	14.0%	36.4%	121
Access to educational opportunities	0.0%	1.7%	1.7%	1.7%	8.3%	4.2%	14.2%	24.2%	15.0%	29.2%	120
Access to employment opportunities	0.0%	1.7%	0.8%	1.7%	5.0%	3.3%	12.4%	19.0%	23.1%	33.1%	121
Access to medical care	0.0%	1.7%	1.7%	0.8%	5.8%	3.3%	14.0%	16.5%	22.3%	33.9%	121
Access to public health programs	0.0%	3.3%	2.5%	4.2%	8.3%	7.5%	10.8%	22.5%	10.8%	30.0%	120
Access to affordable housing	0.8%	0.8%	2.5%	4.1%	10.7%	6.6%	14.8%	23.0%	16.4%	20.5%	122
Adequate income	0.0%	0.8%	1.7%	0.8%	9.9%	6.6%	14.9%	24.0%	15.7%	25.6%	121
Access to safe drinking water, clean air, and toxin-free environments	1.7%	0.8%	1.7%	0.0%	4.1%	5.0%	9.1%	12.4%	12.4%	52.9%	121
Access to affordable transportation options	0.8%	4.1%	2.5%	5.8%	12.4%	8.3%	14.0%	20.7%	15.7%	15.7%	121
Low exposure to crime, violence, and social disorder	0.8%	0.8%	0.8%	0.0%	7.4%	4.9%	18.9%	12.3%	23.0%	31.1%	122
Access to the internet	0.8%	2.5%	3.3%	3.3%	8.3%	5.8%	18.2%	22.3%	15.7%	19.8%	121

Generally, to what extent do city governments have a role in addressing these social determinants of health?

	Percentage
None at all – 1	1%
2	35%
3	17%
4	36%
A great deal – 5	12%
Total	120

Please tell us whether you agree or disagree that all residents in your community, regardless of income or ethnicity, have equal access to the following:

	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	Total
Access to affordable housing	12%	20%	18%	34%	17%	118
Adequate income	6%	18%	24%	36%	17%	115
Access to affordable transportation options	6%	20%	19%	26%	30%	117
Access to employment opportunities	3%	9%	20%	35%	32%	119
Access to healthy food	7%	15%	9%	29%	40%	119
Access to the internet	5%	7%	18%	38%	33%	114
Access to medical care	6%	9%	12%	34%	39%	115
Access to public health programs	3%	5%	16%	26%	49%	116
Access to educational opportunities	5%	6%	13%	30%	47%	118
Low exposure to crime, violence, and social disorder	4%	5%	8%	23%	61%	111
Access to safe drinking water, clean air, and toxin-free environments	2%	4%	4%	19%	71%	108

These are the social determinants of health you believe aren't equally accessible to your residents. Please select those of which you have a plan to address (or improve) equal access. N=43

	Percentage
Access to affordable housing	31%
Access to affordable transportation options	15%
Access to healthy food	9%
Access to employment opportunities	9%
Access to the internet	9%
Adequate income	8%
Low exposure to crime, violence, and social disorder	8%
Access to safe drinking water, clean air, and toxin-free environments	4%
Access to educational opportunities	3%
Access to medical care	3%
Access to public health programs	3%
Total	78

Please select the factors and social determinants of health that have increased in importance for your residents due to COVID-19.

	Increased in importance	Will remain important		
Improved mental health	13%	12%		
Increased physical activity	11%	12%		
Access to medical care	9%	8%		
Suicide prevention	9%	9%		
Access to the internet	9%	9%		
Access to employment opportunities	8%	8%		
Chronic disease prevention/ Reduced obesity	7%	7%		
Access to public health programs	6%	6%		
Adequate income	5%	6%		
Access to educational opportunities	4%	4%		
Access to healthy food	4%	3%		
Access to affordable housing	3%	4%		
Reduced opioid misuse	3%	3%		
Low exposure to crime, violence, and social disorder	2%	3%		
Access to safe drinking water, clean air, and toxin-free environments	2%	3%		
Improved air quality	2%	2%		
Access to affordable transportation options	2%	2%		
Accident and injury prevention	1%	1%		

Please select the factors and social determinants of health that you believe will remain important to your city after the threat of COVID-19 has passed.

	Percentage
Increased physical activity	12%
Reduced opioid misuse	3%
Improved air quality	2%
Improved mental health	12%
Suicide prevention	9%
Chronic disease prevention/ Reduced obesity	7%
Accident and injury prevention	1%
Access to healthy food	3%
Access to educational opportunities	4%
Access to employment opportunities	8%
Access to medical care (physicians, hospitals, etc.)	8%
Access to affordable housing	4%
Access to public health programs (flu shots or tobacco cessation)	6%
Adequate income	6%
Access to safe drinking water, clean air, and toxin-free environments	3%
Access to affordable transportation options	2%
Low exposure to crime, violence, and social disorder	3%
Access to the internet	9%
Total	492

Nutrition:

If done well, how effective do you think each action is, or would be, in improving community health in your area?

	Not at all effective 1	2	3	4	5	6	7	8	9	Extremely effective 10	Total
Encourage farmers markets to accept SNAP cards (i.e., food stamps)	15%	10%	12%	10%	15%	8%	14%	8%	3%	5%	111
Incentivize supermarkets and grocery stores to move into areas that lack access to healthy foods	14%	6%	12%	8%	15%	5%	17%	12%	5%	6%	111
Introduce or modify land use and zoning policies to impact health	12%	14%	9%	8%	14%	10%	9%	14%	7%	5%	111
Develop healthy food policies for city/county government programs and facilities	17%	11%	16%	9%	14%	14%	6%	6%	4%	6%	110
Implement a sugar sweetened beverage tax	43%	12%	13%	3%	11%	6%	4%	6%	1%	2%	111
Support universal free school meals at all schools	12%	8%	13%	6%	16%	7%	12%	6%	7%	13%	110

Of those actions you rated as effective, please indicate which of the following actions your community is already doing or planning to start in the near future.

	Already implemented	Planning to implement	Not doing, but interested in learning more	Not doing, and no plans to start	Total
Encourage farmers markets to accept SNAP cards	11%	2%	40%	47%	57
Incentivize supermarkets and grocery stores to move into areas that lack access to healthy foods	14%	9%	35%	42%	65
Introduce or modify land use and zoning policies to impact health	14%	13%	34%	39%	64
Develop healthy food policies for city/county government programs and facilities	8%	2%	47%	43%	51
Implement a sugar sweetened beverage tax			19%	81%	32
Support universal free school meals at all schools	25%	2%	31%	42%	64

What is preventing you and your community from implementing these actions?

	Lack departmental support	Lack financial support	Lack constituent pressure	Other	Total
Encourage farmers markets to accept SNAP cards	9%	15%	18%	59%	34
Incentivize supermarkets and grocery stores to move into areas that lack access to healthy foods	16%	22%	22%	41%	37
Introduce or modify land use and zoning policies to impact health		11%	39%	50%	28
Develop healthy food policies for city/county government programs and facilities	12%	15%	31%	42%	26
Implement a sugar sweetened beverage tax	19%	9%	44%	28%	32
Support universal free school meals at all schools	9%	15%	21%	56%	34

Physical Activity:

If done well, how effective do you think each action is, or would be, in improving community health in your area?

	Not at all effective 1	2	3	4	5	6	7	8	9	Extremely effective 10	Total
Build and maintain trails and walking and biking paths accessible in all neighborhoods	3%	3%	2%	2%	6%	3%	6%	19%	18%	39%	109
Adopt a pedestrian and bicycle master plan	6%	8%	5%	0%	6%	3%	6%	16%	20%	30%	109
Adopt a complete streets policy	6%	6%	6%	5%	15%	5%	11%	15%	17%	17%	109
Collaborate with schools to develop and implement a Safe Routes to School program to increase the number of children safely walking and bicycling to school	6%	3%	4%	1%	9%	7%	8%	18%	18%	26%	110
Create and promote recreational activities and youth athletic leagues affordable for families from all income levels	3%	2%	4%	0%	6%	5%	10%	21%	21%	29%	108
Explore mechanism to acquire and maintain green space and open space	6%	3%	3%	4%	8%	9%	6%	22%	18%	22%	110
Adopt a policy that requires new subdivisions to provide sidewalks, street lights, and walking/biking paths.	6%	2%	1%	1%	10%	10%	10%	11%	23%	27%	110
Support Park Rx programs	8%	5%	6%	7%	18%	8%	8%	12%	10%	18%	108

Of those actions you rated as effective, please indicate which of the following actions your community is already doing or planning to start in the near future.

