



Deer Park Neighborhood Redevelopment Plan:

A Health Impact Assessment March 2016



Summary

Approximately 125 current residents of the Deer Park neighborhood will experience direct health benefits because the City of Omaha's planned housing improvements will reduce exposures that cause poor birth outcomes, lead poisoning, asthma, and injury. The level of investment being made by the City and its partners is also likely to trigger ripple effects in Deer Park that will improve the health of the 3,500 residents in the focus area through increased housing investment, fewer code enforcement violations, and reduced crime. To create a stronger trajectory for Deer Park and ensure health improvements continue into the future, defining how to catalyze stable real estate investments is key for the two year initiative.



Credit: Omaha by Design

Background

Deer Park, one of the oldest neighborhoods in Omaha, has a rich past, which included waves of new immigrants drawn to south Omaha because of meatpacking jobs in the stockyards. While the area still includes descendants from the earlier mix of residents primarily from southern and eastern Europe, it is now a largely Latino neighborhood. The heart of Deer Park is Vinton Street, a main street corridor that cuts diagonally through the neighborhood along a former ridge trail. Vinton Street features a variety of restaurants, bars, retail stores, and art venues, and there has been a strong push over the past five years to preserve the historic character of the street.

In recent years, the age of Deer Park combined with years of deferred maintenance has resulted in an increase in residential properties in the neighborhood that are deteriorating. In 2010, the loss of nearby Rosenblatt Stadium, the former site of the NCAA College World Series, also removed a key source of funding for neighborhood-led improvements. In order to “arrest the advancement of physical distress in the neighborhood” and “tip the balance in favor of improvement and sustainability,” the City of Omaha and the Deer Park Neighborhood Association created a Redevelopment Plan in 2014.

As a result of the Redevelopment Plan, the City of Omaha will focus its revitalization efforts on a targeted area within the Deer Park neighborhood for 2016 and 2017. The specific focus area is Martha to the I-80 Interstate, 21st to 15th. (see Deer Park maps). This initiative will include rehabilitating 33 properties, constructing five new homes, and assembling a range of partners to provide a holistic response to the needs and aspirations of neighborhood residents. Since improving the health of people living in Deer Park is a core component of the Deer Park initiative, the City of Omaha requested that the Douglas County Health Department conduct a Health Impact Assessment as part of the process.

Purpose & Priorities

The purpose of the Deer Park Health Impact Assessment is to engage stakeholders to provide actionable, evidence-based recommendations about how the two-year revitalization initiative could increase health benefits and reduce health risks to Deer Park residents (see Description of the Approach).

The Health Impact Assessment focused on two key aspects of the Deer Park initiative and sought to answer the following questions:

1. **Housing Improvements** – Based on the current health of Deer Park residents, what health issues could be most affected through the housing improvement activities being led by the City of Omaha and its partners?
2. **Neighborhood Trajectory** – How could the investments made by the City and its partners help Deer Park move to stability instead of experiencing a slow decline? And how could the capacity of Deer Park's residents be strengthened so neighborhood improvements and their associated health benefits would continue after the two-year initiative was over?

Description of the Approach

To better understand what health issues had the greatest potential for improvement through the Deer Park revitalization efforts, the Douglas County Health Department and a multidisciplinary Health Impact Assessment (HIA) Team pulled together information from three main sources:

1. A 2011 Community Health Needs Assessment focused on adults that was sponsored by Alegen Health, Methodist Health System, and the Nebraska Medical Center in partnership with multiple local health departments.
2. A 2012 Community Health Needs Assessment focused on children prepared for Children’s Hospital and Medical Center in collaboration with Boys Town National Research Hospital.
3. Birth and death records collected by the Douglas County Health Department.

To assess the trajectory of Deer Park as a neighborhood, the Douglas County Health Department and HIA Team also collected data on a dozen neighborhood level indicators including life expectancy, housing affordability, and number of code violations. These neighborhood indicators for Deer Park were then compared to Douglas County as a whole and to Deer Park data from 10-15 years prior.

In addition to its monthly meetings to review this data and determine next steps, the Douglas County Health Department and the HIA Team used multiple other mechanisms to determine key findings and ensure collaboration with Deer Park residents:

- Oscar Duran, the president of the Deer Park Neighborhood Association and the South Omaha Neighborhood Alliance, was involved in each step of the HIA. Funding was also set aside for the Deer Park Neighborhood Association to canvass neighborhood residents and create a Deer Park Neighborhood Priorities Report
- A literature review was conducted to bring together the scientific research and experiences from other cities that were most relevant to the Deer Park revitalization initiative.
- When recommendations were drafted, it was done with leaders representing the City of Omaha, Omaha Healthy Kids Alliance, Habitat for Humanity, and the Deer Park Neighborhood Association.

The following parts of this document summarize key findings and recommendations from that process. For more information, please see the appendices.



Credit: Phil Rooney, Douglas County Health Department



Credit: Phil Rooney, Douglas County Health Department



Credit: Phil Rooney, Douglas County Health Department

Key Findings – Housing Improvements

Births outcomes, lead poisoning, asthma, childhood injuries and obesity/diabetes are the key opportunities for improving the health of Deer Park residents.

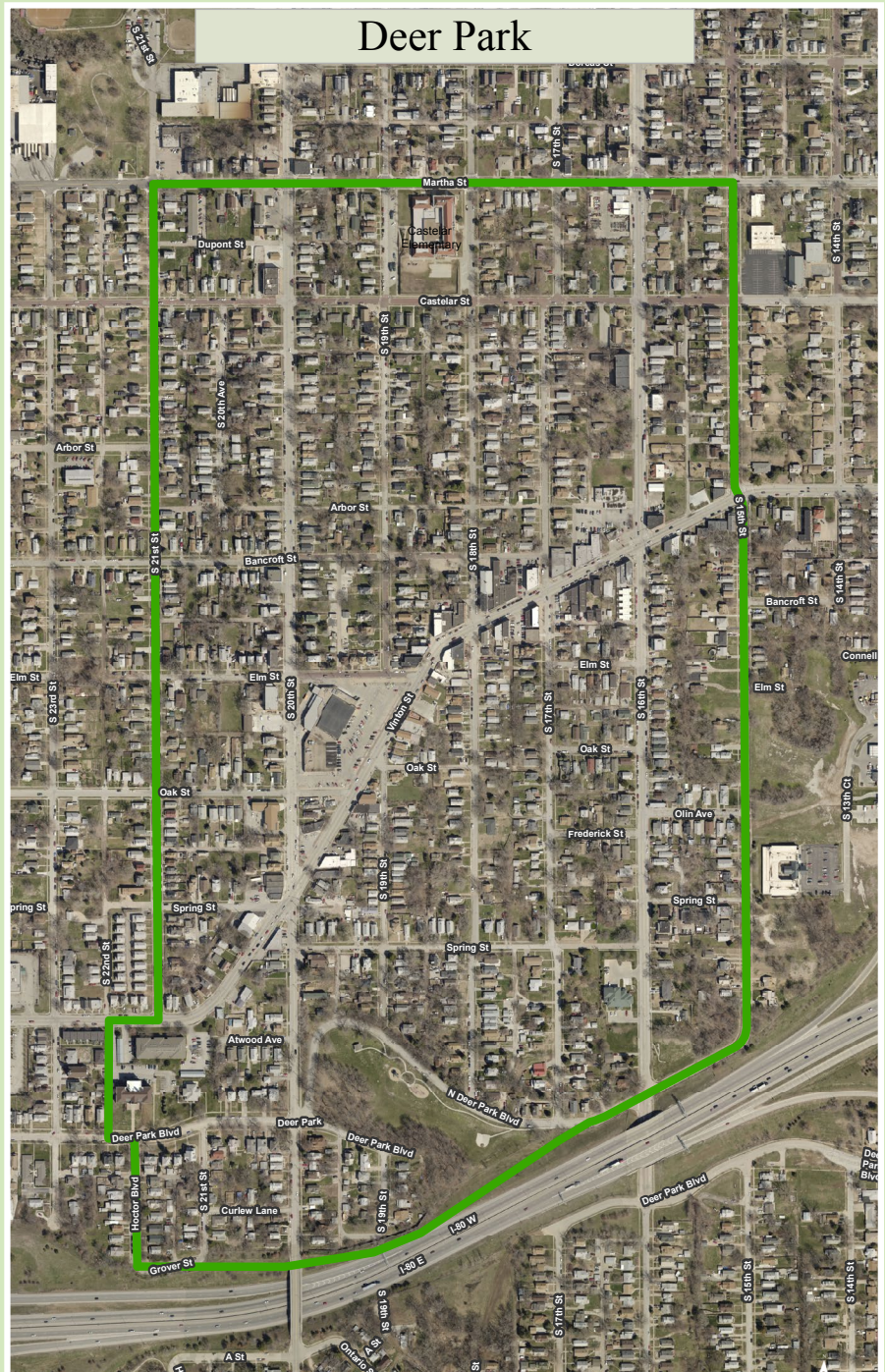
- Deer Park has a high number of low birth weight and pre-term births compared to the rest of the county. Improvements to other priorities such as exposure to lead and other toxins and indoor air pollution for asthma would benefit birth outcomes as well.
- The risk of lead poisoning has greatly diminished over the past decade; however, seven children still tested positive for elevated blood lead in 2014 in ZIP code 68108.
- Almost 1 in 10 children in southeast Omaha currently have asthma which is the second only to northeast Omaha.
- Injuries are the leading cause of death for children over the age of 1 nationally. Over a two year period, one out of every eight children in southeast Omaha is injured seriously enough to need medical treatment.
- 1 in 4 children and 3 in 10 adults in southeast Omaha are obese. Southeast Omaha also has the highest rates of diabetes in Omaha.

Life expectancy for ZIP code 68108 (which includes Deer Park) is 4.5 years less than all of Douglas County. To provide context, life expectancy in Deer Park stands at 74.3 years, which is closer to living in Bulgaria or El Salvador than the United States.

Housing improvements to reduce lead exposure and asthma triggers show a high return on investment.

- A 2009 cost-benefit analysis found that every \$1 invested in controlling lead paint hazards results in cost savings of at least \$17 (\$17-\$221) from improved health outcomes, increased IQ, higher lifetime earnings and tax revenue, reduced spending on special education, and reduced criminal activity.
- Studies of housing interventions to control asthma triggers have reported that for every \$1 invested, \$5 to \$14 in savings have been created. These asthma studies focused on direct medical costs. If additional benefits from less work days missed for parents and fewer school days missed for children were included, these interventions would show even more substantial returns.

Deer Park Redevelopment Boundaries



Key Findings – Neighborhood Trajectory

Deer Park is facing greater challenges now than a decade ago.

- From 2000 to 2010, the vacancy rate went from 8% to over 13%. In 2014, there were 11 demolition orders and 47 housing units deemed unfit and unsafe.
- Over the last 15 years, educational attainment and homeownership have decreased in the neighborhood and the percent of children living in poverty has increased.

Deer Park has several strong assets that aid in the goal of improving the trajectory of the neighborhood.

- Approximately 78% of residents remain there from year to year – a rate similar to Douglas County as a whole. This stability, combined with a strong neighborhood association, helps provide continuity and leadership capacity for improving conditions in Deer Park.
- The neighborhood continues to be affordable in comparison to Douglas County in terms of how many Deer Park residents are burdened by housing costs. Currently, 62% of renters and 72% of homeowners in Deer Park pay less than 30% of their income for housing, which is very similar or better than the county average.
- Deer Park is a very walkable neighborhood (Walkscore of 74/100) with Castelar Elementary, Deer Hollow Park, and the Vinton Street commercial corridor all providing a variety of nearby goods and services.

There is strong evidence that focused housing investments can create ripple effects that extend beyond program recipients into the larger neighborhood once a threshold of investment is achieved.

- A study of Community Development Block Grant expenditures across 17 cities found that once \$87,000 per Census tract was exceeded, the trajectory of the neighborhood improved across a variety of indicators such as teen birth rates, owner-occupied housing, median home values, number of businesses, rates of violent crime, and vacancy rates.
- A study commissioned by the Federal Reserve Bank of Richmond (VA) found that by focusing its housing and capital improvement investments in particular areas, the City of Richmond's Neighborhood in Bloom program was able to show that their public and nonprofit investments were sufficient to induce current property owners and other private investors to better maintain and enhance the housing stock of the neighborhood. This effect occurred even beyond the target area defined by the City and was also accompanied by a 19% reduction in crime.

An organization representing the priorities of neighborhood residents is key to ensuring current residents benefit from revitalization and improvements can be sustained.

- Revitalization can occur in two main ways: 1) through the efforts of existing residents to improve the conditions of their neighborhood (which is called incumbent upgrading in the research) and 2) through an influx of private capital and new, wealthier residents (known as gentrification). The level of neighborhood organizing has been found to be a key factor in steering revitalization toward incumbent upgrading over gentrification.
- Research findings on gentrification document that residents that remain in the neighborhood often benefit from improved City services, decreases in crime, and even improved credit scores. However, these benefits often come at the cost of the most economically vulnerable residents who are at risk of being displaced due to increased real estate speculation and rising rents.
- Research also finds that while public and nonprofit investment can catalyze revitalization, they are insufficient for sustaining it. Neighborhood leaders have to focus on leveraging public and nonprofit efforts to promote stable private market investment – including property maintenance by current residents – to ensure neighborhood improvements continue.



Neighborhood Trend by Level of Private Investment

Older neighborhoods, especially lower-income ones, have to navigate between two extremes of private market investment. In many neighborhoods, particularly in Omaha, the greater challenge is under-investment that leads to the slow decline of the area. In other neighborhoods, particularly in high-demand areas such as New York City and the San Francisco Bay Area, a large influx of capital investment and new residents raises housing costs which displaces existing residents.

