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Exploring the Contributions of Local Health Departments in Land Use and Transportation Policy: Implications for Cross-sector Collaboration

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EXPLORING THE CONTRIBUTIONS OF LOCAL HEALTH DEPARTMENTS IN LAND USE AND TRANSPORTATION POLICY: IMPLICATIONS FOR CROSS-SECTOR COLLABORATION

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Introduction: Transportation and land use policies can impact physical activity. Local health departments (LHDs) are encouraged to participate in land use and transportation policy processes, which are outside their traditional expertise. Cross-sector collaborations are needed, yet stakeholders’ perceptions of LHD involvement are not well-understood. This paper explores (1) the perceived value of LHD participation in transportation and land use decision-making and (2) potential contributions of LHDs to these processes among relevant stakeholders.

Methods: Qualitative data were analysed from 49 semi-structured interviews conducted in 2015 and 2016. Participants were professionals representing land use planning (n=13), transportation/public works (n=11), public health (n=19), bike and pedestrian advocacy (n=4), and municipal administration (n=2). Two analysts conducted thematic analysis.

Results: All respondents reported that LHDs offer valuable contributions to transportation and land use policy processes. Seven specific contributions were identified (inter-rater agreement 91%). Participants described LHD knowledge of the built environment impact on health (n=44); ability to incorporate the public health evidence-base and best practices into built environment processes (n=23); and ability to articulate the impact of land use and transportation decisions on vulnerable populations (n=8). Other potential contributions included increasing public support through public education (n=27) and convening partnerships within the community and across municipal departments (n=35) to advance policy buy-in and enactment. Ability to analyse a range of data that could inform policy (n=41) and providing resource support (e.g., grant writing, offering technical assistance (n=20)) were also described.

Conclusions: LHDs can leverage their strengths to foster cross-sector collaborations that promote community physical activity opportunities. The results of these interviews are being used to inform the development of sustainable capacity building models for LHD involvement in built environment decision-making.

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