Health and Environmental Justice (HEJ)

A. Introduction

The way we design and build the human environment has a profound impact on both public health and environmental justice. Planning decisions related to transportation systems, density and intensity of uses, land use practices, and street design influence: how much we walk, ride a bicycle, drive a car, or take public transportation; the level of our stress; the types of food we eat; and the quality of our air and water — all factors which affect our health. For example, the more we drive, the more our vehicles emit harmful gases and particles into the air, which can lead to respiratory problems such as asthma. A compact, mixed-use development pattern that reduces reliance on automobiles and increases public transit opportunities can improve air quality and respiratory health.

In addition, the presence or absence of sidewalks and bike routes, heavy traffic, hills, street lights, enjoyable scenery, and observations of others exercising all impact our level of physical activity. Regular physical activity is important to build and maintain healthy bones, muscles, and joints and to help reduce the risk of developing heart disease, diabetes, high blood pressure, colon and breast cancer, obesity, and depression and anxiety. Eliminating barriers to physical activity and increasing access to parks and open space and quality recreational facilities and programs increases the likelihood that people will exercise.

Problems with environmental justice are often related to procedural or geographic inequity. Procedural inequity occurs when the planning process is not conducted in a uniform way. An example of this would be conducting public meetings at locations and/or times that make it difficult for certain individuals or groups to participate in a worthwhile fashion. Geographic inequity occurs when undesirable or unhealthy land uses are concentrated within one part of a city, creating a disproportionate burden on the residents in that area. Geographic inequity also refers to a situation in which desirable public amenities are not equitably distributed, leaving portions of a city underserved.

The purpose of this Health and Environmental Justice Element is to identify public health risks and environmental justice concerns and improve living conditions to foster the physical health and well-being of National City’s residents. The hope is that the City’s commitment to preventative health measures will become evident in decreases in the occurrence of diabetes, asthma, heart disease, cancer, and other physical and emotional ailments. Public health and environmental justice are themes that are tied to all of the General Plan elements, so it is important to cross-reference other sections of this document for a complete picture of National City’s efforts to improve health and equality.

The Health and Environmental Justice element is not a state-mandated element. However, by including this element in the General Plan, the City hopes to give prominence to National City’s health and environmental justice priorities. The authorization for this optional element is contained within Section 65303 of the California Government Code, which authorizes local jurisdictions to adopt additional elements beyond the mandatory elements when they relate to the physical development of the jurisdiction.

B. Existing Setting

Most health statistics are not available at the planning area level for this General Plan. The San Diego County Community Health Statistics Unit mainly provides demographic and health data at a regional level. National City is located within the “South Region” of San Diego County, which also includes the communities of Chula Vista, Coronado, South Bay, and Sweetwater. Most of the health information within this section applies to the South Region. However, where available, statistics specific to National City’s 91950 zip code are discussed.
**RESPIRATORY HEALTH AND AIR QUALITY**

There are two main breathing disorders that are tied to environmental air quality that can serve as indicators for the respiratory health of National City: asthma and chronic obstructive pulmonary disease (COPD). Environmental risk factors for both of these conditions include outdoor air pollution and cigarette smoke.

According to 2005/2006 fiscal year (FY) data, overall asthma hospitalization rates for the South Region are just slightly higher than countywide rates (74 persons per 100,000 population versus 70 persons per 100,000 population).\(^4\) However, children under 17 within National City’s 91950 zip code suffer disproportionately from asthma symptoms than children in the rest of San Diego County. According to 2005 data, children’s asthma hospitalization rates for National City are approximately 57% higher than the County average (247 children per 100,000 children versus 140 children per 100,000 children).\(^5\)

According to 2005 data, the South Region has a higher rate of hospitalizations that are attributed to COPD than San Diego County (108.8 per 100,000 versus 95.7 per 100,000).\(^6\) Figure HEJ-1 identifies COPD hospitalization rates by zip code to provide a better picture of how this disease specifically affects National City. In 2004, National City experienced 200.1 to 300 hospitalizations per 100,000 persons for COPD, which is higher than surrounding communities. Eastern San Diego County is the only other area in the county that shares such a high rate of hospitalizations for COPD.