Health Impacts and Recommendations

Based on the available evidence, below are health impacts that will likely result from the Deer Park Neighborhood Redevelopment Plan and recommendations for promoting health benefits and minimizing harms experienced by neighborhood residents.

Housing Improvements

Health Impacts

- Building 5 new infill houses and rehabilitating 33 existing properties will improve health outcomes to the degree that exposure to lead paint, indoor air pollution, asthma triggers, and fire and safety hazards are reduced. These housing improvements would improve 4 out the 5 health priorities for Deer Park (birth outcomes, lead poisoning, asthma, and childhood injuries).
- With a total of 38 properties improved and Deer Park averaging 3.3 people per household, approximately 125 people would benefit directly from housing improvements. The improved housing quality will also benefit future residents of these locations.

- Cases of childhood lead poisoning and number of asthma attacks are likely to decrease due to housing conditions being improved for 38 properties. One factor in how much these cases are reduced is whether owner-occupied or rental properties are rehabbed.
- Approximately 60% of lead poisoning cases in Douglas County occur in rental properties despite only 37% of the population renting. Though the numbers of cases are limited, recent data shows a similar rate of lead poisoning in rental properties in Deer Park. Healthy housing assessment data from Omaha Healthy Kids Alliance found higher rates of asthma triggers, especially pests, in Deer Park rental properties.
- While the City of Omaha has citywide rehab programs that focus on rental properties, the 33 housing rehabs planned in Deer Park are for owner-occupied properties. Reductions to childhood lead poisoning and asthma attacks would be increased if rental properties in Deer Park were included.

Recommendations

The City of Omaha and Omaha Healthy Kids Alliance conducting before and after healthy home assessments to monitor the specific impact achieved by the 33 housing rehabs would also highlight opportunities to increase health benefits to program recipients. Key metrics to track include decreases in lead levels and asthma triggers as well as other improvements in indoor air quality.

The City of Omaha securing additional funding or partnerships to rehab rental properties would increase the health benefits experienced by lower income renters in Deer Park.

Deer Park rental property owners applying for the citywide rental rehab programs would also increase these health benefits.

Providing copies of the 2015 Landlord and Tenant Handbook developed by Legal Aid of Nebraska and engaging partners who provide education around tenant rights would also protect the health of renters in Deer Park.



Credit: Phil Rooney, Douglas County Health Department

Neighborhood Trajectory

Health Impacts	Recommendations
<ul style="list-style-type: none"> • Underinvestment by the private market in Deer Park (including by current property owners) is the key risk to the trajectory of the neighborhood. A large body of research has documented higher rates of death and illness in disinvested neighborhoods. • The level of investment the City of Omaha and its partners are making in Deer Park is likely to generate ripple effects that will improve the health of the entire redevelopment area of 3,500 people. Increased housing investments, fewer code enforcement violations, and reduced crime are likely effects based on the research. • The magnitude and sustainability of these impacts on the health of neighborhood residents will depend on the collaboration effectiveness with neighborhood residents. 	<p>The City of Omaha using early Deer Park partners meetings to define a common agenda and mutually reinforcing activities for catalyzing stable private real estate dynamics would likely increase the magnitude of the ripple effects from the Deer Park initiative and ensure health improvements can continue after the initiative ends.</p> <p>Monitoring permits for private market housing improvements and conducting post-initiative neighborhood scan of housing conditions would help determine if private investment has been catalyzed.</p>
<ul style="list-style-type: none"> • Rising housing costs can trigger negative health outcomes from overcrowding and displacement (especially for low-income renters). Overcrowding is linked to increased spread of infectious diseases, poor child development, as well as a greater safety risks. Displacement has been shown to cause detrimental health effects from increased stress and being forced into poorer living conditions including homelessness. • While not a strong risk at this time, Deer Park’s walkability and location approximately 1.5 miles from downtown Omaha could create gentrification pressure (and rising housing costs) in the future. 	<p>Using the Deer Park initiative to intentionally increase the capacity of the neighborhood association and other neighborhood institutions would aid in avoiding either private market extreme – disinvestment leading to slow decline or rising housing costs from gentrification.</p> <p>Developing affordable housing safeguards would help the City of Omaha promote mixed-income neighborhoods and protect the health of low-income residents. Examples include developing indicators of rising housing costs, enforcing eviction regulations, and exploring permanently affordable housing models such as community land trusts, limited equity cooperatives, and long-term deed-restricted housing programs.</p>
<ul style="list-style-type: none"> • The City’s investment in Deer Park is also an investment in improving health equity. Two-thirds of Deer Park residents are Latino. Disparities for Latinos have been consistently documented in Douglas County. For examples, 28% of Latino residents lack healthcare insurance compared to 19% for African Americans and 9% for Whites. • The degree that health disparities are reduced depends on involving Latino residents including non-English speakers and individuals who might not be U.S. citizens. 	<p>Making the programs offered by the City of Omaha and its partners available bilingually and biculturally would better reach the Latino population of Deer Park and reduce health disparities. Securing partners: 1) with funding that can be used for legal immigrants or 2) who do not have eligibility criteria based on immigration status would also improve health equity.</p> <p>Involving Metropolitan Community College, especially their Express program, would provide job-readiness opportunities for residents of Deer Park. It could also provide second language classes (included Spanish for English native residents) which would improve the capacity of the residents to work together effectively.</p>
<ul style="list-style-type: none"> • Obesity and diabetes are the only health priorities for Deer Park that would not be directly affected by housing. • Improved lighting and free family activities were two priorities identified by neighborhood residents that would increase physical activity and thus reduce chronic diseases like obesity and diabetes. • Based on best practice research compiled by the University of Wisconsin, streetscape and other sidewalk improvement efforts would also increase physical activity (and pedestrian and cyclist safety). • Street trees have been shown reduce air pollution and stress. For example, a recent study found that areas with a high number of street trees provided residents with health benefits equivalent to \$10,000 more in income or being seven years younger. Emerald Ash Borer will likely kill many ash trees when it arrives in Omaha, which would increase health risks in Deer Park. 	<p>Several opportunities exists for the Deer Park Neighborhood Association and the Vinton Street Merchants Association to increase their capacity to involve residents and new partners while also creating health benefits in the neighborhood.</p> <ul style="list-style-type: none"> • Holding free family programming (e.g. National Night Out or Open Street events) at public spaces in Deer Park. • Partnering with City of Omaha Public Works Department on 1) streetscape improvements to Vinton Street and 2) identifying sidewalk repair and lighting issues especially near Castelar Elementary and Deer Park Hollow. • Engaging Keep Omaha Beautiful, the Nebraska State Arboretum’s ReTree Nebraska program, and the City of Omaha Parks Department to increase the number of non-ash trees in Deer Park.

Conclusions

1. The City of Omaha's housing improvements will directly benefit the health of approximately 125 current residents of Deer Park. Pre and post healthy home assessments would ensure that opportunities to improve health impacts related to birth outcomes, lead poisoning, asthma, and childhood injuries are found and that results are tracked. Funding for rental property rehabilitation, combined with partnerships to serve individuals that are not U.S. citizens as well as those who do not speak English, would make certain the most at-risk neighborhood residents benefit from the City's efforts.
2. The level of investment being made by the City and its partners is likely to trigger ripple effects in Deer Park that will improve the health of the 3,500 residents through increased housing investment, fewer code enforcement violations, and reduced crime. Defining a common agenda and mutually reinforcing activities with neighborhood residents and investors will increase the magnitude and sustainability of these ripple effects. The key outcome is to catalyze stable private real estate dynamics that will sustain Deer Park after the two year initiative ends so a stronger trajectory for the neighborhood is created while maintaining housing affordability.
3. The Deer Park Neighborhood Association and the Vinton Street Merchants Association can improve physical activity, safety, and air quality (as well as the vitality of the neighborhood as a whole) by building partnerships to: 1) program family events at neighborhood public spaces; 2) enhance the streetscape on Vinton; and 3) identify opportunities to improve lighting and sidewalks and increase street trees.



BUILD WITH HEALTH

Build with Health is a collaboration between the Douglas County Health Department, the City of Omaha, and eight other partners (Omaha by Design, MAPA, Live Well Omaha, CHI Health, Omaha Healthy Kids Alliance, Nebraska Department of Health and Human Services, UNMC College of Public Health, and ONE Omaha). *Build with Health* focuses on using community design and neighborhood engagement to create healthy, thriving places throughout Omaha.

For more information on *Build with Health* or Health Impact Assessments, please contact:

Andy Wessel, MPH
Douglas County Health Department
(402) 444-7225
andy.wessel@douglascounty-ne.gov

Supplemental Information for this HIA is available in the Appendices -- see attached or go to <http://www.douglascountyhealth.com/healthy-community/health-impact-assessments>.

This Health Impact Assessment was supported by a grant from the Health Impact Project, a collaboration of the Robert Wood Johnson Foundation and The Pew Charitable Trusts. The opinions expressed are those of the Douglas County Health Department and do not necessarily reflect the views of the Health Impact Project, Robert Wood Johnson Foundation or The Pew Charitable Trusts.



Deer Park Health Impact Assessment Supplemental Information

January 2016

The report for the Deer Park Health Impact Assessment (HIA) was intentionally designed in an issue brief format to be readable and engaging for community members and other stakeholders. As a result, a large amount of the information generated during the HIA was not included. The following appendices make this information available to those who are interested in exploring these areas in more depth.

Full-size Visuals *Appendix A*

- *Deer Park Redevelopment Boundaries*
- *Vinton Street Photos*

HIA Methodology & Monitoring *Appendix B*

Additional Research Information *Appendix C*

- *Deer Park Health Status*
- *Deer Park HIA Scope*
- *Deer Park Neighborhood Vital Signs*

Deer Park Neighborhood Priorities Report *Appendix D*

References *Appendix E*

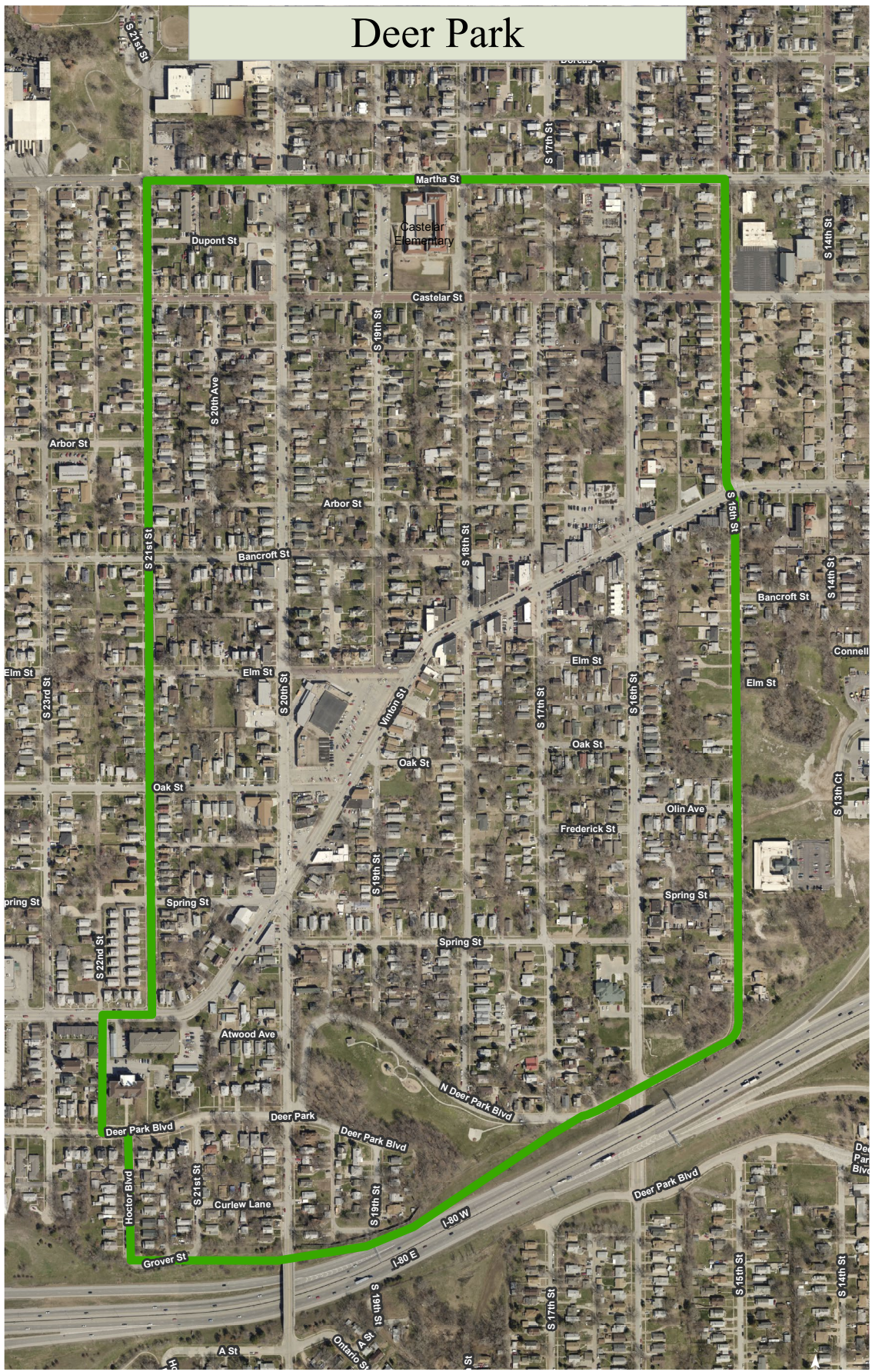
Individuals who are interested in conducting a similar HIA – or local stakeholders who have questions or comments about the HIA methodology or findings – are welcome to contact the Douglas County Health Department to learn more.