	Already implemented	Planning to implement	Not doing, but interested in learning more	Not doing, and no plans to start	Total
	760/	100/	20/	20/	
Build and maintain trails and walking and biking paths	76%	19%	3%	2%	0
Adopt a pedestrian and bicycle master plan	58%	29%	12%	2%	87
Adopt a complete streets policy	46%	29%	21%	4%	84
Collaborate with schools to develop and implement a Safe Routes to School program	64%	15%	14%	7%	94
Create and promote youth athletic leagues affordable for families from all income levels	76%	3%	16%	5%	98
Explore mechanism to acquire and maintain green space and open space	52%	26%	17%	6%	90
Adopt a policy that requires new subdivisions to provide sidewalks, street lights, and walking/biking paths.	67%	14%	16%	4%	84
Support Park Rx programs	17%	10%	60%	14%	79

What is preventing you and your community from implementing these actions?

	Lack departmental support	Lack financial support	Lack constituent pressure	Other	Total
Build and maintain trails and walking and biking paths		100%			2
Provide recreational activities available to families from all income levels					0
Adopt a pedestrian and bicycle master plan		50%		50%	2
Adopt a complete streets policy			33%	67%	3
Collaborate with schools to develop and implement a Safe Routes to School program	10%	20%	30%	40%	10
Create and promote youth athletic leagues affordable for families from all income levels	17%	50%	17%	17%	6
Explore mechanism to acquire and maintain green space and open space	17%	67%		17%	6
Adopt a policy that requires new subdivisions to provide sidewalks, street lights, and walking/biking paths.		67%		33%	3
Support Park Rx programs	13%	20%	33%	33%	15

Are you interested in learning more about community health and the award?

	Percentage
Yes	70%
No	30%
Total	107

In what age bracket do you fall?

	Percentage
18-24	0%
25-34	5%
35-54	48%
55-64	26%
65-74	19%
75+	3%
Total	106

What is your gender?

	Percentage
Male	60%
Female	36%
Prefer not to say	4%
Other	1%
Total	107

What is your race/ethnicity?

	Percentage
Caucasian	87%
African-American	0%
Latino or Hispanic	1%
Asian	1%
Native American	0%
Native Hawaiian or Pacific Islander	0%
Two or more	3%
Other	1%
Prefer not to say	8%
Total	107

What is your approximate annual household income category?

	Percentage
Less than \$35,000	1%
\$35,000 to \$59,999	9%
\$60,000 to \$99,999	31%
\$100,000 to \$249,999	46%
\$250,000 or more	3%
Prefer not to say	10%
Total	100

What municipality do you represent?

	Frequency		Frequency
Alta	1	Mona City	1
Bear River City	1	Nibley	1
Beaver	1	North Logan City	1
Blanding City	1	North Salt Lake City	2
Castle Dale City	1	Oak City	1
Cedar City	3	Ogden	1
Clawson Town	1	Park City	2
Clearfield	1	prefer not to say	1
Cleveland Town	1	Providence City	3
Eagle Mountain City	2	Provo City	3
Enterprise City	1	Richmond	1
Ephraim City	1	River Heights	1
Eureka City	1	Riverdale City	1
Farmington City	3	Riverton	1
Garland	1	Rockville	1
Grantsville	1	Salem City	1
Green Riiver	1	Sandy City	3
Gunnison City	1	Santa Clara City	2
Harrisville City	1	Santaquin City	2
Helper City	2	Saratoga Springs	1
Highland City	2	Scipio	1
Holden Town	1	Smithfield City	1
Holladay	1	South Jordan City	1
Hyde Park City	1	South Ogden City	1
Hyrum City	1	South Weber City	1
Ivins City	2	St. George City	4
Kanab City	2	Sunset	1
Kaysville City	1	SW SL County City	1
Leeds	1	Syracuse City	3
Logan City	2	Town of Manila	1
Mapleton City	3	Town of Stockton	1
Midvale	1	Vernon	1
Millcreek	1	Vineyard City	4
Moab City	2	Total	150

Which of the following best describes the organization you represent?

	Percentage
City Government Elected Official	76%
City Government Staff	22%
County Government Elected Official	1%
County Government Staff	0%
Other	1%
Total	106

How long have you been in your current position?

	Percentage
Less than 1 year	16%
1 to less than 5 years	44%
5 to less than 10 years	23%
10 to less than 20 years	13%
20 years or more	4%
Total	105

Direct Factors

Please use this space if you would like to say more about the extent that city governments have a role in addressing these factors that impact a person's health.

My first idea is trail access. ***** has done a good job at providing connecting trails into neighborhoods throughout the city. ***** is covered in trails. I think trails can impact each one of those issue above in the survey. Obesity, suicide, mental health, etc.

I believe the government along with other partnerships work to make community health a priority in their community as well as provide services or infrastructure to do so.

Health Departments should take the lead in this regard.

City Governments have the responsibility to provide essential services and amenities that affect quality of life - for the positive and negative.

Government's role in promoting healthy lifestyles and overall community health ends with the installation of recreational opportunities like parks, trails, and extra curricular city programs. I do feel that governments at all levels can lead out on public awareness on some of these issues but anything more than this is outside the scope of the role of government, in my opinion.

Cities are uniquely positioned to be the most familiar with the health factors affecting their residents. Our ***** Program is our vehicle to address health concerns. Our challenge is funding for all of these needs

Generally City government is passively involved. We provide parks and walking trails for physical activity. We maintain sewer and water and garbage. All of theses activities impact public health. However we have no expertise in health care and rely on the County Health department for all of these services including Senior services. (Sometimes we forget that).

A city must provide safeguards to the highest extent possible to prevent the spread of infectious disease. This includes notification, education, and provisioning for such safeguards. As it relates to mental health, a city should actively engage and cooperate with churches, school districts, and their community to provide resources that make aware mental health issues and provide resources that help to identify issues and help treat and support those that suffer.

I think city governments primary role when it comes to a person's health is to provide recreational programs and facilities. A secondary role is the distribution of public information about public health topics. However, I think many of these messages get lost or at least very diluted in the sea of information we all live in. If elected officials get too close, the information just becomes another excuse for self-exposure or is seen as advocacy tied to a specific agenda.

Information sharing, leadership, messaging.

Creating space for healthy living to thrive.

Funding programs & activities that support public health.

Regulating/enforcing against conditions or conduct that harm public health.

I believe governments could play a bigger role in improving mental health in communities by using their platform to increase mental health awareness and taking the lead in initiatives/education. The issue is resources.

Outside of basic recreation programming most cities do not participate in this arena. Some communities do more with recreation facilities but overall it has been a contested area the legislature has not delegated nor funded at the city level. The county has traditionally functioned as the health department with these as a primary function. Without funding authorization I am not sure there is either express permission or a mandate for us to function in this role.

We can provide opportunities through recreation programs for people to exercise. But we generally find it hard to build trails and maintain them due to funding. But, other factors we have little ability to impact overall health issue.

City government can help form committees to address things like opioid abuse and suicide prevention by bringing together community leaders, religious groups, clubs, school leaders, and businesses (currently working on these things using Communities That Care formation). But in Utah, City Government input has been completely dismissed when it comes to COVID-19. Unfortunately, COVID-19 has been viewed with tunnel vision by State and County Health Officials despite the fall-out it creates elsewhere: loss of job, complete loss of business/investment, bankruptcy, physical and social isolation, refusal to receive other needed medical treatments due to fear (immunizations/well-checks/mammograms/and even delayed treatment for heart and stroke incidents causing irreversible damage), domestic abuse, unidentified child abuse, children and young adults falling behind in education, hopelessness due to no open-ended restrictions with no reevaluation of compounding circumstances. All of these have long-term affects on health and well-being, yet no consideration has been given to them in the last 8 months. We will be dealing with choices made by myopic, un-elected health officials for many years to come.