Hospitalization rates may be higher in certain areas either because there is an actual higher incidence of these disorders in those areas or because there is less adequate management of these disorders, resulting in a greater rate of hospitalization.

Because of the link between respiratory illnesses and air pollution, federal and state clean air standards have been established for common outdoor air pollutants to protect public health and the environment. The federal standards, known as National Ambient Air Quality Standards (NAAQS),

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\(^6\) County of San Diego Health and Human Services Community Health Statistics Unit (2009). County of San Diego Community Profiles by Region and Subregional Area: South Region.
are established by the Environmental Protection Agency (EPA) pursuant to requirements of the federal Clean Air Act (CAA). Each area of the nation with air pollution levels violating NAAQS are designated as non-attainment areas and must submit a plan outlining the combination of local, state, and federal actions and emission control regulations necessary to bring the area into attainment. San Diego County is currently designated as a non-attainment area for ozone.

In California, the California Air Resources Board (CARB) is responsible for meeting the State requirements of the federal CAA, administering the California CAA and establishing the California Ambient Air Quality Standards (CAAQS). The California CAA, as amended in 1992, requires all air districts in the State to endeavor to achieve and maintain the CAAQS. The CAAQS are generally more stringent than the corresponding federal standards and incorporate additional standards for sulfates, hydrogen sulfide, vinyl chloride, and visibility reducing particles.

Air quality issues are locally regulated by San Diego County’s Air Pollution Control District (APCD). The APCD is an extension of the CARB. The APCD has air monitoring stations in downtown San Diego and Chula Vista. There are no air monitoring stations in National City. As such, the measurement of air quality within National City is reflective of a larger region, and it does not measure specific locations (the port, freeways, gas stations, etc.) where local sources could be contributors to higher levels of pollutants.

Table HEJ-1 displays data on how often and by how much the air surrounding National City, measured in downtown San Diego and Chula Vista, violated state and federal ozone laws between 2004 and 2008. Chula Vista exceeded the federal 8-hour standard twice and the state 8-hour standard six times. Downtown San Diego did not exceed the federal standard, but did exceed the state standard once. Both Chula Vista and Downtown San Diego are far below the number of days that exceeded state and federal standards countywide. This is likely because these coastal cities, like National City, benefit from the prevailing eastern wind currents that carry some of the air pollution away from the coast to inland locations such as Alpine and El Cajon.

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Ozone – A gas composed of three oxygen atoms linked together. At ground level, it is formed by chemical reactions of nitrogen oxides (NOx) and volatile organic compounds (VOCs) in the presence of sunlight. NOx and VOC emissions are mostly the result of human activities such as fossil fuel combustion and solvent use. Ozone can cause coughing, throat irritation, pain, burning, or discomfort in the chest when taking a deep breath, and chest tightness, wheezing, or shortness of breath.

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7 San Diego County Air Pollution Control District (2007). Eight Hour Ozone Attainment Plan.
# TABLE HEJ-1

## Ozone

Number of Days Exceeding Federal and State Standards (2004-2008)*

<table>
<thead>
<tr>
<th>Station</th>
<th># of Days Exceeding Fed 8 hr Stnd &gt;8.4 parts per hundred million (pphm)**</th>
<th># of Days Exceeding State 8 hr Stnd &gt;7.0 parts per hundred million (pphm)</th>
<th>Max 8 hr Concentration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chula Vista</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Downtown SD***</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Countywide</td>
<td>8</td>
<td>5</td>
<td>14</td>
</tr>
</tbody>
</table>

* Data excludes measurements taken during the 2007 fires, as they emitted huge amounts of pollutants, mainly particulate matter, and led to the area being out of compliance. The event was rare enough that the data from that time was withdrawn from calculation.