Primary Contact:
Andy Wessel, MPH
Community Health Planner
Douglas County Health Department
(402) 444-7225
andy.wessel@douglascounty-ne.gov

Appendix A

Full-sized Visuals

Deer Park Redevelopment Boundaries



Vinton Street



Credit: Phil Rooney, Douglas County Health Department



Credit: Phil Rooney, Douglas County Health Department



Credit: Phil Rooney, Douglas County Health Department



Credit: Phil Rooney, Douglas County Health Department



Credit: Phil Rooney, Douglas County Health Department



Credit: Omaha by Design

Appendix B

HIA Methodology & Monitoring

Deer Park HIA Methodology and Monitoring

The Deer Park Health Impact Assessment (HIA) was conducted under Build with Health – a collaboration between the Douglas County Health Department, the City of Omaha, and over a half dozen other partners. Build with Health focuses on using community design and neighborhood engagement to create healthy, thriving places throughout Omaha.

The core principles of Build with Health are:

- All neighborhoods – no matter where they are in Omaha – should provide a healthy environment.
- Because the effects from housing, transportation, and real estate development decisions will last for decades, it is important to weigh health impacts at the time of decision-making.
- Using health as a shared value can help bridge silos and improve communication in order to develop solutions and collaborate more effectively.

The Health Impact Assessment (HIA) work for Deer Park was conducted by members of a local HIA Team who included:

- Andy Wessel, Community Health Planner (Douglas County Health Department)
- Bill Lukash, Environmental Compliance Planner (City of Omaha Planning Department)
- Derek Miller, Transportation Planner (City of Omaha Planning Department)
- Heather Tippey Pierce, General Services Manager (City of Omaha Public Works Department)
- Dennis Bryers, Park Planner (City of Omaha Parks, Recreation and Public Properties Department)
- Joel Cota, Community Liaison (City of Omaha Mayor’s Office)
- Michael Helgerson, Transportation Planner (Metropolitan Area Planning Agency)
- Kelly Bouxsein, Healthier Communities Administrator (CHI Health)

The work of the HIA Team is overseen by a 20 member Build with Health steering committee of senior Omaha leaders. They include amongst others:

- The Douglas County Health Director
- The City Planning Director
- The City Engineer and Traffic Engineer
- The Executive Directors of the Metropolitan Area Planning Agency, Omaha Healthy Kids Alliance, Live Well Omaha, and Omaha by Design

Screening

The Deer Park HIA was selected because the Neighborhood Redevelopment process is a regularly occurring effort to improve housing and neighborhood conditions, which are key social determinants of health. Since the focus neighborhoods are heavily minority and low income, the Neighborhood Redevelopment process also is a strong venue for addressing health equity by improving living conditions and addressing the capacity of neighborhood residents to collectively improve their lives.

To maximize the impact of limited funds, the City of Omaha Planning Department focuses its neighborhood redevelopment efforts, which are funded primarily through HUD and the Nebraska Affordable Housing Trust Funds (NAHTF), on a particular neighborhood for two years. To authorize the acquisition of property and the use of federal and state funding, the City of Omaha creates a Redevelopment Plan for the neighborhood that: 1) documents demographic and housing/land use characteristics and 2) provides a basic outline for future housing-related redevelopment activities.

In 2014, the City of Omaha completed a redevelopment plan so that Deer Park, a historic and predominantly Latino neighborhood, could be the focus of activities in 2016-2017. More specifically, a 200 acre portion of the nearly 1,700 acre Deer Park neighborhood was prioritized. This 200 acre area surrounds the Vinton Street commercial corridor.

The primary decision for the HIA to inform was the selection of implementation outcomes by City Planning staff. The selection of implementation outcomes also informs funding and collaboration structure decisions. In addition to addressing health and health equity, a key component of the HIA was also ensuring neighborhood priorities and long-term sustainability consideration were incorporated into the implementation outcome selection process.

Multiple meetings were held with David Thomas and Bill Lukash with the Housing and Community Development division of City Planning around the decisions to focus on for this HIA. These meetings were informed by prior involvement with the Deer Park Neighborhood Association in the creation of the Deer Park Redevelopment Plan and a subsequent Environmental Assessment. Current engagement of the neighborhood residents during screening included multiple conversations with Oscar Duran, the president of the Deer Park Neighborhood Association and the South Omaha Neighborhood Alliance.

Scoping

The overall population to be affected by the implementation of the Deer Park Redevelopment Plan is the approximately 3,500 neighborhood residents. There are also two large subpopulations to further consider for the Deer Park neighborhood. The first is the two-thirds of Deer Park residents who are Latino. The second is the large percentage of residents (~52%) who are renters.

The HIA Team reviewed baseline health information from: 1) a 2011 Adult Community Health Needs Assessment (CHNA); 2) a 2012 Child and Youth Community Health Needs Assessment; and 3) birth and death vital statistics data to look closely at the disease burden experienced by these neighborhood residents. Five areas emerged as priorities for improving health outcomes amongst Deer Park residents: 1) low birth weight and pre-term births; 2) lead poisoning; 3) asthma; 4) childhood injuries; and 5) obesity & diabetes (See Deer Park Health Status for more information).

More detail about research questions, analytic methods, and data sources can be found in the separate HIA Scope document (see attached). By partnering with Oscar Duran, the president of the neighborhood association, funding from the HIA was used for canvassing neighborhood residents to create a Deer Park Neighborhood Priorities Report related to the five key health issues identified through the scoping process (see attached).

Assessment

A key aspect of the assessment for Deer Park was to create a set of neighborhood-level indicators which were called Neighborhood Vital Signs (see attached). In addition to providing additional information on current conditions, the goal was to select indicators that could be used for monitoring progress toward neighborhood stability in Deer Park. Monthly meetings were held with the multidisciplinary Health Impact Assessment Team for developing the Deer Park Vital Signs. Additionally, both local and national experts on neighborhood-level indicators were consulted. This included members of a national advisory panel that was responsible for creating the Healthy Community Assessment tool, which was a joint project between HUD's Office of Lead Hazard Control and Healthy Homes and the City of Minneapolis Health Department. Multiple separate meetings were also held with City of Omaha staff in the Housing and Community Development section and with the president of the Deer Park Neighborhood Association for vetting purposes.

Examples of key findings from the Deer Park Vital Signs are:

- Life expectancy in ZIP code 68108, which includes Deer Park, is 74.3 years – 4.5 years less than all of Douglas County. To provide context for these figures, life expectancy in Deer Park is similar to Bulgaria or El Salvador while Douglas County is equivalent to the United States.
- Approximately 78% of residents remain there from year to year – a rate similar to Douglas County as a whole.
- 52.4% of adults in Deer Park are a high school graduate compared to 89.5% of Douglas County.
- 89.3% of housing units in Deer Park are occupied similar to 92.3% for Douglas County.

Over seventy-five research articles and reports were reviewed as part of the literature review for the Deer Park HIA. A key component was determining both the direct and ripple effect impacts of the core intervention of the redevelopment plan, which was to build 5 new infill houses and rehab 33 existing properties. These findings are reviewed in more depth in the HIA Brief (see HIA Brief), but **the key takeaway is that the housing intervention will directly impact 125 residents but is also likely to trigger ripple effects (such as improved housing conditions, fewer code enforcement violations and reduced crime) that would benefit the larger 3,500 residents of Deer Park.**

These research findings (plus the local data from the Neighborhood Vital Signs) were subsequently shared with both the HIA Team and at a meeting with leaders from the City of Omaha, Omaha Healthy Kids Alliance, Habitat for Humanity, and the Deer Park Neighborhood Association. Initial recommendations were also developed at this meeting with key leaders.

Recommendations and Reporting

See Deer Park HIA Brief report for how recommendations were developed to be actionable and based on stakeholder input.

Evaluation and Monitoring

Both process and impact evaluations will be completed for this HIA. Additionally, as described under the Assessment section, a key goal of creating the Neighborhood Vital Signs was to identify neighborhood-level indicators that could assist with monitoring changes to the Deer Park neighborhood. Also, the City of Omaha has developed a quality of life survey that can be administered in Deer Park after the initiative to track changes in resident perceptions. Lastly, the Build with Health collaborative will continue to work on promoting healthy neighborhoods, which will include partnering with the City of Omaha Planning Department on the implementation of the Deer Park Redevelopment Plan.

Additional Research Information

Deer Park Health Status

This document provides a snapshot of key health outcomes for the Deer Park neighborhood. The goal is to use this snapshot (along with other information gathered as part of a Health Impact Assessment) to improve the health of the 3,500 people who live in the Deer Park Neighborhood Redevelopment Plan area as part of a two year revitalization effort that will begin in 2016. The Deer Park redevelopment is being led by the City of Omaha and the Deer Park Neighborhood Association and so key to the success of that goal of improving the health of neighborhood residents is determining where housing and community development activities, neighborhood priorities, and health outcomes all overlap.



In reviewing the health outcomes data, the areas that seem most promising are preventing: 1) **births that are low weight or preterm**; 2) **lead poisoning**; 3) **asthma**; 4) **childhood injuries**; and 5) **obesity & diabetes**.

Neighborhood Description and Demographics

The City of Omaha focuses its revitalization efforts on one neighborhood at a time to ensure its impact is significant and sustainable. For 2016-2017 that neighborhood will be one of the oldest in Omaha, Deer Park, which is located in south Omaha. More specifically, the Deer Park Neighborhood Redevelopment Plan will focus on a 200 acre portion of Deer Park bounded by Martha St. on the north, 15th St. on the east, Interstate 80 on the south and 21st St. on the west. This area surrounds the Vinton St. commercial corridor, one of the most prominent retail areas in south Omaha.

Approximately two-thirds of the people who live in the Deer Park focus area are Latino, 4% are African American, and 2% are Native American. The population is also young with the median age in the neighborhood being 28. Every age group younger than 35 years has a higher proportion than Omaha in general. About half the properties in the neighborhood are owner-occupied; however, this number is lower than before the housing crisis that began in 2006. Poverty and unemployment are both much higher in Deer Park than for Omaha.

Note: Due to survey design and response limitations plus individual privacy concerns, health data is often not available at a neighborhood level. While the data for a larger area that contains a neighborhood is likely to give a fairly accurate description of health characteristics for the neighborhood, it is not possible to be certain. To that end, much of the following data is from Community Health Needs Assessments, which were designed to break Omaha down into four different quadrants of Omaha. The data used for Deer Park is from the Southeast quadrant, which is east of 72nd St and south of Dodge.

Birth Outcomes

What the Data Show

Compared to other areas in Omaha, a high density of infants in Deer Park are born weighing less than 5 lbs 8 oz (low birth weight) or are born at least 3 weeks early (preterm).

Why It Matters

Babies that are not fully developed when they are born are much more likely to have complications and to die before their first birthday. Complications include learning disabilities and developmental delays, cerebral palsy, and problems with breathing, vision and hearing.

What Can Be Done

Preventable Causes and Contributing Factors to Poor Birth Outcomes

Smoking/Exposure to Secondhand Smoke, Indoor and Outdoor Air Pollution, Exposure to Lead and Other Toxins Including Pesticides, Drug and Alcohol Use, Stress, Domestic Violence, Lack of Social Support, Poor Nutrition, Lack of Physical Activity, Poverty, and Late or No Prenatal Care

Potential Evidence-based Interventions to Address Contributing Factors

Housing

- Smokefree housing
- Better control of indoor air pollution sources and improved ventilation
- Lead paint remediation or abatement
- Integrated pest management