City governments play a primary role in setting up an environment and infrastructure for these factors. For example, parks, trails, walkway, bikeways, recreation programs, and activities. However, the organizing, planning, and conducting initiatives and public education on many of these factors is better served through community groups and non-profits.

Learned a lot through COVID-19 pandemic.

Cities can ensure policy allows for sustainable and affordable communities. This includes permitting housing options other than large single-family homes and apartments. Diversified housing opportunities give more people a chance at home ownership and a sense of belonging in their communities, which in turn decreases risk factors for substance abuse, mental health problems, and domestic violence.

A city can affect how people feel about physical and mental health by the way in which they approach city planning and showing the importance of trails, bike paths, recreation programming, health clinics, and mental education for the well-being of a life well-lived. Culture and proper recreation create an ability to have a much better mental and physical life.

The city and goverments should play a minimal role in these factors. They should make some resources available, but let individuals make their own choices. It should be up to the individual to be proactive about their own health and well being.

City government should issue statements and information needed to protect the general health of a community.

Personal health ultimately belongs to the individual. Governments have interest in the health of its citizens because of its contributions to public safety agencies, Fire, hospitals, police, etc.

In terms of physical activity, local government has a role in creating walkable and bikeable streets. Enacting legislation that requires sidewalks or shared roads, reduction of carbon. Education of the importance of mask wearing or mandates.

In my City and County noise pollution is among the most significant impacts. The State prohibition on local control of street use of ATVs is ruining the quality of life for our residents, and in many cases affecting their health.

I am not a health professional. But I believe in following their lead, and if there is something I can do in my capacity to help, as long as they recommend, I am in full support.

The city government's primary focus should be on the community's design and how private space connects with public space to remove barriers and disincentives to healthy behavior. Education and encouragement should be the next-tier tools. And the regulation of personal behavior that negatively impacts the public as a final resort.

I believe this is an important function of city government but there seems to be a great deal of misunderstanding about this in our community. Too many people seem to believe this is an inappropriate role for government.

we are such a small community we do not address these issues

City government in Utah have little to no ability to effect these issues.

We are focusing on what we can do, such as making our city more walkable, including developing trail systems. My city is relatively small and surrounded by other cities, so some factors are more difficult to have an impact on. Take air quality for example. ***** is an idle free city and we have recently installed charging stations in the city center. Hopefully these steps will help improve our air quality but we are still more affected by the air that comes and goes from the surrounding areas.

We can provide opportunities but cant force behavior

Government has a role in providing diverse recreational offerings that meet the community's needs. Tax payer supported programs enable access that can't be met through the private sector.

I'm not a fan of government taking even more control of people's health choices. There are numerous programs, outreaches, education, etc. already in place but it boils down to the individual being willing to participate. Our city provides parks, trails, fresh food via a farmers market, and more.

I feel that our city can help our citizens to improve their health by providing a robust trail system, attractive parks, and supporting local programs that address community health, such as suicide prevention and opioid abuse. We can also ensure our first responders know what to look for and how to react to a mental health crisis.

There is obviously a difference between a large city with 500,000+ people and a small city with less than 10,000. This survey would do well to differentiate city size (and if next to other cities or somewhat stand alone).

I have been considering creating a Health Department for our city because I feel we need to pay more attention to the overall health of our residents.

While a person's overall health is a personal responsibility, the local government can be of great assistance.

We are role models who should be setting positive examples. Employees should be masked and socially distancing. Buildings should be safe places for visitors. Events held should happen only if safe for everyone.

We are a small town and our priorities are somewhat different than larger towns or cities .We are dependent on ***** for most of our health care, except for dental care. I have had COVID-19, as has my wife. Our medical services took care of us as did our public health nurse. ***** is finding ways to use the funding from the state but are having some difficulty in qualifying for those funds. We could use help in this area. It is important, but we can't do everything with the resources we have available.

The problem goes beyond the city limits. It's a much wider problem. If we as a city impose mask requirements, the people may shop in our city but they work in another and live in yet another.

City governments can provide public education and opportunities to participate in good health activities. Not only do education and activities provide opportunity for improved health it also creates a greater sense on connection between city and residents and among residents themselves. This leads to improved safety, lower crime rates, and happier citizens.

We can provide a means for improving the situation in some of the categories just by our normal town operation. I'm speaking only of our town. We don't

have a lot of resources.

Government can add bike lanes, parks etc. but people have to want to use them. Government can have educational programs about opiod use etc., but people still have a choice.

So government can help provide access and information but the effect is only as good as residents choose to be involved.

The largest impact to my community has been to mental health. This has lead to more substance abuse, more domestic violence, and more depression. We are small with very limited resources. We are just not able to perform the role that cities should be performing.

I think this is really a questionnaire to understand perspectives on COVID in relation to many things pertaining to overall health in our city. Many of the things mentioned in your survey I find much more concerning than COVID. Whether right or wrong I have almost zero personal evidence around me that COVID is real beyond being a cold and flu strain running its course. This line of thinking may not be popular but again in the long run most of the other concerns that were referenced in this survey are much more important to me for my city than COVID. Maybe I'm being sensitive to those that are sensitive about something no one can really make sense of...both what is COVID and how in the world is our response as a society making any sense. Thanks for a place to vent a little.

We can encourage people to live healthy lives. We can provide recreational opportunities for them. Through community development, we can bring in businesses that promote healthy lifestyles.

Government has a role in each of these things when it comes to zoning well, masterplanning with the public, collaborating with partners to educate the public and disseminate resources. Government plays a role in validating active transportation to the level of roads. These paradigm shifts enable active residents. Government has a responsibility to plan roads well and provide information that allows people to use them well. Covid-19 should be self regulated. The state of emergency for cities to get their processes in order for a pandemic has passed. During the initial emergency state it was the most important factor. Now that testing, medical supplies, alternative hospital locations, partnerships with resources are available and determined, mitigation no longer falls to the government, but back to the people. Educations, following current data, and distributing data is critical. However, it is less of a current issue, and more of a political crisis than an health issue. The data that is being given is that capacity of hospitals has not gone over the typical numbers. Cases are high deaths are low. People have been given all of the tools to protect themselves at this point. Government cannot effectively enforce, nor can they effectively monitor the rules, nor can they make them with out arbitrary application. The other health crisis has been increasing according to the current data being shared, except for 1 and 3--physical activity has improved, and air quality improved with cars off the road, and business shut downs. Governments role in these should be proper planning and public workshops. There are so many opportunities for public private partnerships with many of these to have broad success. In all of these, governments role is very limited, but is a piece of the puzzle.

It's the state's job. We can just help them as needed.

People should be trusted to govern themselves when it comes to their personal health. We need to end the expectation of nanny states. Also, I mistrust this survey and those behind it in regard to impartiality and discretion.

According to the Governors' Office of Economic Development, Major companies are now look to the health of the communities they are considering for a company location, (less sick days, better production, possible lower insurance premiums

In my experience, health has traditionally been the purview of health departments. Local governments (cities in particular) do not have the relevant expertise. In order to provide this service, we would need to hire doctors and other subject matter experts. Eventually we would end up recreating health departments that already exist. This effort may prove to be less efficient than focusing on getting more out of county health departments.

We believe government may only make suggestions to individuals pertaining to their health issues. We are not in the medical industry and not to interfere with individuals rights as it relates to personal health issues. It is not governments job to get involved in and socially engineer resident's behavior. The government's job should be limited to offering opportunity, if said opportunity is financially prudent and benefits a majority of the population.

Cities can encourage healthy behaviours through amenity planning such as parks, trails, bike paths, activities, events, etc.

We installed a walking trail through the middle of town, we also opened a wellness center for exercise. We have plans to use covid impact money to modify city bathrooms to be more safe from disease spread. We are in the process of getting better monitor equipment and better ppe for our local city ambulance service. We have ordered disinfectant spray guns, and chemicals, city council meetings on zoom.

Public health is primarily the role of county and state governments. Cities' efforts are peripheral, including parks and trails.