** Federal 8 hr standard was revised to >7.5 ppm on March 12, 2008, to become effective March 12, 2009.

*** Downtown San Diego monitoring station was moved in 2005 from 12th Avenue to Beardsley Street. 2004 and 2005 measurements are taken from the 12th Avenue monitoring station.

Particulate matter (PM) is another pollutant of concern for San Diego County. Like ozone, PM is formed in the air by a chemical reaction and mainly comes from combustion sources like vehicles, diesel engines, and industrial facilities. Smoke from wildfires and dust also contains PM. Once inhaled, PM can affect the heart and lungs and cause serious health effects. Scientists have observed higher rates of hospitalizations, emergency room visits, and doctor’s visits for respiratory illnesses or heart disease during times of high PM concentrations. During these periods of high PM levels, scientists have also observed the worsening of asthma symptoms and acute and chronic bronchitis.

There are two categories of PM: PM$_{10}$ particles, which are less than 10 micrometers in diameter and PM$_{2.5}$ particles, which are less than 2.5 micrometers in diameter.

Table HEJ-2 identifies data regarding PM measurements taken at the San Diego and Chula Vista monitoring stations from 2004 to 2008 for both PM$_{10}$ and PM$_{2.5}$. The highlighted cells identify the incidences in which standards were exceeded. According to CARB, most areas of California exceed the current state PM standards from a few to many times each year.
Over the past two decades, air quality in San Diego County has improved significantly due to state and federal regulations controlling emissions from mobile sources of air pollution, such as vehicles, and local controls on emissions from industrial sources, such as factories and power plants, commercial sources, such as gas stations and dry cleaners, and residential sources, such as water heaters and furnaces. The APCD’s 2007 Air Quality Management Plan was designed to reduce ozone concentrations to below the level of the federal standard in 2009\(^8\). The standard has not been met.

**Surrounding Land Uses**

The majority of land within the planning area located west of I-5 is under the jurisdiction of the San Diego Unified Port District (Port) and the US Navy. Most of the existing land uses located within the Port’s jurisdiction can be classified as marine industrial, which includes activities such as

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\(^8\) San Diego County Air Pollution Control District (2007). Eight Hour Ozone Attainment Plan.
shipping, warehousing, manufacturing, and distribution. The Port Master Plan (2010) designates most of the 250 land acres in its National City Bayfront Planning Area for marine-related industrial and marine terminal uses.

On-going and planned uses west of I-5; therefore, pose undesirable impacts on non-industrial and sensitive land uses throughout the planning area. Industrial uses are responsible for the generation of point and non-point source emissions. Distribution activities generate a substantial amount truck traffic that contribute to high levels of diesel emissions and air quality concerns in other areas of the City. Additionally, the heavy concentration of marine-related and military facilities has created substantial barriers to public coastal access across most of National City’s bayfront.

**PUBLIC HEALTH AND FITNESS**

**Physical Activity**

Regular physical activity is critically important for the health and well-being of people of all ages. Millions of Americans suffer from health problems that can be prevented or improved through regular exercise; these problems include: heart disease, obesity, diabetes, stress, and depression. According to the San Diego County Health and Human Services Community Health Statistics Unit, there is a low percentage of people (18 years of age and older) engaging in moderate and vigorous physical activity within both the South Region and San Diego County as a whole. Refer to Table HEJ-3.

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Adopted ----- 3-8 National City General Plan
Table HEJ-3
Physical Activity and Exercise (Adults 18+ yrs)*

<table>
<thead>
<tr>
<th>Region</th>
<th>Walked for Transport or Fun/Exercise**</th>
<th>No Physical Activity**</th>
<th>Engaged in Moderate Physical Activity**</th>
<th>Engaged in Vigorous Physical Activity**</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>South Region</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2005</td>
<td>79%</td>
<td>11%</td>
<td>15%</td>
<td>18%</td>
</tr>
<tr>
<td>2007</td>
<td>Data not avail.</td>
<td>13%</td>
<td>14%</td>
<td>20%</td>
</tr>
<tr>
<td><strong>San Diego County</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2005</td>
<td>79%</td>
<td>10%</td>
<td>16%</td>
<td>15%</td>
</tr>
<tr>
<td>2007</td>
<td>Data not avail.</td>
<td>14%</td>
<td>17%</td>
<td>20%</td>
</tr>
</tbody>
</table>

*% is proportion of people who replied with indicated response to question. Respondents were asked a series of questions related to walking and physical activity to determine whether level is none, some, moderate, or vigorous over a seven day timeframe.