Neighborhood

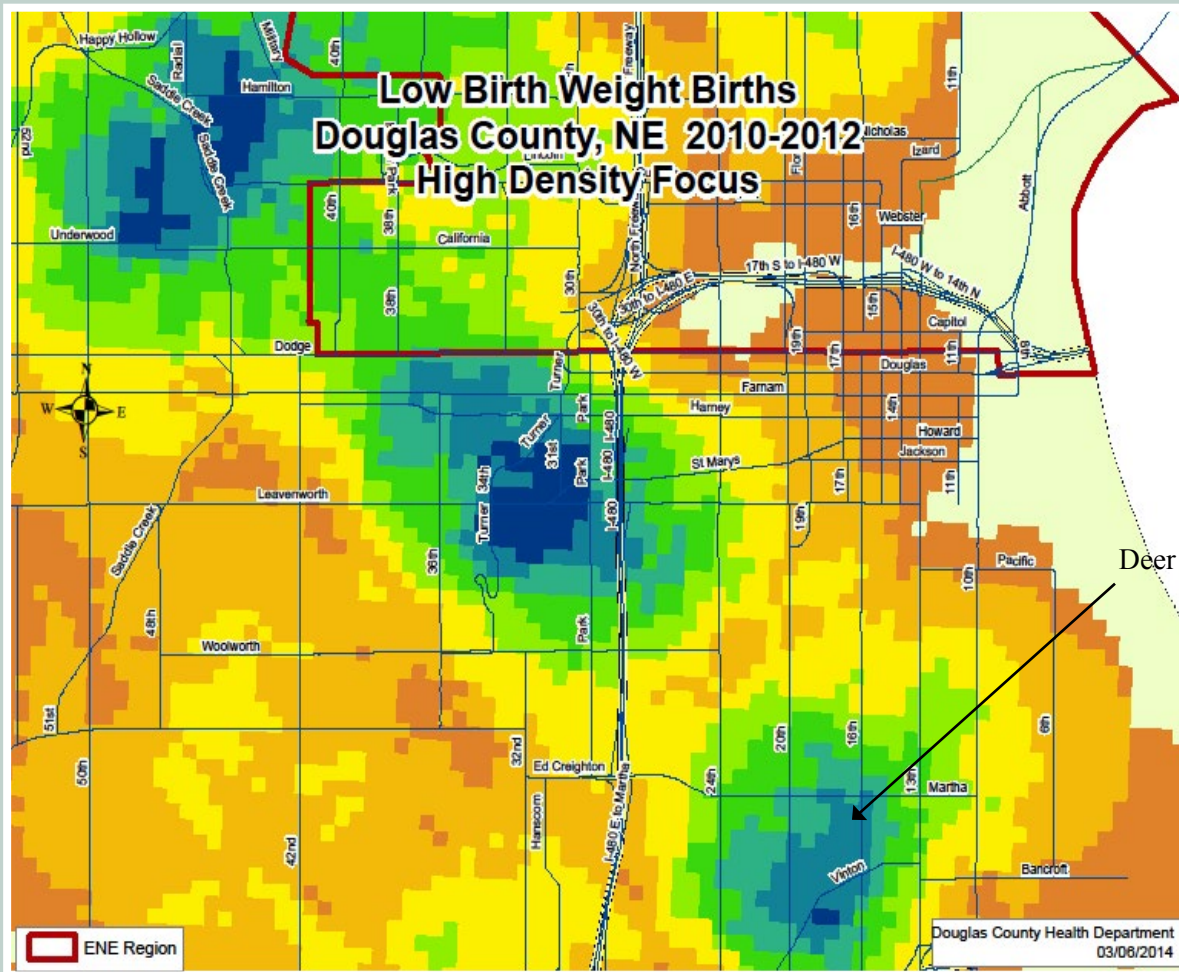
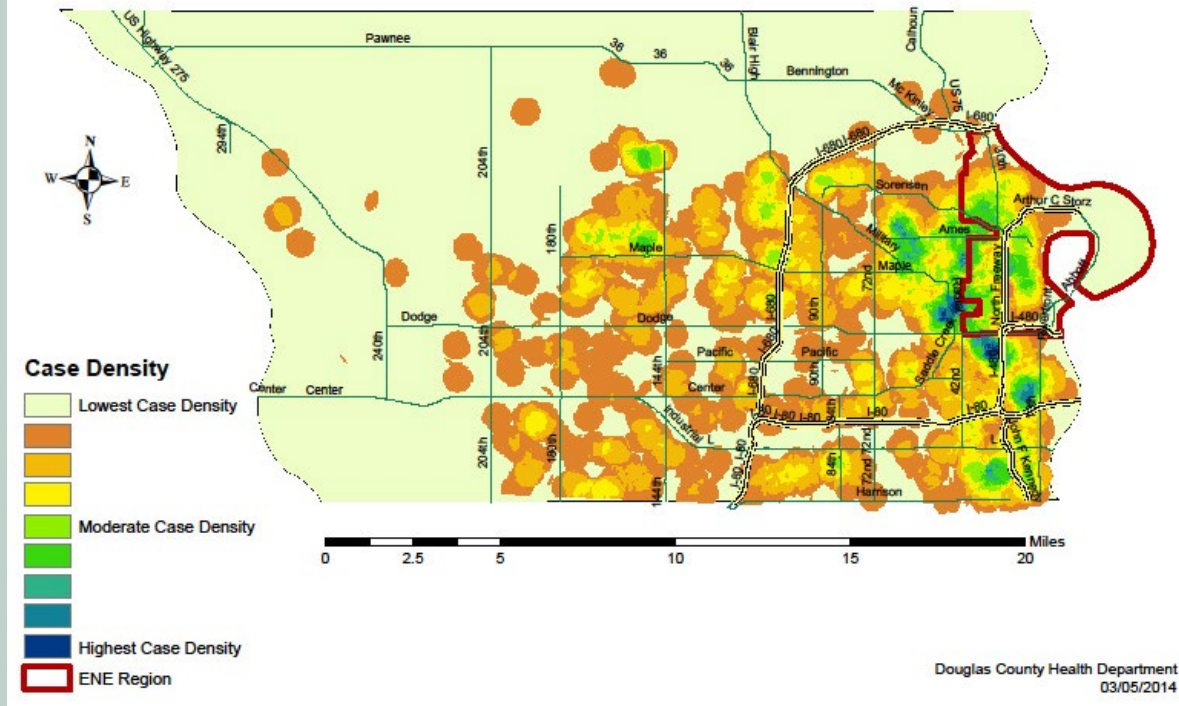
- Social support/coping skills
- Tree planting
- Street/sidewalk improvements
- Community gardens & farmer markets

Outside Neighborhood

- Active transportation & commuter choice programs
- Better control of outdoor air pollutions sources
- Prenatal care access

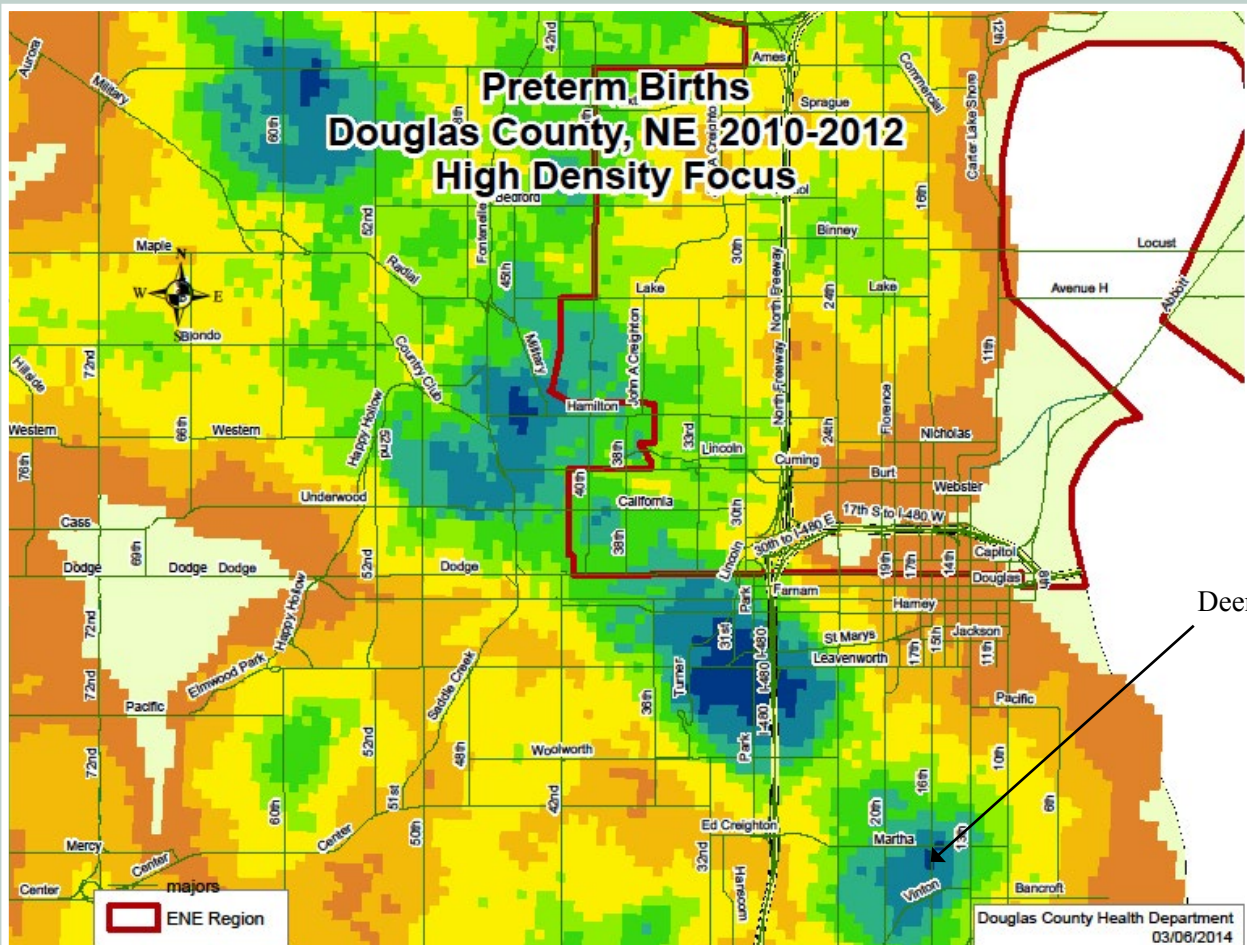
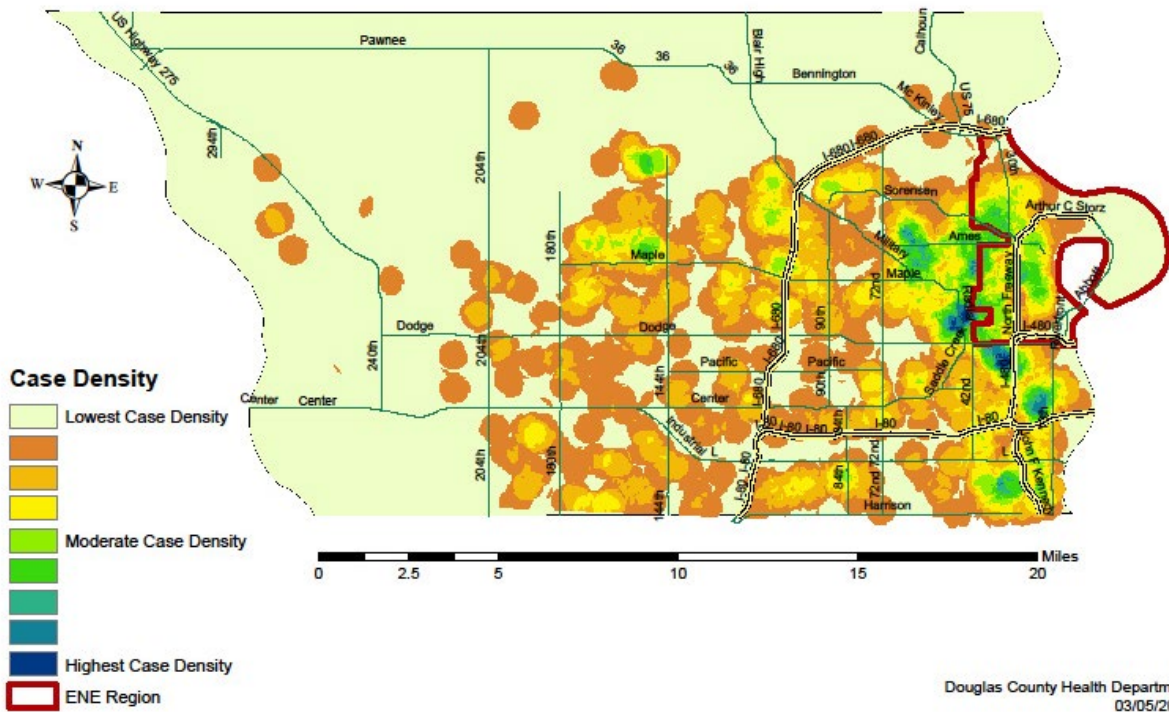
Birth Outcomes (continued)

**Low Birth Weight Births
Douglas County, NE 2010-2012**



Deer Park

Low Birth Weight Births Douglas County, NE 2010-2012



Lead Poisoning

What the Data Show

Deer Park is located within the Lead Superfund site for Omaha, which is the largest residential Superfund site in the U.S. The 2004 Public Health Assessment done by the U.S. Agency on Toxic Substances and Disease Registry (ATSDR) showed Deer Park as an area with a high number of cases of lead poisoning (see below). About 1 in 10 children tested positive for elevated blood lead levels at that time. The risk has greatly diminished over the past decade; however, seven children still tested positive for elevated blood lead in 2014 in ZIP code 68108 (see below).

Why It Matters

Lead poisoning can damage a child's brain and nervous system. This damage can make it more difficult for children to learn and pay attention which can affect school performance. Higher lead levels can damage the kidneys and other major organs and can even lead to seizures and death. Lead exposure in pregnant woman can cause miscarriages and other poor birth outcomes like low birth weight or preterm babies.