Town of 300

As a City we can set standards and ordinances to protect residents. The zoning can allow for the health facilities.

The city has a responsibility but it is individuals that have the responsibility of their families. We can offer programs, COVID screening and testing, encourage Mask wearing, social distancing, etc. But we cannot make people do things. We can facilitate and courage but people will do what they think is best for them.

Public safety is a role of local government, public health is a critical piece of public safety

Setting an example of safety.

Being proactive in promoting good habits in our community to counter the virus. Newsletter.. public service announcements..etc

Water sewer traffic communications all are important.

Social Determinants of Health

Please use this space if you would like to say more about the extent that city governments have a role in addressing social determinants of health.

You guys need to review what City Government in Utah actually has jurisdiction over. Funding, etc.

Yes on clean water, garbage pickup. Yes on handling crime. These are all valuable components, but how do we expand our role as cities, and therefore our budget, to deal with these other items.

While the city would like each of their residents to have these social determinants, it is impossible for a very small local government to have the finances to do them. We try to provide an environment where local residents can be successful.

We rely on ***** Healh Department. We don't create educational opportunities, food sources, medical services, employment at a municipal government level. One of the options should be "N/A"

We maintain police and fire departments. We work with UTA and UDOT to improve transportation. We do not do a good job of educating residents regarding transportation needs and future projects.

We have been trying to get a food bank in place, but we don't have a space to do it and little support from the community to fund it, therefore, as a council member, I have been working with the local school principals to implement better access to supplemental food at school for children and teens to take home but COVID has stopped all of that.

We are limited to control individual choices, not large enough to provide personal transportation, not able to be involved in private sector wage, and housing issues

Through planning and development codes, cities have a role in shaping the built environment to be more conducive to opportunity for all residents in education, employment and recreation. Cities can also coordinate resources and volunteers to assist underprivileged residents

These are all areas that Cities do not have explicit authority or funding. Generally these are addressed at other levels of government.

The private sector can handle most things. Let's keep the government out of it and let the private sector innovate.

Please stop pushing mass transit, high density housing, and seeking to urbanize all of our cities.

The philosophies of New Urbanism, which are rife in this survey, are designed to destroy the suburbs. As an elected official, I will stand against them at every opportunity. Let people live how they want to live. Stop trying to remove their yards, open space, and cars, and focus on the basic necessities of government. Access to clean water, roads, and public safety

The items listed above seem to be more under the control of the local or county governments.

The fact that your study is even asking 90% of these questions, indicates that we are not on the same side of this issue. I am on the side of self agency, and of privatization, and of limited government.

There are so many opportunities today for almost everyone (except perhaps white males).

Government needs to back off and restrain themselves, and quit trying to manipulate outcomes

The citizens elect town leaders to help them through problems that affect their life liberty and happiness.

Some of the above issues a city is charged with addressing as core functions, such as safe drinking water, crime, transportation and housing. We can promote other programs by bringing in farmer's markets and encouraging public health programs.

Productive citizens provide the best for self and families.

Our town is mostly a bedroom community so most of these issues are taken care of on a county level. We do have a certified water operator. Our drinking water is up to normal standards.

Our city does not have adequate internet service and the major internet companies have indicated no interest in expanding their footprint in our city. Therefore, the city is exploring the option to own our own internet utility. Properly funding police and other first responders can certainly mitigate the damage done from crime and violence but the eradication of these behaviors takes place on a very personally intimate and familial level. Transportation planning is within the purview of city government as is clean drinking water. Understanding the natural factors that contribute to the bad air quality we have, I'm not sure how comfortable I am with government getting too heavy handed with controlling emissions in hopes of cleaning up our air. Everything comes with a cost. Im not sure what the word 'access' used above is referring to? Access meaning it is available or access meaning government provides a way to obtain and experience those items listed above?

One thing we have done recently is to get our own full service grocery store within our city limits. Until this time our residents had to leave our community to get groceries. I believe this improves social capital in our city.

Much depends on the size of the city. A large city will have much more influence, as well as the resources to have such influence.

Market forces, alas, have proven inadequate to provide basic levels of safe and affordable housing, income, health care, and a safe and healthy environment. So, it becomes the role of government.

Many of the items are best addressed at a state or federal level.

Local government is charged with providing essential services to health, including public utilities (potentially including reliable internet during COVID times), reliable roads, public safety, clean water, etc.

Leadership & living consciously.

I want to be more helpful to our residents.

I feel like cities and government should focus on these things because they are important. However, their roles are limited, and while they should actively pursue the connections to fill the roles they do play, I do not believe they are the main body that should regulate or enforce these things.

I believe local governments have an obligation to address negative social determinants.

Free market enterprise does not need government intervention.

For most of these factors, cities rarely provide solutions. However, we need to take extra care that we do not create policy that makes these factors worse.

Facilitate what we can but people still have to choose and do.

Educating the general public about housing instability in our community and engage in conversation on how to address this challenge.

City governments are effective at fostering the opportunity for social determinants to be positive, but effective provision of these social determinants is better accomplished through community programs and the private business sector, or a partnership with the city and private business.

Cities should not lead out on these issues but partner with other organizations whose primary focus is the health of the residents of Utah.

Because we live and interact in a somewhat crowded area, our city acts as a catalyst to bring people together to create solutions.

All are important, but nearly all exist for my community.

Again, the individual needs to be open to using these opportunities.

Again, most of these are so far outside of the roles that cities play. We are not equipped to deal with these, and I'm not sure we should be. Do cities need to

be everything to everyone? How will we pay for these additional services?

Are there any other thoughts you have about community health you'd like to share?

You are asking questions that have significant changes to local government. Frankly the legislature and the tax bull dogs fight whenever cities try to expand recreation programing including fitness programming as they compete with the free market. Why not have the state subsidize Vasa or other health clubs at the state level for equal access if they are going to be in opposition to Cities offering these types of service.

Your questions about farmers markets and food stamps are a bad idea since foods that are sold in farmers markets are not regulated per the changes to foods produced and sold at those events. Thus your desire/questions to have "farm fresh food" also conflicts with having foods produced without the health departments oversight since food regulations are thrown out in these venues. Cities are happy to provide the services we can as dictated by out residents. Most communities are left with a confused policy on most of the issue addressed in this survey as the legislature punishes us one year for doing it then asks why we are not in the business the following session. Frankly the County is better suited for the vast majority of the health related services measured in this survey as they have authority and the mandate to do so.

We've already participated in the ULCT Healthy Utah program for a number of years (hence our farmers market, trails, more parks & open space, etc.).

We currently have a bond to finance a 50 acre regional park on the ballot, but

have received quite a bit of resistance from Libertarians who are against any increase in tax for any reason, and the elderly who say they do not go to parks. Reasons and ways to be healthy is a mindset that is not usually high priority for many people.

We also have a vocal group on Facebook, that includes a couple of our council members, that are against affordable housing, claiming that it will decrease their home values, and increase crime. They accuse anyone who is for apartments, townhomes, or even smaller single-family home lots, as being in the pocket of developers and participating in fleecing the city for financial gain only. The fight is very tiresome and having our names dragged through the mud is hardly worth the compensation we actually receive for our position. If there is support in helping to combat this onslaught, it would be much appreciated. Especially with the State threatening to condemn and fine us for not implementing an affordable housing plan.

We are already pursuing a Healthy Utah designation.

We are a small town. We have a large park that offers a lot of space for activities. We have little traffic and our roads are wide. There is plenty of room for pedestrian and bicycle traffic. We are working on sidewalk maintenance and adding sidewalks where they are needed.

This survey has already raised my awareness. Some great ideas.

These are important topics, but they are mostly irrelevant to cities. Other agencies, either federal, state, or county, currently provide most of these services. I think cities function best when we stay in our lanes. Perhaps this effort would be better spent in making our local health departments more effective? Perhaps the reason many of these things might go ignored is because our tax structure in Utah makes it so that we barely have enough money to address core services like public safety and streets, that the rest of this stuff will never become a priority.

The Health Department has little to no value to our community. The only function they are funded to do is inspect businesses before they open. Other than that, they have told me they don't have the resources to help with any sort of prevention or standard of living issues in our community. We need a functioning health department that can assist with all levels of health in our community.