** Percentages are rounded to the nearest whole number.


Prepared by County of San Diego (CoSD), Health & Human Services Agency (HHSA), Public Health Services (PHS), Community Health Statistics, 6/26/2009.

To understand physical fitness levels among children, Table HEJ-4 identifies the percentage of 5th, 7th, and 9th graders in National City meeting the healthy fitness zone for six out of six physical fitness indicators: aerobic capacity, body composition, abdominal strength, trunk extensor strength, upper body strength, and flexibility. There is a lower percentage of fifth graders, attending public schools in National City, who meet fitness standards in comparison to San Diego County and California. Seventh and ninth grade scores are better than County and State scores for the reporting academic year (2008-2009).
### TABLE HEJ-4
National City Students Meeting the Healthy Fitness Zone for 6 out of 6 Physical Fitness Areas (2008-2009)*

<table>
<thead>
<tr>
<th>School</th>
<th>5th Grade**</th>
<th>7th Grade**</th>
<th>9th Grade**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sweetwater High School</td>
<td>--</td>
<td>--</td>
<td>45%</td>
</tr>
<tr>
<td>National City Middle School</td>
<td>--</td>
<td>42%</td>
<td>--</td>
</tr>
<tr>
<td>Granger Junior High</td>
<td>--</td>
<td>43%</td>
<td>53%</td>
</tr>
<tr>
<td>Olivewood Elementary</td>
<td>18%</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Las Palmas Elementary</td>
<td>12%</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Kimball Elementary</td>
<td>28%</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Palmer Elementary</td>
<td>18%</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Harbison Elementary</td>
<td>16%</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>John Otis Elementary</td>
<td>25%</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Central Elementary</td>
<td>11%</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>El Toyon Elementary</td>
<td>28%</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Lincoln Acres Elementary</td>
<td>22%</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td><strong>For Comparison Purposes:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>San Diego County</td>
<td>31%</td>
<td>38%</td>
<td>42%</td>
</tr>
<tr>
<td>State of California</td>
<td>29%</td>
<td>34%</td>
<td>38%</td>
</tr>
</tbody>
</table>

*The physical fitness test is required to be administered to students in grades 5, 7, and 9 only.
**Percentages are rounded to the nearest whole number.
Part Three: General Plan Elements – Health and Environmental Justice

Physical inactivity is one of the main risk factors in developing heart disease, along with tobacco use, obesity, excessive alcohol use, heredity, and diets high in salt, saturated fats, and cholesterol. According to the County of San Diego Health and Human Services Community Health Statistics Unit, in 2004, National City experienced a relatively high rate of death from coronary heart disease (191 deaths per 100,000 population compared to 133 deaths per 100,000 population countywide).

Obesity is a major risk factor for cardiovascular disease, certain types of cancer, and Type 2 diabetes\textsuperscript{10}. Exercise and regular physical activity can help to alleviate overweight and obese conditions. Highly walkable neighborhoods have been associated with a decrease in weight and waist size for individuals who increased their levels of physical activity during a one-year period\textsuperscript{11}. In 2007, the percentage of overweight and obese individuals was slightly higher in the South Region than county-wide (22\% of individuals were overweight in the South Region compared to 18\% countywide and 25\% of individuals were obese compared in the South Region compared to 22\% countywide)\textsuperscript{12}.