What Can Be Done

Preventable Causes and Contributing Factors for Lead Poisoning

Lead Dust and Lead-based Paint in Homes Built Before 1978, Contaminated Soil, Water from Pipes Containing Lead Solder

Potential Evidence-based Interventions to Address Contributing Factors

Housing (including childcare sites)

- Lead paint remediation or abatement
- Soil remediation

Neighborhood

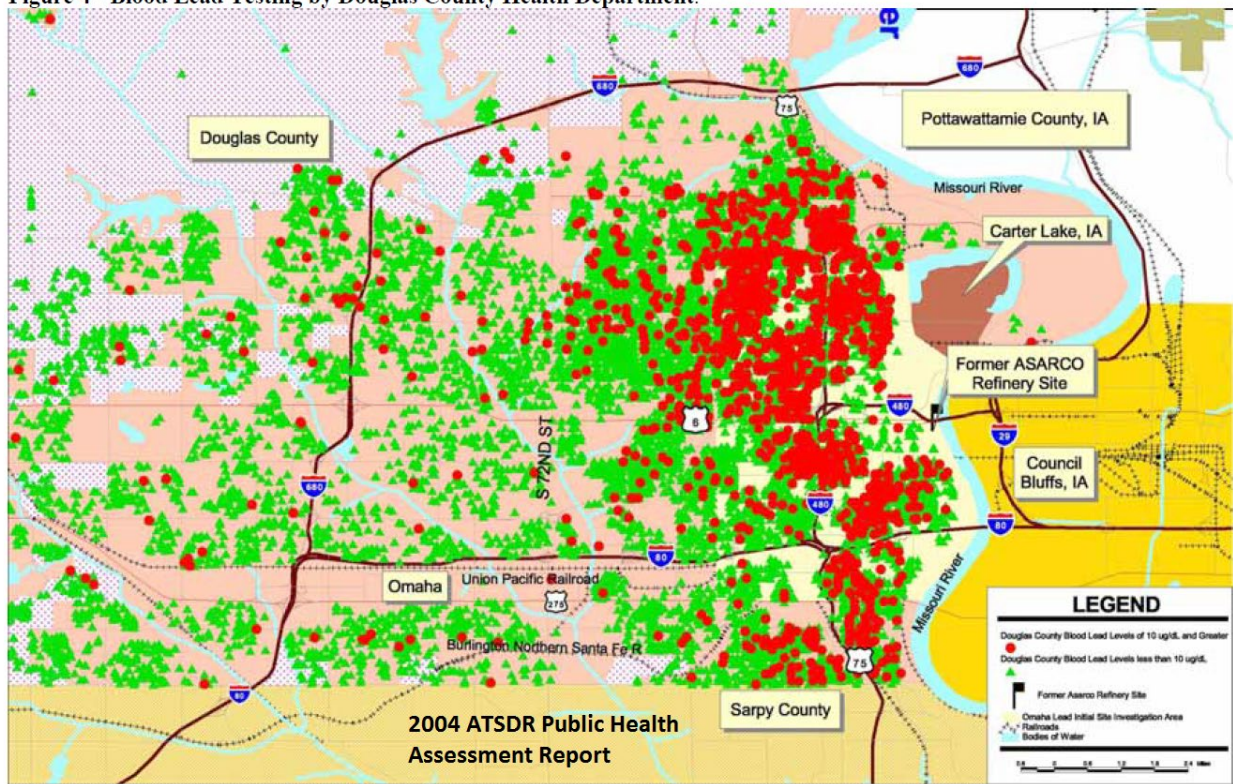
- Education on lead poisoning prevention

Outside Neighborhood

- Tenant Protections

Lead poisoning (continued)

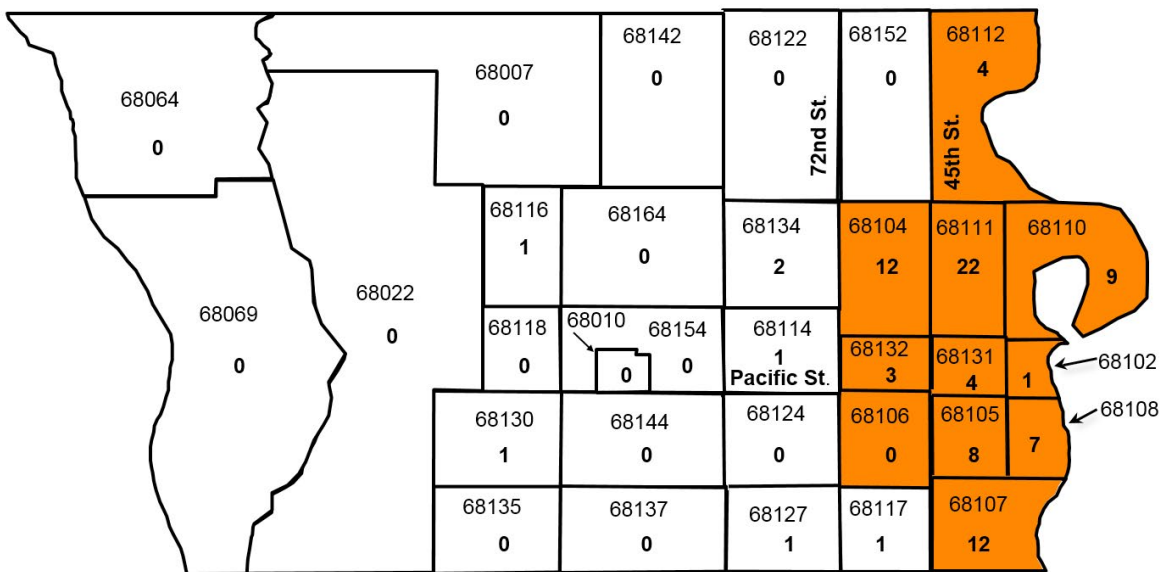
Figure 4 - Blood Lead Testing by Douglas County Health Department.



CLPPP Target Areas

Douglas County, NE 2014

Number of EBLs by Zip Code



2014 Screening Results: 17,073 Children tested, 89 EBLs

Areas at higher risk for lead exposure and CLPPP Target Zip Codes

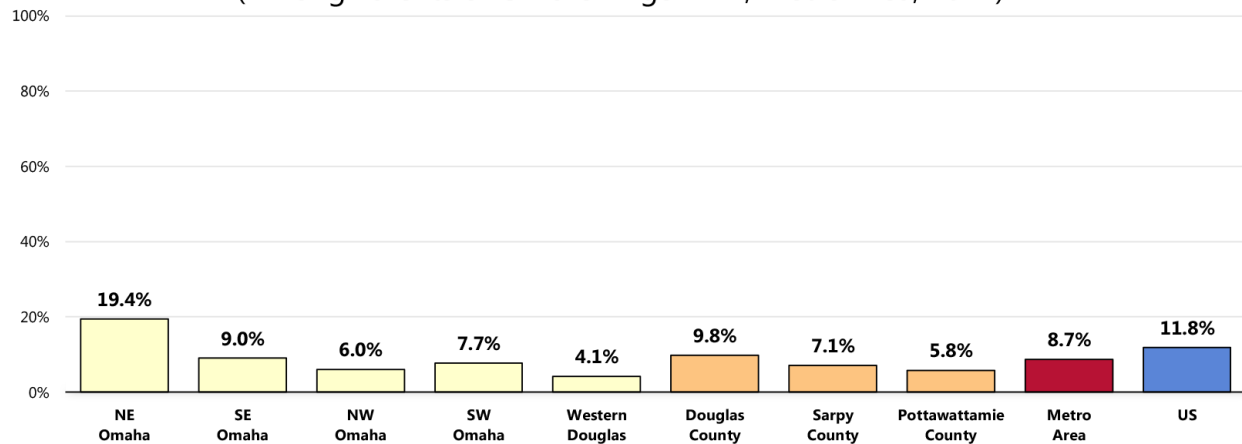
Source: DCHD Childhood Lead Poisoning Prevention Program

Data Analysis Conducted By: DCHD Communicable Disease and Epidemiology Section

Douglas County Health Department 02/13/2015

Child Currently Has Asthma

(Among Parents of Children Age 1-17; Metro Area, 2012)



Sources: • 2012 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 141]
 • 2011 PRC National Health Survey, Professional Research Consultants, Inc.
 Notes: • Asked of respondents about a randomly-selected child aged 1-17 in the household.

What the Data Show

Almost 1 in 10 children in southeast Omaha (roughly east of 72nd Street and south of Dodge within Douglas County) currently have asthma. This rate is second only to Northeast Omaha. (Note: For adults in southeast Omaha, the asthma rate is almost 11%, which is the highest in Omaha).

Why It Matters

Asthma affects the lungs and causes episodes of wheezing and difficulty breathing that can usually be treated but can be fatal. It is one of the most common and most serious chronic diseases for children and is a leading cause of emergency room visits, hospitalizations, and missed school days.

What Can Be Done

Preventable Causes and Contributing Factors for Asthma Complications

Asthma Triggers (Tobacco Smoke, Dust Mites, Outdoor Air Pollution, Cockroach Allergen, Mold, Pet Dander), Educational Achievement, Poverty

Potential Evidence-based Interventions to Address Contributing Factors

Housing (Including childcare sites)

- Allergen-blocking pillow and mattress covers
- Professional-level cleaning
- Integrated pest management
- Improved ventilation, air filtering and humidity control
- Carpet removal

Neighborhood

- Street/sidewalk improvements
- Non-allergenic tree planting

Outside Neighborhood

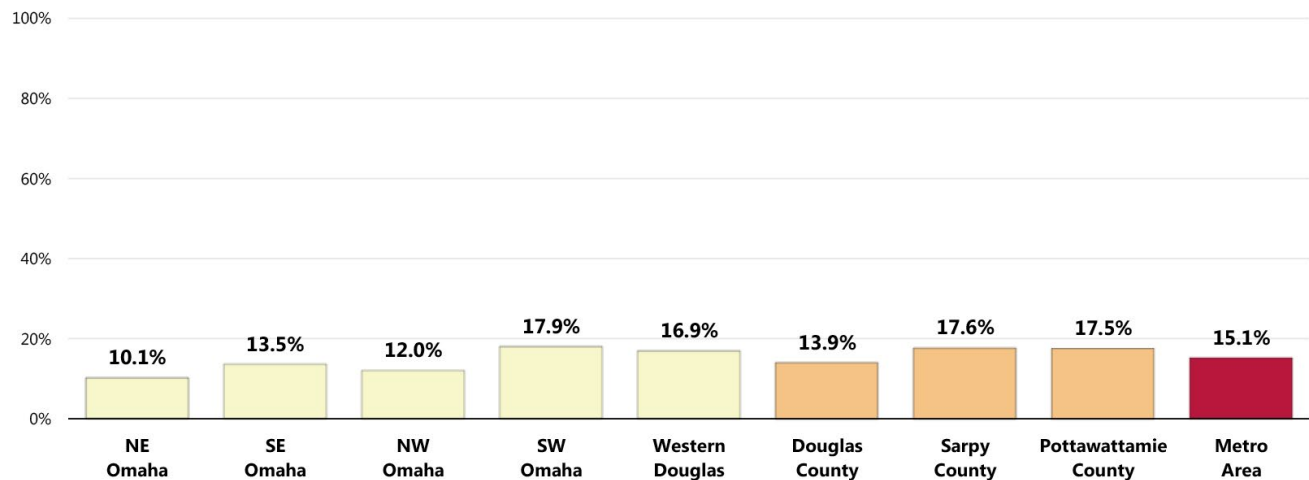
- Active transportation & commuter choice programs
- Air pollution controls for point sources
- Breastfeeding promotion programs

Leading Causes of Child Deaths by Age Group (Metro Area, 1999-2008)

Omaha Metro Area	Under 1 Year	Ages 1 to 4	Ages 5 to 9	Ages 10 to 14	Ages 15 to 19
Number-One Leading Cause	Perinatal Conditions*	Accidents	Accidents	Accidents	Accidents (especially Motor Vehicle Crashes)
Number-Two Leading Cause	Congenital Conditions**	Homicide	Cancer	Cancer	Suicide
Number-Three Leading Cause	SIDS***	Cancer	n/a	n/a	Homicide

- Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted March 2012.
- Notes: • *Perinatal conditions include certain conditions occurring in the perinatal period, usually low birthweight, preterm birth, and complications of pregnancy, labor and delivery.
 • **Congenital conditions include congenital malformations, deformations and chromosomal abnormalities.
 • ***SIDS is Sudden Infant Death Syndrome.

Child Was Injured Seriously Enough to Need Medical Treatment in the Past Two Years

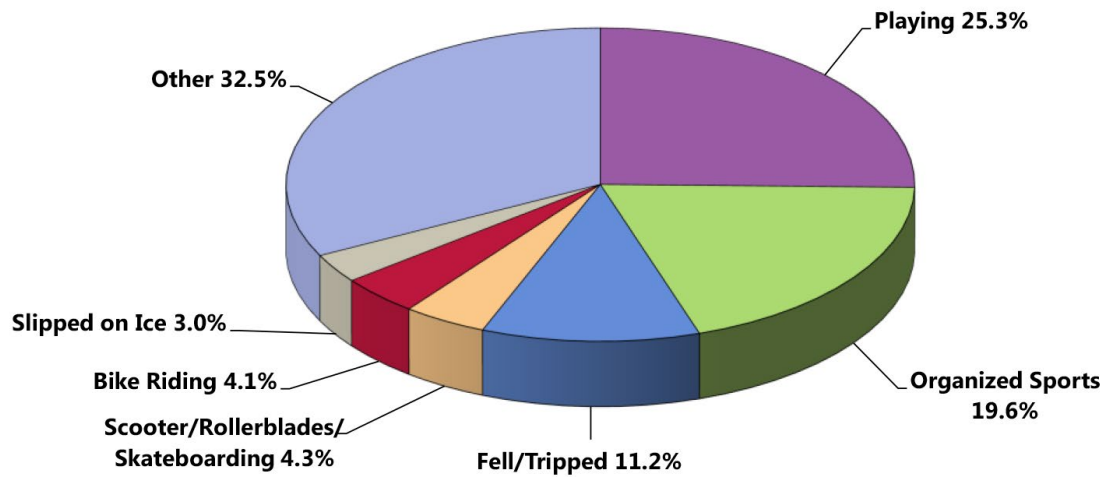


- Sources: • 2012 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 66]
- Notes: • Asked of all respondents about a randomly-selected child in the household.

Childhood Injuries (continued)

Child's Activity When Most Seriously Injured in Past Two Years

(Parents of Children Who Were Seriously Injured in the Past Two Years; Metro Area, 2012)



Sources: • 2012 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 68]
 Notes: • Asked of all respondents about a randomly-selected child in the household who was seriously injured in the past two years.

What the Data Show

Injuries are the leading cause of death in children over the age of 1. Over a two year period, one out of every eight children in southeast Omaha (roughly east of 72nd Street and south of Dodge within Douglas County) is injured seriously enough to need medical treatment, which is a moderate rate compared to other areas of Omaha. The rates for Deer Park is likely similar, but not for certain.

Why It Matters

In addition to being the leading cause of death in young people, injuries can lead to permanent disability affecting a person's ability to live up to their full potential. Also, emergency room visits and other medical costs can be financial burdens to low-income families. While injuries are often attributed to "accidents," they are typically preventable.

What Can Be Done

Preventable Causes and Contributing Factors to Childhood Injuries

Falls, poisoning, motor vehicle crashes, violence, suicide, fires, drowning, etc.