Some of the programs mentioned seem heavy-handed or create a serious risk of raising the cost of housing. The biggest issues facing community health right now in our state tend to lie with existing policies. If we can find ways to ease restrictive housing and development policies with the goal of reducing unnecessary costs and linear feet of infrastructure per housing unit, many other remedies will naturally follow.

Municipal government is tasked with Securing the provision of clean and properly pressurized water, reliable and safe electricity and other utilities, wastewater treatment, roads, and other basics. Most of this other crap that you are proposing would only serve to increase taxes, which again takes the choice away from the people on how they would like to live and how they would like to spend their Own hard earned money. It also creates gentrified, overly regulated communities which make it difficult for those in the lower income brackets to live and work. So it is counterproductive.

Mental heath needs a lot more focus from all levels of government.

I'm a fan of being active and healthy!

I love the idea of an award. Our City would be very interested in applying for that.

I am very concerned about the state of Utah, Kem C Gardner, and home developers like Ivory trying to insert themselves into the policies of cities and towns. The mass change to high density in SLCo and Provo has made Utah a much worse place to live. Maybe recognize the New Urban policies you are pushing to implement seek only to pull us all down to the least common denominator.

Let cities set their own policies, and please stay out of it.

Government is NOT the answer!

Funding is key to getting these things done. We need to be able to apply affordable housing dollars to all quality of life concerns.

***** has a larger than average elderly population, not a retirement community, just a small town where people have lived their whole lives and still live here. There is plenty of "room to roam" whether it be around town or in the hills surrounding the town so there is ample opportunity to get plenty of exercise. Many do and some form small groups, but as they age and some of their friends die, it becomes harder for them to continue.

Currently in ***** residents are feeling under siege from the motorized activities that are taking place in our community. We have been left without legislative power to require UTV's to not drive in our neighborhoods. More than any other time our residents are speaking out on the auditory barrage they are dealing with night and day with two and 4 stroke off-road vehicles and the detrimental effects of being able to relax outside. Sound quality is also in the mix with clean air and water.

At the end of the day, local governments cannot force residents to be healthy. It is a personal choice. They can provide programs, facilities, and other opportunities that can facilitate good personal health decisions but they can't force it and I don't think the general public wants the government to force them to be healthy. Similarly, local governments cannot control the market to improve many of the factors that were referenced in this survey (i.e. affordable housing, etc.). Local governments can do a lot to improve a community but everybody in the community (individuals, private businesses, developers, non-profit organizations, etc.) needs to be a part of the solution. Local governments, alone, cannot fix all of the problems related to community health.

***** is small, in the mountains, but close to population centers. We have unique challenges and opportunities.

Appendix D. Plans to Address Health Factors

DIRECT HEALTH FACTORS

Increased physical activity

yoga classes, nutrition classes, walking-I work with the senior population.

working on drafting legislation and codes to prioritize "complete streets" for future growth.

When are spending an increasing amount of funds ensuring the trails in our city (we have 22 miles of trails) are well maintained.

Wellness center available to all citizens.

We plan to continue increasing our open space and recreation programs.

We have developed a vast trail network, improved parks with play structures, a great reception center, improved golf facilities.

We have a trail master plan and have aggressively pursued it.

We are reviewing all our parks. We are building a skate park. We are changing one park into an All Abilities park. We are putting in more than 11 miles of trails in our mountain. We hope to put more trails or walking routes in and around Ephraim.

We are increasing or recreation department to include activites for kids, adults, and senors. We are also in process of trying to build a health and wellness center. Indoor walking track, cardio room, gyms for volleyball, basketball, dance, swimming pool, education room etc.

We are developing a Park, Trails, and Recreation master plan, to help promote more physical activity.

we are building a new park, with trails, bmx track, skate park, and sport fields.

Walking & hiking more.

Walkability. Our city center is designed for pedestrian access, and new construction projects such as the rebuild of the old ***** Mall will have green space and trails. Also the city is currently working on a canal trail project.

Updating master planning for Parks, Trails, cycle paths with the focus on improvements to increase participation and usability of outdoor physical activities.

Trails, parks, outdoor recreation options.

The is implement a far reaching active transportation plan, and has incredible Parks and Recreation programs.

The development of city wide trail system.

The current development of an all-abilities park as well as additions or enhancements of current parks that encourage physical activity from all citizens, even those who do not participate in sports.

The City has several events geared towards increasing physical activity. We also try to provide facilities to help with physical activity.

Revamping of the City's recreational offerings.

Requiring new housing developments to include walking/biking/jogging paths.

Recreational programs, more trails and bicycle access lanes, more recreational stopping points.

Providing a wide variety of trails and pedestrian infrastructure.

Provide quality exercise and recreation opportunities through the Parks and Recreation Department.

Provide more opportunities to get people involved in outdoor recreation. We have added more pickleball courts, and trail improvements for use by the public. We also provide a outdoor 5k Race series to encourage exercise.

Parks, Trails, and Rec Plan and Improvement.

Parks, Trails and Recreation Master Plan being developed to increase the number of facilities and enhance a connected city; walkable, bike able.

Parks, bike trails, rec center.

Parks and trails skate park and pickle ball courts and Rec center sports.

Park access, improved trails, community activities.

Offer a wide range of programs to the community. This includes outdoor fitness classes and a wide range of programming to get people moving.

New parks, pickleball courts, trails.

New parks with outdoor exercise equipment and trails.

More trails and parks are in hte planning stage in our city. We have a newly formed acrtive tranpsortation committee which is working on a strategic plan for making our city more active friendly.

More trails and bike lanes.

More recreational programming and virtual physical activities.

More places to recreate. Trails. Sports Programs. Parks. Places to walk and be outside. Etc.

More parks, trails, and open space opportunities in my city.

Keep the streets safe so citizens feel free to go for walks in the community, keep park in good shape so youth and families want to visit and use facilities.

Just opened yp a new pedestrian trail extension. Entered an agreement to sponsor free excercise classes in a city building.

Increasing our trails and park offerings and publicizing them.

Increasing our Parks and Recreation department offerings, and trying to secure a bond for a regional park.

Increased priority on parks and trails development.

Increased community resources.

Increase trails and parks in our city.

In planning and zoning we have created human scale development, and are validating active transportation. There is a heavy focus on first and last mile. The city has implemented smart city design to integrate various housing types next to uses that join people to work, school, recreation through these active networks and housing plans. For public engagement the city runs competitions and connection through various apps such as strava, and other programs to get people on their bikes, onto the trails, and connecting with others. The city has created connected trail systems, and communal settings and individual recreation settings to meet the needs of every age level. The city meets regularly with committees in the community to better serve our demographic with these concepts. The city partners with universities and private companies on active solutions for residents.

In negotiations for a community rec center.

Improving walking paths, building a new trail, providing a pickle all court.

Improving trails and preserving open space and active transportation options. More bikes and scooters for citizens.

Improving parks and outdoor recreation.

Improving park facilities for more recreational opportunities and walking/ exercise areas.

Improve parks areas for increased usage.

Funding parks & rec, studying underserved areas of the community.

***** City has one of the best trails system in the State. These trails are constantly used by our residents for walking and biking. This has been a priority for over 30 years.

Expanding our trail system.

Expand parks and recreational opportunities.

Encouraging use of our many amenities i.e. recreation center, parks, trails, with Covid-19 get out and be acitive.

Development of parks, trails, and recreation programs.

Developing parks with a focus on playful exercise and developing bike/ walking trails.

Developing more trails, encouraging more exercise etc.

Developing an active transportation plan.

Despite budget constraints, continuing to offer as many of our recreational services/facilities as possible within COVID protocols. Voters willing, institute RAP tax to better fund recreation

Creating a walking program for our trail system.

Continued construction of trails to facilitate more walking and cycling.

City sponsored physical activities.

City center park plan. Bike lanes. Theme of 'Connected by NATURE' for our city.

Building trails in future have put in frisbee golf course, new pickle courts, bouldering wall. New weight set and treadmill for fire department.

Building more parks, and bike paths.

Almost every development has a trail connection.