Diabetes is a disease in which the body does not produce or properly use insulin. Insulin is a hormone that is needed to convert sugar, starches, and other food into needed energy. The more fat tissue a person has, the less sensitive his or her body is to insulin. As a result, there is a strong link between Type 2 diabetes and obesity. A healthy diet and regular physical activity is crucial to maintaining a healthy weight and reducing the risk for diabetes. In 2004, National City had the highest rate of deaths from diabetes in San Diego County (41 persons per 100,000 population compared to 18 persons per 100,000 population countywide). Refer to Figure HEJ-2.

A growing body of research shows that exercise also can help improve the symptoms of emotional ailments, such as stress and depression. Exercise can help prevent a relapse after treatment for depression. It may take at least 30 minutes of exercise a day for at least three to five days a week to significantly improve depression symptoms.

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\textsuperscript{12} County of San Diego Health and Human Services Community Health Statistics Unit (2009). County of San Diego Community Profiles by Region and Subregional Area: South Region.
However, smaller amounts of activity, as little as 10 to 15 minutes at a time, can improve mood in the short term\textsuperscript{13}.

In addition to improving mental health, management of stress and depression is important to prevent serious physical health problems, such as heart disease. There are linkages between heart disease and the factors that often cause stress. There also are links between heart disease and depression. For instance, women who are depressed are twice as likely to develop heart disease as those who are not\textsuperscript{14}.

In 2007, the percentage of adults within the South Region who sought out professional help for a mental or emotional condition was lower than in San Diego County (14% in the South Region compared to 21% countywide)\textsuperscript{15}. This does not necessarily indicate that there are fewer people in the South Region experiencing emotional distress. It is possible that people in the South Region are just less likely to obtain help from a counselor due to various economic, cultural, or access constraints.

**Healthy Foods**

The availability of healthy food options, including fresh produce, at stores and farmers’ markets, may correlate with a higher consumption of fruits and vegetables, which in turn, can alleviate the prevalence of excess weight and obesity. A high density of neighborhood fast food outlets (formula restaurants) has been shown to be associated with weight gain and an increase in waist size among residents who frequent those establishments\textsuperscript{16}. Within the City, there are approximately twice as many fast food and convenience stores as there are general grocery and fruit and vegetable markets\textsuperscript{17}.

A major factor affecting access to healthy foods is an individual’s or family’s level of income. High calorie foods tend to be the least expensive and most resistant to inflation, which partially explains why the highest rates of

\textsuperscript{15} County of San Diego Health and Human Services Community Health Statistics Unit (2009). County of San Diego Community Profiles by Region and Subregional Area: South Region.
\textsuperscript{16} Fuzhong Li, PhD; Peter Harmer, PhD, MPH; Bradley J. Cardinal, PhD; Mark Bosworth, MS; Deb Johnson-Shelton, PhD.(2009). Obesity and the Built Environment: Does the Density of Neighborhood Fast-Food Outlets Matter? American Journal of Health Promotion. Vol. 23, No. 3.
obesity continue to be observed in groups with the most limited economic means\textsuperscript{18}. According to the US Census, in 2000, 22% of National City’s population was living in poverty compared to 12% countywide.

The county-administered Supplemental Nutrition Assistance Program (SNAP) seeks to provide assistance relative to food costs. According to the United States Department of Agriculture (USDA), the San Diego County participation rate in the SNAP ranks the lowest in the nation among urban centers. Of those eligible to receive SNAP benefits, only 29% are doing so\textsuperscript{19}. Although food stamp data are not available at the city level, based on County statistics, it is highly likely that there are far more people eligible to receive benefits in National City than who actually participate in the program. The County of San Diego has attributed its low participation rates to a lack of awareness of food stamp eligibility rules and dissatisfaction with the eligibility process.