Potential Evidence-based Interventions to Address Contributing Factors

Housing

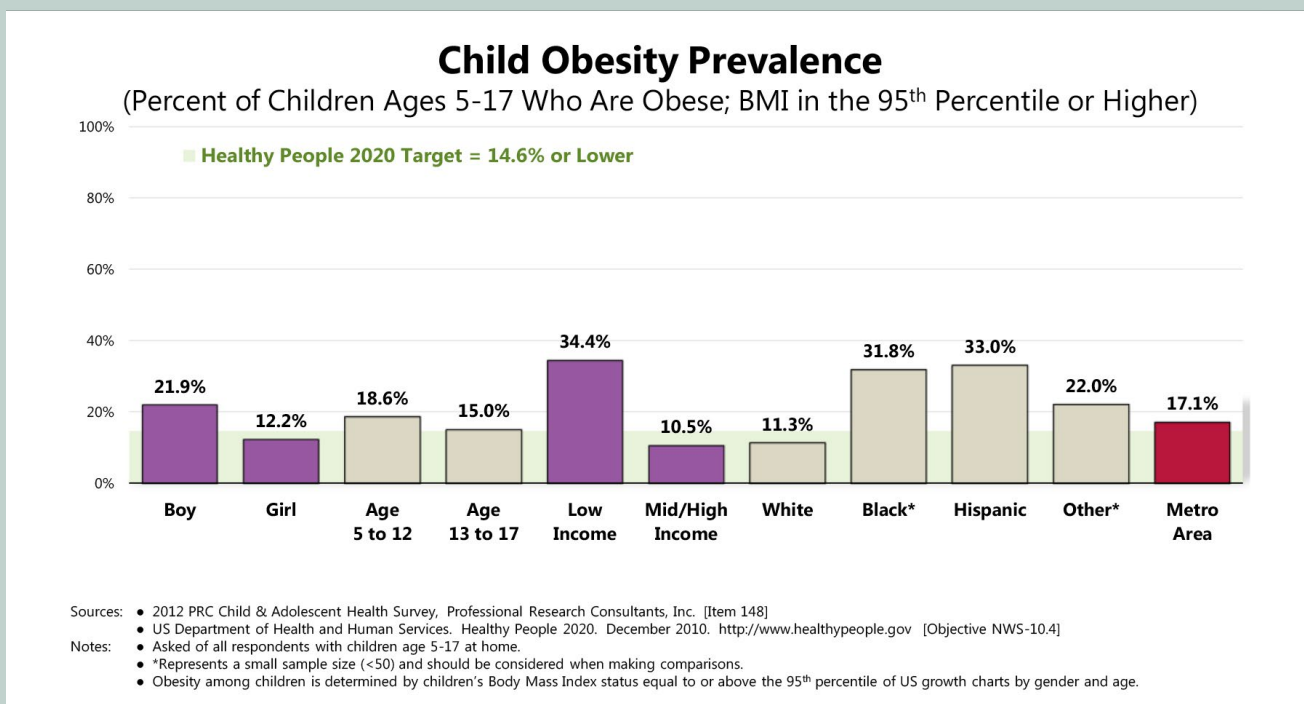
- Safety code violations
Poison control measures (including Integrated Pest Management)
- Smokefree housing & other fire prevention measures

Neighborhood

- Parental/community supervision
- Street/sidewalk improvements including traffic calming

Outside Neighborhood

- Safety education including seatbelt/car seat campaigns
- Active transportation and commuter choice programs
- Traffic law enforcement



What the Data Show

1 in 4 children in southeast Omaha (roughly east of 72nd Street and south of Dodge within Douglas County) are obese. This rate is second only to northeast Omaha. The prevalence for children in Deer Park is likely similar.

Why It Matters

Obesity rates in children have more than tripled in a generation. Obese children are more likely to develop diabetes, have breathing problems including asthma and sleep apnea, suffer from joint and muscle pain, and be at risk for cardiovascular disease. Also obese children are more likely to experience stigma and poor self-esteem that can create social and psychological problems that can continue in to adulthood.

What Can Be Done

Preventable Causes and Contributing Factors to Childhood Obesity

Physical Inactivity (Environments that do not support walking & biking to school & other locations; sedentary behavior at home and school including screen time, less time for PE, recess, and active play); and Poor Nutrition (Environments with high levels of sugary drinks and other unhealthy foods high in calories, sugar, salt and fat; increased portion sizes; screen time leading to increased snacking)

Potential Evidence-based Interventions to Address Contributing Factors

Housing

- Stair improvements and promotion in apartments

Neighborhood

- Safe Routes to School & Walking school buses
- Community gardens & farmers markets
- Street/sidewalk improvements
- Access to gyms, parks, recreation centers, trails, mixed-use, etc.

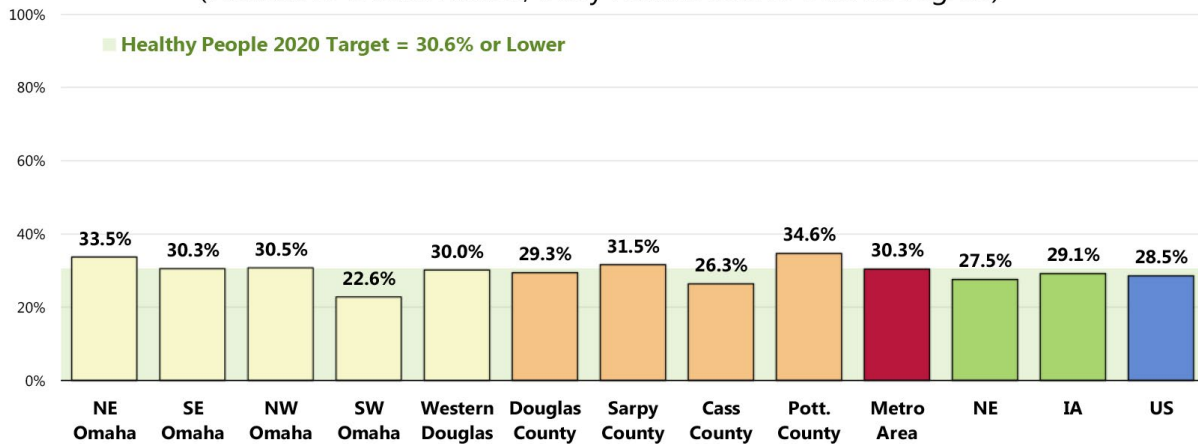
Outside Neighborhood

- School-based physical activity & nutrition activities
- Active transportation programs
- Breastfeeding promotion programs

Adult Obesity

Prevalence of Obesity

(Percent of Obese Adults; Body Mass Index of 30.0 or Higher)



Sources: • 2011 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 189]
 • 2011 PRC National Health Survey, Professional Research Consultants, Inc.
 • US Department of Health and Human Services. Healthy People 2020. December 2010. <http://www.healthypeople.gov> [Objective NWS-9]
 • Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2010 Nebraska and Iowa data.

Notes: • Asked of all respondents.
 • Based on reported heights and weights, asked of all respondents.
 • The definition of obesity is having a body mass index (BMI), a ratio of weight to height (kilograms divided by meters squared), greater than or equal to 30.0, regardless of gender.

What the Data Show

3 in 10 adults in southeast Omaha (roughly east of 72nd Street and south of Dodge within Douglas County) are obese. This rate is very similar to Douglas County and the Omaha Metro overall.

Why It Matters

Obesity rates in adults have more than doubled since 1980 which has also contributed to increasing healthcare costs. Obesity increases the risk of numerous chronic diseases including cardiovascular disease, diabetes, cancer, stroke, sleep apnea, and arthritis. A person with obesity pays an average of almost \$1,500 more in healthcare costs each year.

What Can Be Done

Preventable Causes and Contributing Factors to Adult Obesity

Physical Inactivity (Environments that do not support walking & biking; sedentary behavior at work and home including screen time) and Poor Nutrition (Environments with high levels of sugary drinks and other unhealthy foods high in calories, sugar, salt and fat; increased portion sizes; screen time leading to increased snacking)

Potential Evidence-based Interventions to Address Contributing Factors

Housing

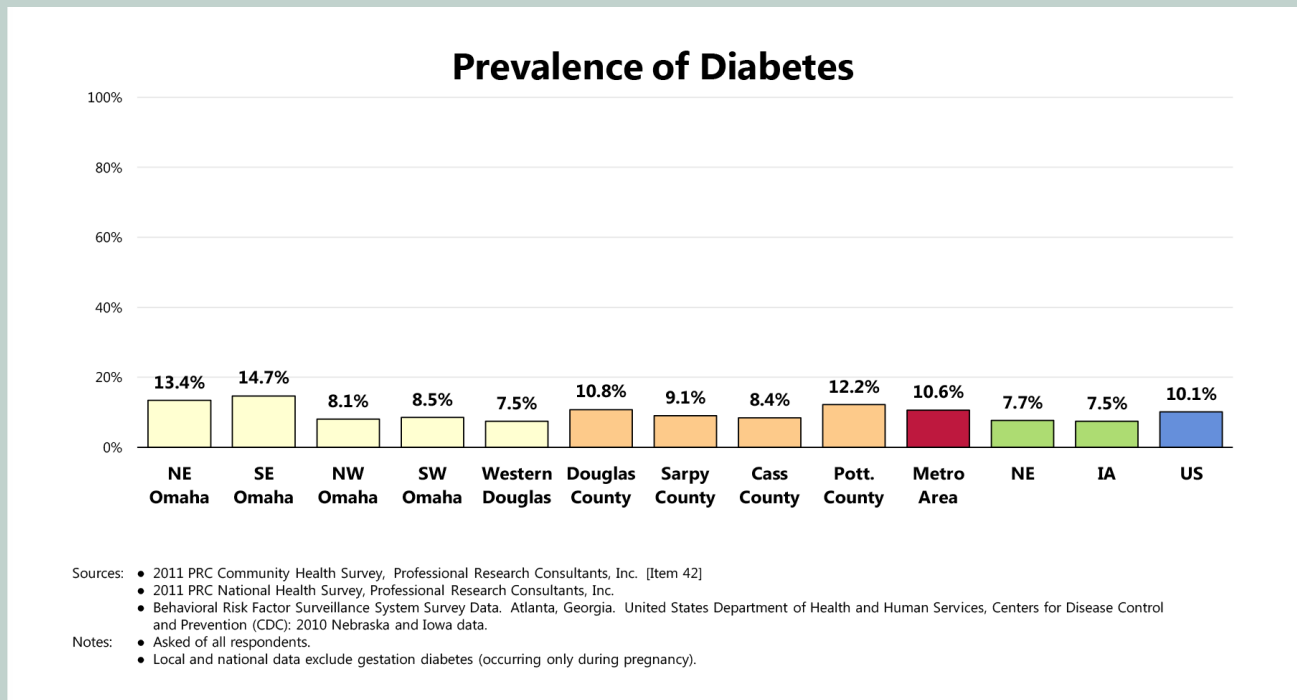
- Stair improvements and promotion in apartments

Neighborhood

- Community gardens & farmers markets
- Street/sidewalk improvements
- Social support for PA
- Mixed-use development
- Access to gyms, parks, recreation centers, trails, etc.

Outside Neighborhood

- Employee wellness programs
- Active transportation and commuter choice programs
- Breastfeeding promotion programs



What the Data Show

Southeast Omaha (roughly east of 72nd Street and south of Dodge within Douglas County) has the highest rates of diabetes in Omaha. The prevalence for Deer Park is likely similar.

Why It Matters

Diabetes puts people at serious of serious health complications including blindness, amputations, kidney failure, stroke and heart disease. People with diabetes typically have medical costs per year that are double that for people without diabetes. It is also one of the leading causes of death in Omaha.