Additional trails, parks, outdoor exercise equipment in those facilities, rec programs.

Additional bike/walking trails in the community, additional neighborhood parks, improved city recreation programs.

Adding additional prickle ball courts and parks.

Reduced opioid misuse

Working with the local clinic.

Working with the county health department and police.

Working with county and sheriffs dept.

Work with police and local health organizations.

We support several organizations in town that address opioid abuse.

We are partnering with a local company that offers an opioid nullifying solution.

We are looking into purchasing a NarcX disposal container for opiods.

The city puts out education material and data in coordination with the local hospitals, public health systems, and federal health networks. The city has provided narcam, and narcx to our officers, as well as with in communal settings for disposing drugs. The city collaborates on public private

partnerships to get narcx into each home, and reports on our needs to our health systems. The city partners with several private entities dealing with crisis, physical therapy, addiction, and others to engage in preventative and post engagement.

***** City is working closely with ***** CTC to help reduce the opioid epidemic

Public awareness.

Multiple programs with our Sheriffs here to educate our students on this important topic. Drop boxes.

In conjuction with Use Only As Directed and ***** Communities That Care we are involved in putting educational signs and installations in our parks.

Grow our local paramedicine program within our fire department.

Education (2).

Drug Take-Back day with our Police department. Plans for Messaging in local grocery stores is currently underway.

Drug drop offs in city hall, EMT informationals.

Diversified, sustainable, and walkable development policy changes turn more would-be renters into community stakeholders, which in turn increases the sense of belonging and purpose and should help reduce this risk factor.

Currently have a group meeting to address this.

Community oriented policing is the only tool we have to address this.

Improved air quality

Working with WFRC and state officials on reducing traffic congestion. Making my city a better city in which to work from home.

work with local transit district to implement additional routes/stops.

We plan to add electric fleet cars to our inventory. More energy efficient building upgradess.

We have dedicated staff for monitoring and addressing air quality issues.

We are working on a live work and play area that is right by transit.

We are planning a transit hub in our business park that will take people directly to the commuter rail station. This will decrease the need for vehicular traffic in the Business Park for those who are employed there.

We are migrating to cleaner vehicles..

We are looking at what causes the issues on air from commercial, and making areas more walkable.

We are developing strategies to reduce idling both on the roads and in parking lots.

We are currently in the process of bringing natural gas to all residents in town. Many of them are currently burning wood or other high polluting heat sources.

We are creating a mixed use urban downtown area that will focus on transit use and utilize multi-modal transportation.

Trying to better understand and mitigate dust control from gravel pits.

The city has worked together with companies to improve regulations that help sustain long term resources. The city focuses on varying modes of transportation, and creates connection that validates these active transportation solutions. The city does joint meetings with surrounding cities to connect these alternative modes. The city puts out information on sustainability, and offers tools and workshops through private partnerships to teach residents about air quality; ie. business regulations, ways to handle automobiles better, how to use alternate modes, tree planting, mitigating burns in agriculture and using innovative methods for farming, etc. Additionally we have created public private partnerships for free ridership or subscription ridership models for other modes of transportation.

Reduce idling. Support sustainability initiatives on carbon emissions, renewable energy.

Providing bus service to residents.

Preserve open space, improve transportation routes, local jobs and shopping, walk and bike paths.

Joining state compact.

Increased monitoring and enforcement of air quality relating to construction, mining.

Increase our involvement and future agreements with UTA.

Improving public and active transportation options. Electric fleet for city vehicles.

Improved regulations re refineries and sewage treatment, better communications, daily attention to pollution events, more tree plantings, less driving, promote anti-idling, promote more walking.

Idle free signs, other publicity to get people to turn off the engine. Charging stations for electric vehicle.

I have a sustainability committee and a clean air task force. We have monitors on many of our buildings we watch and record on a daily basis.

Encouraging EV adoption through charging infrastructure.

Decrease all the burning of local fields.

Clean Air Toolkit. Prioritization of Transit. Update of zoning to encourage walkable design and a reduction in total miles traveled.

Assess traffic decision-making and mitigate motorist travels by providing alternative means of transportation.

Anti idling; green building incentives; HB 411 renewable energy program; sponsored charging stations.

Aggressive climate change action. In process of curtailing noise pollution to the best of our ability.

Admittedly I'm not a huge fan of public transportation but we are doing a lot to facilitate that and making our community walkable and very bike friendly.

Improved mental health

Working with PG cares to get a similar program in *****.

Work with S.W. Mental Health to implement more QPR.

Work with local organizations.

We work closely with Communities that Care.

We support the Southwest Behavioral Center.

We sit on varying hospital boards, and work with our residents on the education we receive through out notification apps, newsletters, facebook lives, etc. We partner with local mental health agencies to continuously have the best information and data for residents to obtain and use. We have provided opportunities for people to participate in public programs through tele-services to ensure there are abilities to participate both publicly and privately depending on the individuals needs. We have community volunteer task forces that help put on small community gatherings to grow civility and connection in interactions.

We partner with communities that care.

We have changed our Recreation Department from one that was focused solely on sports for children and are now making sure recreation is for everyone in our community. All ages, all abilities, all interests.

We are working with ***** School District to wrap up our first round of Emotional Self-Reliance seminars.

We are trying to be better neighbors and communicating with our people.

We are just starting to look at this.

Public info campaign/sharing resources that are already available.

Provide education and resources sponsored by the city but in collaboration with state mental health experts and organizations.

Program instituted to help staff with PTSD and other stresses that have come about this year.

Parks, Trails, and Rec Plan and Improvement

New partnerships and additional emphasis on connecting people to therapists.

Looking at changing State laws to prohibit UTV use in our resort community and supporting Equitable housing solutions.

Just began a coalition with all the academic institutions. Had our first meeting and wrote our mission statement. We are taking this very serious and ready to put a unified effort in ***** to make a dent in mental health in *****.

Join ***** County Health programs, provide outreach to those in need, improve police training for mental health calls rather than criminal events

Increased cultural and community connections, communication, and social opportunities.

I believe most of the mental health resources are through ***** County and private insurance carriers.

Held a virtual Mental Health fair with professionals speaking about different topics and ending in a community Zoom call to help encourage improved communication, identification, and ways to connect within families.

Have more things outdoor activities, bike, hike and climb.

Games. reading. puzzles, music, social interaction when we can. phone calls and notes to check on their well being.

Encourage participation in activities.

Education initiatives; increased funding for police mental health units to respond with officers; support for free community mental health clinic.

Diversified, sustainable, and walkable development policy changes turn more would-be renters into community stakeholders, which in turn increases the sense of belonging and purpose and should help reduce this risk factor.

Development of parks, trails, and recreation programs. Partnering with community groups for public education and awareness.

City sponsored physical and mental health activities.

All of the above: jobs, recreation, social events and activities.

Again programs in school to address and identify for early help if possible.

Suicide prevention

Working with PG cares to get a similar program in *****.

Working with County through communities that care programing.

Work with mental health organizations and police.

Work with local agencies and non-profits on more education and outreach to the community on the need and data to show how it negavitely affects our community.

Work closely with senior program encourage participation in local programs.

We work closely with communities that Care. We have trained staff and have offered to the public suicide prevention training.

We work closely with Bonneville CTC and they promote some suicide prevention messaging.

We support a specific staff member at the Southwest Behavioral Center that focuses on suicide prevention.

We sit on varying hospital boards, and work with our residents on the education we receive through out notification apps, newsletters, facebook lives, etc. We partner with local mental health agencies to continuously have the best information and data for residents to obtain and use. We have provided opportunities for people to participate in public programs through tele-services to ensure there are abilities to participate both publicly and privately depending on the individuals needs. We have community volunteer task forces that help put on small community gatherings to grow civility and connection in interactions.

We partner with several nonprofits who specialize in suicide prevention.

We partner with communities that care.

We are just starting to work on this.

Twice yearly educational seminars for parents and students. Meet with schools yearly to determine needs and how the City can support.

Tied to our new coalition plus working with the school district and the police department and ***** Mental Health.

The same program will be used and available to all staff.

See above answer to Mental Health.

Recent suicides are prompting the need. We have not yet came up with a game plan.