Access to Health Care

The availability of, and access to, health care facilities plays a large role in the preservation and maintenance of good public health and the prevention of morbidity and hospitalizations. National City contains six primary care facilities, five long term care facilities, and one hospital. All appear to be well served by vehicular routes and public transport (refer to Figure HEJ-3). Since having medical insurance influences whether or not one visits a medical professional, it is important to note the percentage of the population that is currently insured. In 2007, the percentage of currently insured adults aged 18-64 within the South Region was 83%, which mirrored that of the county\textsuperscript{15}.\textsuperscript{18}

Lead Based Paint

Structures constructed prior to 1978 have the propensity to contain paint that has high levels of lead. Approximately 85 percent of the residential dwelling units in the City were constructed prior to 1980\textsuperscript{20}. Lead-based paint is not a hazard when it is in good condition, but exposure to lead often occurs when paint is aging, peeling, or being removed. Lead exposure can cause nervous system and kidney damage (among a host of other physical problems) in

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children. Exposure to high levels of lead can lead to serious health problems such as seizures. Lead exposure also can be dangerous for adults, with impacts ranging from increased chances of illness during pregnancy to nerve disorders.

Approximately 13,348 housing units were constructed prior to 1980 in National City. Approximately 589 of these units are at high risk for containing lead based paint hazards. Through grants and public/private participation a total of 115 units have been mitigated from a lead based paint perspective as of 2008. As of the writing of this document, the City does not have a program to address residential lead paint issues. It is anticipated that a Housing Rehabilitation Program, slated to begin in 2010, will include a component to address residential lead based paint issues.

C. Citywide Goals and Policies

Respiratory Health and Air Quality

Goal HEJ-1: The reduction of health risks related to air pollution.

Policy HEJ-1.1: Locate new stationary sources of emissions so as to minimize impacts on sensitive land uses, where feasible.

Policy HEJ-1.2: Encourage existing stationary sources of emissions to use feasible measures to minimize emissions that could have potential impacts on air quality.

Policy HEJ-1.3: Require new development located within 500 feet of a freeway to include feasible measures such as separation/setbacks, landscaping, barriers, ventilation systems, air filters/cleaners, and/or other effective measures to minimize potential impacts from air pollution.

Policy HEJ-1.4: Require new sensitive land uses to include feasible measures such as separation/setbacks, landscaping, barriers, ventilation systems, air filters/cleaners, and/or other effective measures to minimize potential impacts from air pollution.

Policy HEJ-1.5: Encourage existing sensitive land uses to include feasible measures such as separation/setbacks, landscaping, barriers, ventilation systems, air filters/cleaners, and/or other effective measures to minimize potential impacts from air pollution.

Sensitive Land Uses – Land uses where segments of the population most susceptible to poor air quality (i.e., children, the elderly, and those with pre-existing serious health problems affected by air quality) are most likely to spend time, including schools and schoolyards, parks and playgrounds, day care centers, nursing homes, hospitals, and residential communities. (California Air Resources Board)


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Policy HEJ-1.6: Consider air quality impacts, including cumulative impacts, from existing and new development when making land use decisions.

Policy HEJ-1.7: Designate truck routes that avoid sensitive land uses, where feasible.

Policy HEJ-1.8: Encourage smoke-free workplaces, multi-family housing, parks, and other outdoor gathering places to reduce exposure to second-hand smoke.

Policy HEJ-1.9: Request lead and responsible agency consultation on land use and transportation planning, design, and implementation projects to insure that feasible measures are included to minimize potential impacts on the city from air pollution.

Policy HEJ-1-10: Distribute information about best practices to reduce and/or eliminate sources of indoor air pollution.

Why is this Important?

National City suffers disproportionately from respiratory disorders associated with air quality issues compared to other parts of San Diego County. The above goal and policies are intended to reduce exposure to poor air quality by separating sensitive receptors from significant sources of air pollution; reducing emissions; incorporating design features that minimize air quality impacts into new development; considering cumulative air quality impacts when making land use decisions; and advising other jurisdictions on land use decisions that could affect National City residents.