What Can Be Done

Preventable Causes and Contributing Factors for Diabetes

Being Overweight or Obese; Physical Inactivity (Environments that do not support walking & biking; sedentary behavior at work and home including screen time) and Poor Nutrition (Environments with high levels of sugary drinks and other unhealthy foods high in calories, sugar, salt and fat; increased portion sizes; screen time)

Potential Evidence-based Interventions to Address Contributing Factors

Housing

Neighborhood

- Access to gyms, parks, recreation centers, trails, etc.
- Community gardens & farmers markets
- Street/sidewalk improvements
- Social support for PA
- Mixed-use development

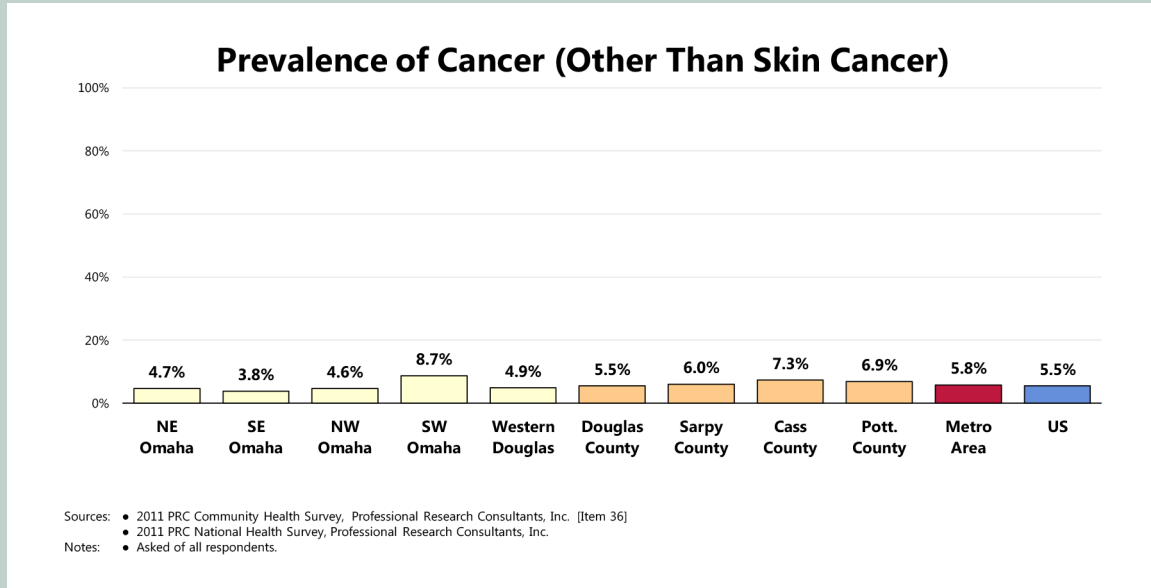
Outside Neighborhood

- Diabetes Prevention Programs (DPP)
- Prediabetes screening
- Employee wellness programs
- Active transportation and commuter choice programs

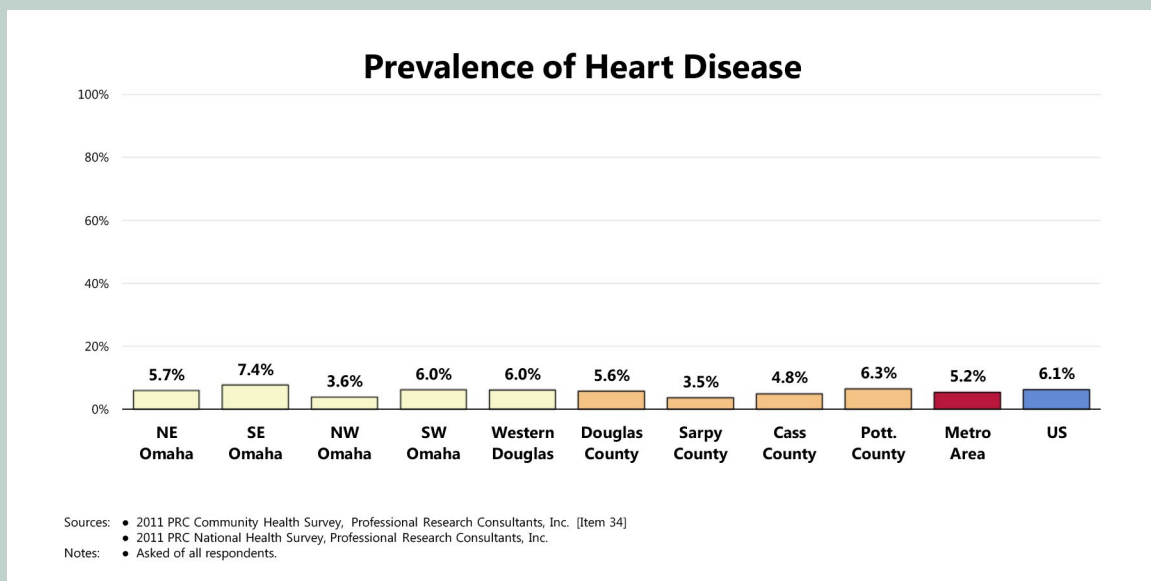
Appendix

The following are important health outcomes that were also examined as part of looking at the health status for Deer Park. Subject to future review by key stakeholders, they are not considered the most promising areas of overlap for the Deer Park neighborhood revitalization effort either because: 1) they cause less harm; 2) they are less likely to be impacted by a neighborhood-level intervention; or 3) they would be improved by interventions already described above.

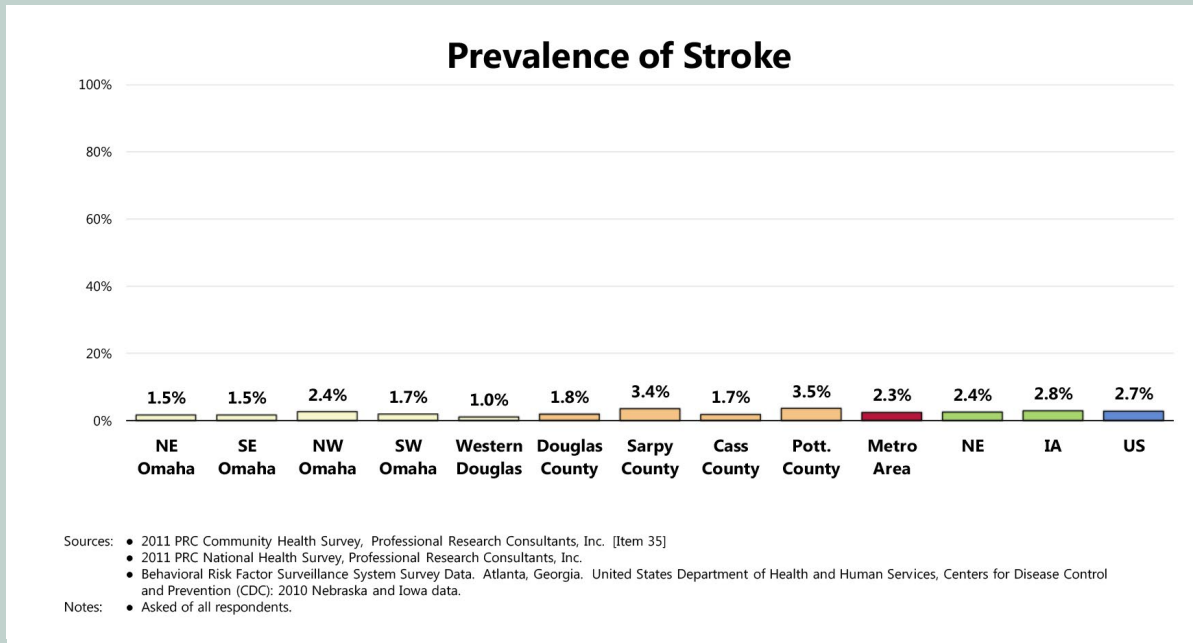
Cancer – Southeast Omaha has a lower prevalence of cancer than other regions of Omaha. Lung cancer is by far the leading cause of cancer deaths in Douglas – double the second most common which is female breast cancer. Improvements to air quality, especially reducing smoking, would benefit lung cancer rates. Increased physical activity and improved nutrition would reduce certain cancers such as colon and breast cancer.



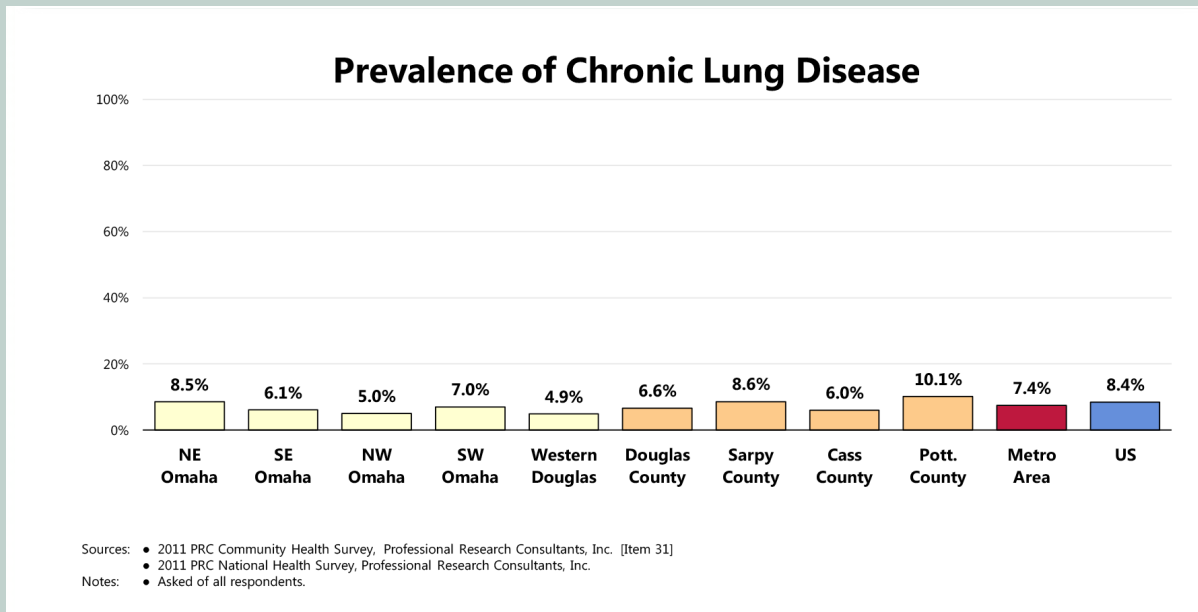
Heart Disease – The prevalence of heart disease is higher in southeast Omaha than other regions. The physical activity and nutrition interventions discussed in adult obesity and diabetes apply to preventing heart disease.



Stroke – Prevalence of stroke is similar in southeast Omaha to other parts of Omaha. The physical activity and nutrition interventions discussed in adult obesity and diabetes apply to preventing stroke.



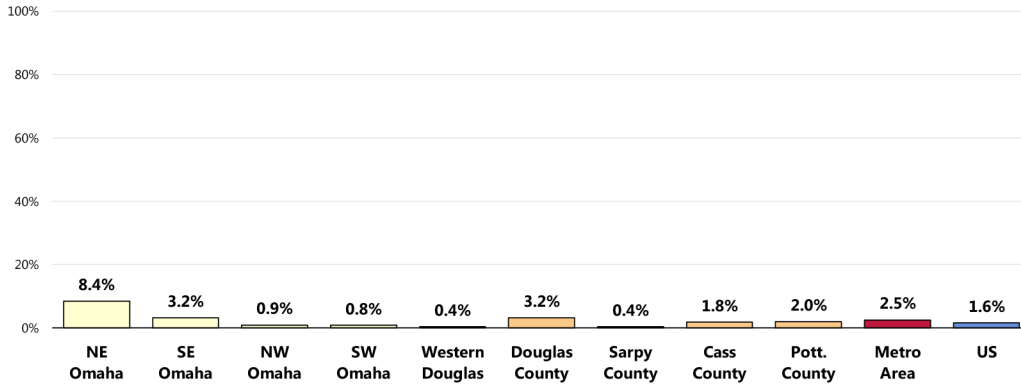
Chronic Lung Disease (COPD) – The prevalence of chronic lung disease (COPD) in southeast Omaha is not significantly different from other areas of Omaha. Improvements to air quality discussed under asthma would also help improve chronic lung disease outcomes.



Adult Injuries

Unintentional injuries – primarily motor vehicle crashes and poisoning (drug overdoses) – are the leading cause of death in the U.S. for young adults until age 45. Suicide and homicide are leading causes of death from ages 15 to 34. While southeast Omaha has the second highest incidence of violent crime, almost 70% of people who live in southeast Omaha feel it is quite safe or extremely safe.

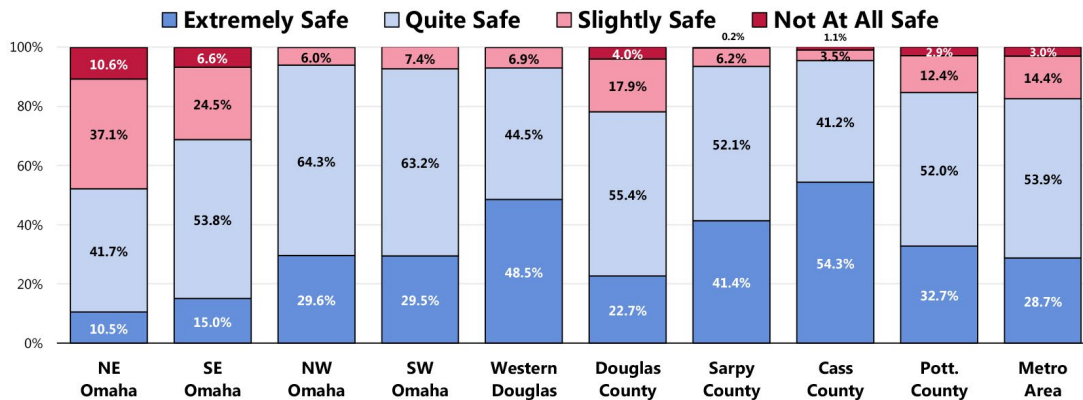
Victim of a Violent Crime in the Past Five Years



Sources: • 2011 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 47]
 • 2011 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Asked of all respondents.

Perceived Safety of Own Neighborhood



Sources: • 2011 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 105]

Notes: • Asked of all respondents.