QPR training throught the community and schools.

Public info campaign/sharing resources that are already available

Public awareness.

Police and town staff training.

Partnering with community groups for public education and awareness.

Offer training to identify at-risk individuals and support (mainly through professional groups).

Messaging inclusion, leadership, awareness, outreach. Fund training and programs.

Improve participation by youth in civic events, more foster care families in our city, support groups for Covid detainees

Holding QPR suicide prevention training seminars for city employees and for the broader community.

Greater emphasis on suicide prevention training with local behavioral health partners.

Education initiative; funding of school resource officers to assist students; support for free community mental health clinics.

Diversified, sustainable, and walkable development policy changes turn more would-be renters into community stakeholders, which in turn increases the sense of belonging and purpose and should help reduce this risk factor.

Community programs for help.

Communities that Care, school resource officers.

Being more aware of those around me looking for signs that they may be troubled or stressed.

Facilitating QBR training for person-resources within the city who work with individuals with mental health issues. Provide online resources for parents that that will help them identify the behavorial signs to prevent suicide. City sponsored education for parents and community leaders.

Chronic disease prevention/Reduced obesity

Working with our local hopsital and health agency to educate the value of reducing your weight for a better and longerm life.

We work with the local school district to offer access to the high school gym, especially for seniors.

We have combined our health model planning and private partnership educational resources to help reach out and plan for these issues in the community. We have started communal and community gardens around the city, and partner with volunteers and universities who are teaching about health when it comes to food and lifestyle.

We are using our Town hall for an exercise class.

Tougher but making our community more activity driven or at least that option should help.

This is tied to our big push to get out and move with our Recreation center, parks, trails.

Similar to the above, we are encourging activity in all populations, especially vulnerable populations.

Promotion of biking, walking, running events and individual daily opportunities to move!

Offering a range of fitness classes from low impact stretching to a walking class. Trying to offer programs to all fitness levels.

Modify facilities.

Increase walking/biking trails for active and physically impacted individuals

Expand parks and recreational opportunities.

Efforts to increase physical activity and improve air quality.

Educational and prevention programming, increased community resources.

Eat healthy & exercise.

Development of parks, trails, and recreation programs.

Again city sponsored activities.

Activities at parks and promote fitness programs.

Accident and injury prevention

Work with our employees on accident and injury prevention.

Work with local health organizations.

We try to keep all our venues free from harmful things.

We have a safety committee that meets regularly and rewards employees for ideas that will improve safety.

We are working with our residents to complete sections of sidewalk to improve walking safety. We also painted large "STOP" letters at an intersection where some people weren't seeing the stop sign.

We are very vigilant in doing what we can do to prevent accident's

We are putting in sidewalks and flashing lights where the Rail trails crossing ***** Lane and other crossings in the city. Our trails are being use a lot more with COVID.

We are developing a Transport Master plan to reduce accident and injury.

Transportation master plan is being updated to consider significant new development.

Timely repair of any dangerous condition noted on public property. Notification of owners of code violations on private property.

This is a daily effort. We try to strictly follow national federal standards for road and street signage in order to prevent accidents in our City. We also encourage residents to obey speed limits through traffic enforcement.

Sheriffs.

Safety features at our city park are being upgraded. So are street crossing signals.

Review intersections prone to accidents and close calls; pre-disaster mitigation plans.

Purchased new sidewalk grinder, major sidewalk repair/replace. New safety award program and meetings .established new drivers program. Two new snow plows. Major investment if fire department ppe.

Public awareness.

Our new parks have added safety features. Monthly city newsletter includes articles from Fire and Police Departments addressing ways to reduce accidents and injuries.

Keep roads, parks, recreation facilities in good safe condition.

Keep our community safe on our streets and buildings.

Increased police presence and enforcement of laws and regulations

Improving street designs, reducing dependence on the automobile

Improving our infrastructure. Wildfire action plan.

Improved transportation routes, especially at intersections, Improved wildlife migration routes to prevent animal/auto accidents

Implementing robuster awareness program for high risk departments

I have tasked our police department to be proactive. They are running a great campaign letting Provo citizen's know Sunday nights where the police will be giving tickets for Monday due to high accident warnings. Also, all this information is available on our Police website. Put your phone down is a new campaign we have started working on.

Here we focus on infrastructure investment, safety walks to school for kids, clear planning guides and signals with distribution of information for new residents. we work through out social media platforms and engagement tools to discuss trends our enforcement officers see or that has been reported to the city.

Engage accident prevention entity through liability insurance provider and increased code enforcement.

Enforcement of regulations such as building safety and traffic safety. Also routine inspections of public facilities such as playgrounds and community center.

EMS programs.

Careful traffic engineering of new development and re-engineering of problematic intersections.

Always a concern. We keep our buildings free from clutter, crowding, rugs, excess furniture etc. to provide safe walking area.

Address infrastructure and and traffic control devices to make traveling within the community safer.

Additional traffic signals and studies to determine needed modifications. Also increased law enforcement traffic patrol.

Traffic control signs, speed bumps in school zone.

COVID-19 mitigation

Working with our local municpal government and county employees to educate and encourage following gthe CDC guidelines. Working with our local univesity and school district to hlep them mitigate the affects of COVID-19.

Working with CARES ACT funding to facilitate disease prevention with public and first responding departments.

Work with local health department to develop plans for group activities.

Work with city staff and local health organizations.

We use our website and social media to share COVID-19 related information such as accessing health services.

We use our city digital signs to encourage mask wearing and are changing our city events to virtual events with fun at home activities.

we take temps when they come inside the building, masks are mandatory, sanitizer is readily available, surfaces are disinfected, meals are prepped in a sanitized kitchen and delivered for take out, we shut rooms where we can't use sanitizer-quilting areas etc. Our seniors health is of the utmost importance.

We have prepared to supply residents with masks and sanitize our playground equipment.

We have partnered with the county to seek out businesses that have suffered a loss, we look at there actual losses and try and get them some relief money.

We have installed barriers at city hall, and will have a safe Halloween activity for families.

We have had a mask mandate but now only have a mask resolution. We also have an active education program.

We have cut way back on our public gatherings. We have actually increase our total number of events, for mental wellness, but decreased the amount of in-person or high-touch events.

We have been holding online meetings so at risk residents can attend. We are cleaning our town hall more often. We are encouraging residents to follow state guidelines.

We have all sorts of mitigation efforts in place so that we can continue to operate programs & facilities safely.

We continue to Sanitize high touch areas of the city, and continue to do what we can.

We came out fast and furious with our Covid-19 Website and plan. We have kept it updated daily and have constantly pushed out Campaigns, to hit the "hot spots" causing our uptick in numbers. We are seeing great decreases.

We are trying to get everyone to follow the guidelines for controlling this pandemic.

We are providing PPE to residents and funding public safety efforts.

We are providing information to our residents about staying safe and healthy.

we are making changes to the operations of the city to increase our ability to operate remotely and reach our residents without requiring them to physically come to the office.

We are holding many of our meetings over zoom and encouraging residents to attend by zoom. We also require masks and social distancing in our City facilities. We are accommodating employees who need to be home with their children because of school schedules.

Using state and local guide lines.

Using CARES Act funding to make certain facility improvements in the mitigation effort.

Use of Cares Act money to provide clean and durable areas in our buildings. Provide safe environment in order to hold meetings. Allow staff to work from home.

Updated information on covid. City offices closed to walk in but available by appointment.

The Town of ***** is a resort. There are many, many issues to deal with including transit, lodging, lifts, food and beverage, and risk of road closure because of avalanche issues. We are working with many agencies and people to address these concerns. But they are to some extent impossible to manage.

The city provides paid leave for COVID-19 absences.

The city has located emergency hospitals, put financing away for resources needed for emergency situations, provided detail and data and locations for resources, testing, and tools to protect residents. The city has transitioned business models with local companies to meet needs and keep economy going. The city transitioned events and created a work task force to meet community needs. The city provides a website for the latest information on covid, and continuously send out notifications on ways people can engage to provide solutions to the issue. The city participates in meetings across the state and with local cities to help instill confidence verses fear, and brings the onus back to the people.