PHYSICAL ACTIVITY

Policy HEJ-2.1: Encourage walking and bicycling as daily physical activities by providing conveniently located daily goods and services and recreational facilities and programs within a comfortable walking or biking distance from homes.
Universal Design – A user-friendly approach to design in the living environment where people of any culture, age, size, weight, race, gender and ability can experience an environment that promotes their health, safety and welfare today and in the future. (Universal Design Alliance)

Healthy Food Supply – Provides (1) a minimum of 5,000 square feet of retail space for a general line of food and non-food products intended for home preparation, consumption, and utilization (2) at least 50% of a general consumption line of food products intended for home preparation, consumption, and utilization (3) at least 30% of retail space for perishable goods that include dairy, fresh produce, fresh meats, poultry, fish, and frozen foods (4) at least 500 square feet of retail space for fresh produce. (San Diego County Health and Human Services)

Policy HEJ-2.2: Identify and eliminate, where feasible, barriers to outdoor physical activity, such as damaged or incomplete sidewalks and bike paths, insufficient lighting, poor walkability, and lack of landscaping and shade trees along streets.

Policy HEJ-2.3: Improve access to bicycles, helmets, and related equipment for lower income families.

Policy HEJ-2.4: Apply universal design principles in the design and review of development and redevelopment projects, where feasible.

Policy HEJ-2.5: Raise awareness about the importance of healthy behaviors and physical fitness to overall well-being.

Why is this important?

The more convenient and comfortable a place is to walk or bike, the more likely an individual is to achieve the recommended amount of daily exercise. Access to parks, trails, and recreation facilities can significantly increase levels of physical activity. Any reduction in vehicle miles traveled also creates corresponding reductions in air pollution, traffic volumes, noise, and safety impacts.

HEALTHY FOODS

Goal HEJ-3: Convenient access to fresh and healthy foods, water, fruits, and vegetables for all segments of the community.

Policy HEJ-3.1: Prioritize healthy food supplies in economic development efforts.

Policy HEJ-3.2: Prioritize and facilitate the development of healthy food establishments in areas with a high concentration of fast food establishments, convenience stores, and liquor stores.

Policy HEJ-3.3: Encourage and facilitate public or private shuttle systems to transport customers to grocery stores and other sources of healthy foods.

Policy HEJ-3.4: Encourage the development of convenient and accessible neighborhood gardens and other sources of healthy foods in appropriate zones and within each neighborhood, where feasible.
Policy HEJ-3.5: Encourage new development and redevelopment to include a healthy food supply or edible garden, or be located within a half mile of a healthy food supply, where feasible and appropriate.

Policy HEJ-3.6: Encourage and facilitate the establishment of a farmer’s market(s), mobile health food markets, and corner stores that sell healthy foods.

Policy HEJ-3.8: Require new development to provide and maintain fresh drinking water fountains, where feasible and appropriate.

Policy HEJ-3.9: Inform low income families and people experiencing homelessness about food assistance programs.

Goal HEJ-4: Improved eating habits among all segments of the community.

Policy HEJ-4.1: Promote messages regarding healthy eating habits and food choices.

Policy HEJ-4.2: Encourage food-service establishments to post nutritional information, comply with dietary guidelines, eliminate the use of trans fats, and serve locally-grown foods.

Policy HEJ-4.3: When served at City-sponsored events, provide food consistent with health-oriented dietary guidelines, including water and fresh fruit and/or vegetables.

Why is this important?

Eating healthy foods reduces the risk of health problems such as diabetes, heart disease, excess weight, and obesity. In addition, a healthy diet is associated with better academic performance\(^{22}\). Despite these known benefits, as of 2003, only a quarter of the nation’s population followed the government recommended diet that calls for eating five servings of fruits and vegetables a day\(^{23}\). There are many factors that impede healthy eating such as a lack of grocery stores in the neighborhood, lack of transportation to get to a place that sells affordable, healthy foods, the expense of

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healthy foods compared to unhealthy foods, and limited
time or knowledge to prepare healthy foods. The preceding
goals and policies are aimed at encouraging healthy eating
habits and eliminating the barriers that make it difficult for
people to eat healthily.

ACCESS TO HEALTH CARE

Goal HEJ-5: Convenient and accessible health services
that meet the needs of the community

Policy HEJ-5.1: Encourage a range of health services in
locations that are convenient and accessible (walkable) to
the community.

Policy HEJ-5.2: Encourage local transit providers to establish
and maintain routes and services that provide the
community with convenient access to health service
facilities, where feasible.

Policy HEJ-5.3: Encourage businesses to provide and
maintain a free shuttle service to health care facilities for
residents, where feasible.

Why is this important?

When residents have easy and safe access to a variety of
health care services, they have the opportunity to learn
about good health care practices, prevent illness, and lessen
the severity of illness.

LEAD BASED PAINT

Goal 6: The elimination of health risks associated with
lead-based paint.

Policy 6.1: Inform the public about the risks associated with
lead based paint and encourage and facilitate remediation.

Policy 6.2: Develop a process by which to identify
residences with lead based paint hazards and notify
residents of the potential hazard.

Policy 6.3: Program the remediation of lead based paint in
city structures, prioritizing efforts in buildings where
children may be present.
Why is this important?
As indicated in the Existing Setting section, approximately 13,348 housing units were constructed prior to 1980 in National City and almost 600 of these units are at high risk for containing lead based paint hazards. Although the City has succeeded in mitigating 115 of these units as of 2008 through its Lead Hazard Control Program, there is still a long way to go to rid National City of its lead based paint hazards. Young children are at the highest risk of developing health problems as a result of lead exposure, and low income families often cannot afford to remove lead based paint hazards from their homes. Therefore, directing resources towards low-income residences where young children reside is a priority. Educating residents about the steps they can take to reduce the risk of lead exposure also is an important step toward eliminating hazards.

COMMUNITY INVOLVEMENT

Goal HEJ-7: Involvement of all segments of the public in the process of creating a healthy environment and improving the health of the community.

Policy HEJ-7.1: Facilitate the involvement of community residents, businesses, and organizations in the active support of community health and consider their concerns in the decision-making process.

Policy HEJ-7.2: Address health issues in National City with the public during the annual review of the General Plan.

Why is this important?
The more opportunities that are provided for community involvement helps to assure that community issues are identified and addressed. Through community involvement, opportunities that contribute to improved public health can be identified and prioritized.
Figure HEJ-1
Chronic Obstructive Pulmonary Disease (COPD) Hospitalization Rates, 2004

Selected Chronic Disease Medical Encounter Rates, San Diego County by Community

Legend
- HHSA Regions
- Community (SRA)

COPD, Hosp Rates, 2004
- 0.0 - 50.0
- 50.1 - 100.0
- 100.1 - 150.0
- 150.1 - 200.0
- 200.1 - 300.0

*Rates per 100,000 population

Prepared by: County of San Diego, HHSA, Public Health Services, Community Health Statistics Unit. June, 2008.
Selected Chronic Disease Medical Encounter Rates,
San Diego County by Community
Diabetes Death Rates, 2004

Legend
- HHSA Regions
- Community (SRA)

Diabetes Death Rates, 2004
- 0.0 - 10.0
- 10.1 - 20.0
- 20.1 - 30.0
- 30.1 - 40.0
- 40.1 - 50.0

*Rates per 100,000 population

Prepared by: County of San Diego, HHSA, Public Health Services, Community Health Statistics Unit, San Diego, June, 2008.
Figure HEJ-3
Proximity of Health Care Facilities to Transit Stops

Legend

3778 Health Facilities
Primary Care Facility or Clinic
Long-Term Care Facility
Hospital

Health Care Facility 1/4 Mile Radius
Primary Care Facility 1/4 Mile Radius
Long-Term Care Facility or Clinic 1/4 Mile Radius
Hospital 1/4 Mile Radius

Transit
• Transit Stops

Base Layers

National City Planning Area Boundary
National City Boundary
Freeways
Major Roads
Railroad

Legend

Proximity of Health Care Facilities to Transit Stops

National City Southern Boundary