Support of State & County guidelines. Focus on city employees.

Stream our city meetings online so people do not have to congregate to be involved in city business. Offer hand sanitizing and masks for those who do attend in person. Keep the public at least six feet apart during meetings.

Socially distance & wear a mask in public & limit large group gatherings.

Social distancing, Cares Act Funding Grants to businesses and community partners.

See Cares Act.

Requiring mask wearing in all businesses, social distancing. Distribution of masks to residents and hand sanitizer and disposable masks to businesses.

Require masks.

Reduce the amount of large gatherings and provide alternate forms of participation in community meetings and events.

Promote health dept guidelines and inform the public as to the changing status.

Promote compliance with social distancing guidelines and mask use, requiring mask use in city facilities.

Policy and procedural changes city-wide in all areas of stopping the spread.

Monitor the Governor's policies and follow them as much as possible. I believe that too much isolation is bad for the mental well being of some of our citizens.

Modeling behaviour by wearing mask, physically distancing - encouraging others to do the same

Mitigation efforts include following state guidelines for closures or restrictions. Citywide physical facilities updated to provide service while maintaining guidelines for 6-foot separation.

Messaging.

Message & mask by example. Share safety & health information from trusted sources. Support those in the community and government protecting public health.

Masks required at all city meetings.

Masks masks masks following state and district protacall.

Masks and social distancing etc.

Mask ordinance and mitigation education program.

Mask mandate and waiving land use ordinances to allow businesses to implement mitigation strategies.

Mandatory masking for the past several months, public signage.

Mandates that city employees be masked while not desks or when traveling. The cancellation of public events considered high-risk or against state and county health guidelines. Make use of CAREs Act funds to enhance our ability to respond to the disease now and for any future outbreak.

Following State's guidelines. Encourage wearing face masks, social distancing and increased sanitization. These are practiced at City Hall and results in more citizens following that example.

Follow the guidance from the state and county and those health officials that are more knowledgeable than myself.

Follow state guidelines for community activities.

Follow best practices and guidelines from health department. Follow what successful states such as Vermont are doing.

Financial assistance to local business owners. Provision of personal protective supplies to businesses and city employees. Additional preventative protocols for recreation programs participants. Indoor air purification systems in public facilities. Restrictions on groups sizes allowed in public places.

Employees wearing masks - requiring visitors in city hall to wear masks.

Education to public of the importance to follow Health Dept. guidelines.

Education initiatives; support for mask use and social distancing; free/ discounted internet and hotspots; making services available online.

Education campaign. Mask and social distancing requirements.

Education.

Continue to improve our ability to work from home.

Close coordination with healthcare partners, public health, education, and other government leaders to minimize spread and educated public.

CARES Act funding.

Assess spread and identify ways to encourage better sanitary and behavioral practices in the community and within city facilities.

Keep our citizens safe by wearing masks and social distancing and no community activities.

SOCIAL DETERMINANTS OF HEALTH

Plans to address Social Determinants of Health

Access to healthy food

Working with schools to form programs for children and teens to be able to take home additional food (Principal Pantries or place in school store for students to pickup needed food).

We are about to update our General Plan, which should speak to this.

***** Promise food bank; Promise-sponsored food pantries in elementary schools; economic development efforts to attract markets to food deserts

Looking to recruit grocery stores to the areas in the city that have no stores in their neighborhoods

Encourage personal gardens. Educate the public on healthy foods.

Access to educational opportunities

Promise after school and volunteer reading and math program

Encourage education as an important goal for families. Make college affordable for low income students. Provide opportunities for training in a trade.

Access to employment opportunities

We are about to update our General Plan, which should speak to this.

Trying to keep IPP working, encouraging internet access.

Most employment opportunity issues in our community are tied to our housing segregation by income. Our current zoning policy creates a situation where anyone who wants a non-apartment housing option must qualify for a loan of at least \$270,000. This forces many working families outside of our city boundaries, which limits their transportation and work options. We are working on finding ways to legalize less-extravagant housing options within our city boundaries to curb this issue.

I am currently in the community board of ***** Job Corps, helping young adults get the education and connect them with businesses to obtain trades/ skills/future educational scholarships that all lead to gainful employment. This is for low-income young adults.

Encourage businesses to come to our community.

Business Council job fairs sponsored by the city.

Access to medical care

Working with the County to upgrade the Medical Clinic to be better staffed.

Support for ***** Free Clinic.

Access to public health programs

Support for ***** Free Clinic.

Access to affordable housing

Working with my planning commission and city council to address affordable housing opportunities in my city.

Working with local developers to create more affordable housing.

We have a strong ADU program in our city.

We have a plan put together by our city planner and approved by the city council to address affordable housing.

We as a city invest millions annually on housing to improve quality and quantity.

We are trying to plan so that there is a variety of housing options within our community.

We are trying to create an inventory of housing and to ensure affordable housing is spread throughout the city. We issued a resolution to challenge other cities to join Provo in providing more. We work closely with the Provo City Housing Authority and use government funds for such housing.

We are simplifying our accessory apartment regulations and put higher density housing. Given the high property values in our city, other than accessory apartments I believe truly affordable housing is not likely to be constructed n the near term.

We are seeking regulatory solutions to encourage affordable housing.

We are approving more dense housing but it doesn't seem to be brining prices down.

Use city funds to build or subsidiz.

The City has approved developments with smaller lot sizes and multifamily units, which overall tend to be less expensive. The City has also relaxed regulations to allow accessory dwelling units within single family neighborhoods.

***** has been very aggressive in approving a variety of housing types and sizes. We also recently changed our zoning ordinance to allow accessory apartments on all single family lots.

Planning for and allowing various housing types. Educating the general public about the benefits of investing in detached accessory dwelling units.

Many point plan, as there's no silver bullet. City as developer, land use code changes to facilite, financial literacy.

Increased diversity in housing types, including additional smaller lots and multi-family units.

Implement Goals and Policies of our Affordable Housing Plan.

I have been working with our council to create ordinances that currently don't exist to allow the building of apartments, townhomes, and smaller lot single-family homes.

***** is working on an ordinance to allow ADUs.

Development and planning decisions; tax increment for affordable housing.

Completed housing study. Have various zone/development options.

Approving housing diversity in the community, however citizens are significantly pushing back.

Approved affordable (moderate) housing plan.

Adequate income

We work to recruit jobs into our area. We work with the schools to help citizens become qualified for employment.

We have employed another person for our town maintenance.

We continue to try to attract well-paying jobs to *****. We recently expanded the campuses of ***** Medical School and ***** for more jobs. We support startups.

We are trying to recruit employers who provide higher wages and benefits.

We are about to update our General Plan, which should speak to this.

Facilitating and, in some cases, incentivizing economic development.

Access to safe drinking water, clean air, and toxin-free environments

working with WFRC, DEQ, and other organizations to address clean air initiatives. Adding EV charging stations, providing a municipal fiber network to allow residents to work from home.

Continue to provide safe drinking water to our residents, continue work on our employment center north of ***** to keep workers in ***** County and not congesting the freeways resulting in cleaner air.

Anti idling; sponsored charging stations; code enforcement.

Access to affordable transportation options

Working with the department of transportation to use grant funding to access transit.

Working with AOG.

We had the tracks but it pulled them. This helped tremendously. Trying to get them back.

We are working with UTA to do a study on transportation needs for our area.

Reviewing Bus Rapid Transit options and access options to Frontrunner.

Planning to incorporate and improve transit; development planning and zoning to encourage nodes of density which can be efficiently connected by transit.

Part of ***** regional bus route.

Most employment opportunity issues in our community are tied to our housing segregation by income. Our current zoning policy creates a situation where anyone who wants a non-apartment housing option must qualify for a loan of at least \$270,000. This forces many working families outside of our city boundaries, which limits their transportation and work options. We are working on finding ways to legalize less-extravagant housing options within our city boundaries to curb this issue.

Meetings with UTA trying to encourage more stops in our city, but we currently only have four stops and all of them are on the East side of our city.

Continue work on our employment center north of ***** and connections to public transportation to keep workers in ***** County to shorten commutes making for more affordable transportation options, etc.