Deer Park HIA Initial Scoping Worksheet

Focus Question: What activities could be undertaken during the two-year implementation of the Deer Park Redevelopment Plan to improve key health outcomes?			
Additional Question: What partners need to be involved in the implementation of the Deer Park Neighborhood Redevelopment Plan to improve health outcomes?			
Key Health Outcomes	Research Questions	Research Tasks	Data Sources
Birth Outcomes	<ul style="list-style-type: none"> What sources of indoor air pollution and indoor toxins are likely occurring in Deer Park at levels that are unsafe for pregnant women and/or developing fetuses? Which of these sources is it most important to prevent to improve birth outcomes? Are unhealthy levels of risk factors found more frequently in rental properties than owner-occupied? Are the contributing factors for poor outcomes the same or different in owner-occupied vs. rental housing? Is I-80 or other major roads creating levels of outdoor air pollution within Deer Park that are unsafe for pregnant women and/or developing fetuses? Are other possible causes (domestic violence, drug use, lack of social support, lack of prenatal care) at levels that warrant further investigation? What interventions to prevent poor birth outcomes have been shown to be effective? How well do they correspond to neighborhood priorities? 	<ul style="list-style-type: none"> Analyze home inspection data for frequent risk factors for ZIP code 68108 and citywide Analyze home inspection data by owner-occupied vs rental Collect outdoor air quality samples during peak travel times Review local tracking of additional risk factors Review scientific literature on intervention effectiveness plus determine community fit 	<ul style="list-style-type: none"> One Touch Assessments Outdoor Air Quality Readings Community Health Needs Assessment Data Lit Review & Neighborhood Priorities Report
Lead Poisoning	<ul style="list-style-type: none"> What % of lead poisoning incidents occur in owner-occupied vs. rental housing? Are the contributing factors for lead poisoning the same or different in owner-occupied vs. rental housing? What interventions to prevent lead poisoning have been shown to be effective? How well do they correspond to neighborhood priorities? 	<ul style="list-style-type: none"> Analyze investigation data from reported elevated blood lead level (EBL) cases by owner-occupied vs rental (10 micrograms per deciliter vs. elevated level) Review scientific literature on intervention effectiveness plus determine community fit 	<ul style="list-style-type: none"> EBL Report Data Lit Review & Neighborhood Priorities Report
Asthma	<ul style="list-style-type: none"> What indoor asthma triggers are most important to prevent asthma attacks in Deer Parks? Are outdoor asthma triggers at levels that warrant intervention? Are unhealthy levels of asthma triggers found more frequently in owner-occupied or rental housing? Are the contributing factors for asthma attacks the same or different in owner-occupied vs rental housing? What interventions to prevent asthma attacks have been shown to be effective? How well do they correspond to neighborhood priorities? What type of injuries occur most frequently for children in Deer Park? What type of severe injury occurs most frequently? Do injuries occur more frequently in owner-occupied or rental housing in ways related to housing quality? Are there particular intersections or streets that are unsafe for children to cross? What interventions to prevent frequent and/or severe childhood injuries have been shown to be effective? How well do they correspond to neighborhood priorities? 	<ul style="list-style-type: none"> Analyze home inspection data for asthma triggers for ZIP code 68108 and citywide and review outdoor air quality Analyze home inspection data by owner-occupied vs rental Review scientific literature on intervention effectiveness plus determine community fit Analyze injury data for different age groups for frequency and severity Analyze home inspection data by owner-occupied vs rental Collect resident input plus review traffic and injury reports for major Deer Park streets and intersections Review scientific literature on intervention effectiveness plus determine community fit 	<ul style="list-style-type: none"> One Touch Assessments Lit Review & Neighborhood Priorities Report EMS Data One Touch Assessments Resident Interviews & Traffic Data Lit Review & Neighborhood Priorities Report
Childhood Injuries	<ul style="list-style-type: none"> What opportunities exist for increasing the use of neighborhood parks, playgrounds, and other recreational opportunities? Are there neighborhood sidewalks that need to be better maintained to increase PA? What opportunities exist for increasing access to and consumption of healthy food? What interventions to increase physical activity and/or healthy eating have been shown to be effective? How well do they correspond to neighborhood priorities? 	<ul style="list-style-type: none"> Collect resident input Conduct sidewalk inventory Review scientific literature on intervention effectiveness plus determine community fit 	<ul style="list-style-type: none"> Resident Interviews Sidewalk Inventory Results Lit Review & Neighborhood Priorities Report
Diabetes/Obesity	<ul style="list-style-type: none"> What opportunities exist for increasing the use of neighborhood parks, playgrounds, and other recreational opportunities? Are there neighborhood sidewalks that need to be better maintained to increase PA? What opportunities exist for increasing access to and consumption of healthy food? What interventions to increase physical activity and/or healthy eating have been shown to be effective? How well do they correspond to neighborhood priorities? 	<ul style="list-style-type: none"> Collect resident input Conduct sidewalk inventory Review scientific literature on intervention effectiveness plus determine community fit 	<ul style="list-style-type: none"> Resident Interviews Sidewalk Inventory Results Lit Review & Neighborhood Priorities Report

Neighborhood Vital Signs: Deer Park

Healthy Neighborhood Characteristics	Neighborhood Vital Signs	Deer Park	Douglas County	Douglas County Range	Other Information
Demographics:					
Residents Live a Long & Healthy Life	Life Expectancy	74.3 years	78.8	71.2 years to 85.8 years	
Adults Have Sufficient Education to Find Adequate & Stable Employment	High School Graduate or More	52.4%	89.5%	42.7% to 100%	Dropped from 57.8% in 2000
Children Can Thrive	Children Living Above Poverty	63.1%	80.3%	16.8% to 100%	Dropped from 77.9% in 2000
Current Living Conditions:					
Owning a Home in the Neighborhood is Affordable	% of Affordable Housing Units with Mortgage (30% or Less of Household Income)	71.5%	73.1%	27.7% to 87.3%	Decreased from 74.6% in 2000 but decrease has been less than rest of Douglas County (80.3%)
Renting in the Neighborhood is Affordable	% of Affordable Rental Housing Units (30% or Less of Household Income)	61.9%	51.9%	14.9% to 81.9%	Decreased from 69.1% in 2000 but decrease has been less than rest of Douglas County (67.1%)
Housing is Healthy & Well-maintained	Number of Code Violations	Housing -- 62 cases & Litter -- 137 cases	NA	NA	Housing -- 11 demo order, 47 unfit/unsafe, & 4 minor violation; Weeds & Litter -- 74% owner response rate
Housing and Neighborhood is Safe	Number of 911 Incidents	2989 incidents	NA	NA	1183 Police High Priorities + 1281 Police Lower Priorities + 525 Fire & Medical
Goods & Services Are Nearby	Walk Score	74/100 (Very Walkable)	41	2 to 89	
Future Outlook:					
Neighborhood has Leadership Capacity to Improve Conditions	Active Neighborhood Association	Yes	NA	NA	
Residents are Invested in the Long-term Future of the Area	Homeownership Rate	47.3%	62.7%	0% to 100%	Has dropped from 53.1% in 2000
Neighborhood is Stable	Percent of Residents Living in the Same Place Last Year	78.0%	83.1%	22.0% to 96.1%	Different measure in 2000 but still similar to Douglas County
Demand Exists for Neighborhood Housing	Occupancy Rate	89.3%	92.3%	64.1% to 100%	Has dropped from 92.7% in 2000

Data Sources
 Douglas County Vital Signs 2009-2013
 American Community Survey 2009-2013
 U.S. Census 2000, 2010
 Walkscore.com -- 18th & Vinton (Aug 2015)
 City of Omaha Internal Data

Appendix D
Deer Park Neighborhood Priorities Report



Neighborhood Priorities Report

(Prepared November 7, 2015)

Neighborhood Engagement Plan

Timeframe – Data to be collected during two Saturday mornings in the fall of 2015.
Surveys collected from the hours of 9 am – 1 pm

Surveyors –Volunteers facilitated the surveys with the following criteria

- Willingness to work in pairs
- Completion of a 30 minute door to door survey training
- Each Pair had 1 Deer Park resident
- Each Pair had 1 Spanish speaking person
- Each pair had one English speaking person

Survey Location – Surveys were collected in the Revitalization focus area.
Specifically on 3 main streets within the focus area of the neighborhood (S 20th, S 16th, & Deer Park Boulevard)

Prior neighborhood Scan Results – Provided on a separate addendum

Survey Population – Surveyors knocked on dwellings constructed as a single
Family house within the Revitalization focus are.

Respondent Demographics

The following tables describe those who participated in the neighborhood survey. In total 29 people were surveyed as part of this round of data collection. This included 10 renters and 19 homeowners. The total population of those who responded in each category can be seen in the according table by N.

Years lived in the Neighborhood		
	<i>Average</i>	<i>Range</i>
Home Owners (N=19)	20.2 Years	2 - 49 Years
Renters (N = 10)	1.67 Years	.5 - 25 Years

Health Insurance		
	<i>Yes</i>	<i>No</i>
Home Owners (N=19)	15	4
Renters (N = 10)	4	6

Home Insurance		
	<i>Yes</i>	<i>No</i>
Home Owners (N=19)	18	1
Renters (N=18)	4	4

Employed		
	<i>Yes</i>	<i>No</i>
Home Owners (N=19)	15	4
Renters (N=9)	8	1

Do You Know Three Neighbors by Name		
	<i>Yes</i>	<i>No</i>
Home Owners (N=19)	13	6
Renters (N=10)	8	2

Data Results

Surveys were collected anonymously, thus we have aggregated the data, shown below, to show patterns of reported needs and perceptions of the neighborhood.

Scale: Respondents were asked to give their perception on a scale of 1 – 6 with the following choices.

- | | | | |
|---|-----------------------------|---|--------------------------------|
| 6 | <i>Completely Satisfied</i> | 3 | <i>Slightly Dissatisfied</i> |
| 5 | <i>Satisfied</i> | 2 | <i>Dissatisfied</i> |
| 4 | <i>Slightly Satisfied</i> | 1 | <i>Completely Dissatisfied</i> |

The Neighborhood

Upkeep of properties (including vacant lots) in your neighborhood?	
	Satisfaction Ratio
Home Owners (N=19)	3.75
Renters (N = 10)	4.22
Overall (N = 29)	3.9

The removal of unsafe and unfit structures?	
	Satisfaction Ratio
Home Owners (N=19)	4.05
Renters (N = 10)	4
Overall (N = 29)	4.04

Transportation to and from your neighborhood?	
	Satisfaction Ratio
Home Owners (N=19)	4.63
Renters (N = 10)	4.25
Overall (N = 29)	4.52

The "neighborliness" of neighbors?	
	Satisfaction Ratio
Home Owners (N=19)	4.25
Renters (N = 10)	4.11
Overall (N = 29)	4.21

The ability to walk your neighborhood safely?	
	Satisfaction Ratio
Home Owners (N=19)	4
Renters (N = 10)	3.44
Overall (N = 29)	3.83

The upkeep, lighting, and cleanliness of common spaces (parks, school grounds, sidewalk, etc..)	
	Satisfaction Ratio
Home Owners (N=19)	3.68
Renters (N = 10)	4.63
Overall (N = 29)	3.93

The upkeep of your neighborhood's infrastructure (streets, sidewalks, utilities, storm water, signs, lighting, tree trimming, etc.)?	
	Satisfaction Ratio
Home Owners (N=19)	3.58
Renters (N = 10)	3.67
Overall (N = 29)	3.61

The level of crime in your neighborhood?	
	Satisfaction Ratio
Home Owners (N=19)	3.11
Renters (N = 10)	3
Overall (N = 29)	3.08

Physical Health

Your own health?	
	Satisfaction Ratio
Home Owners (N=19)	4.16
Renters (N = 10)	5.44
Overall (N = 29)	4.57

The health of your family?	
	Satisfaction Ratio
Home Owners (N=19)	4.5
Renters (N = 10)	5.22
Overall (N = 29)	4.72

The quality of your diet?	
	Satisfaction Ratio
Home Owners (N=19)	4.75
Renters (N = 10)	5.11
Overall (N = 29)	4.57

Your access to healthy foods?	
	Satisfaction Ratio
Home Owners (N=19)	4.75
Renters (N = 10)	5.67
Overall (N = 29)	5.03

Your own degree of exercise / recreational activity / walking?	
	Satisfaction Ratio
Home Owners (N=19)	3.65
Renters (N = 10)	4.44
Overall (N = 29)	3.9

Educational Quality

The quality of education available to children in your neighborhood?	
	Satisfaction Ratio
Home Owners (N=19)	4.35
Renters (N = 10)	4.33
Overall (N = 29)	4.34

The quality of educational opportunities available to Adults?	
	Satisfaction Ratio
Home Owners (N=19)	3.68
Renters (N = 10)	4.13
Overall (N = 29)	3.81

Findings

Please reference the tables above to see the average scores, the Satisfaction Ratio, of all whom responded to the surveys.

The section on respondent demographics, showed that half of the renters who responded had renters insurance for their homes. In our experience it is often said that many renters do not take advantage of this type of coverage. It was pleasing to hear contrary and that these numbers are stronger in this portion of our neighborhood.

The Neighborhood section of the survey shed some light to additional things we were not originally aware of. When questioned on the satisfaction of upkeep of properties (including vacant lots) in the neighborhood, unsurprisingly, homeowners were more dissatisfied than renters as a whole. However when asked about satisfaction levels of the removal of unfit and unsafe structures, homeowners indicated levels of slightly more than satisfied with the removal of blight. We feel this could be attributed to the active demolition program by Habitat for Humanity in this neighborhood. The question with the overall highest satisfaction level dealt with transportation in the neighborhood. At a Satisfaction Ratio of 4.52, this was the highest ranking question in the neighborhood section. This was also noted many times in the open ended section of the survey as well. Nearly 70% of the respondents indicated the best thing they liked about the neighborhood was its close proximity to most necessary amenities as well as the interstate.

Overall, the two lowest satisfaction rankings were (1) The satisfaction with the upkeep of neighborhood infrastructure at a 3.61 average with homeowners less satisfied than renters as a whole and (2) the level of crime at 3.08 average. These two points also came up frequently in the open ended response section with nearly 90% respondents indicated issues with lighting in the neighborhood at night. Several individuals noted broken lights and blocks with little to no lighting at all. Satisfaction with the levels of crime showed some reasons for concern. On average, respondents reported slightly dissatisfied numbers for current crime conditions. This was voiced three times in the open ended section as well. In further investigation, most crime actives reported by neighbors were in relation to car break ins and issues in the nearby park. We were pleased to learn that, though this indicator was the lowest of all the questions, when asked if neighbors felt the neighborhood was getting better, worse, or staying the same, the majority fell between staying the same and getting better.

Are Things Getting Better			
	Worse	The Same	Better
Home Owners (N=19)	5	10	5
Renters (N = 10)	1	5	4

The questions that ranked the highest above all others were in regards to the neighbors' access to healthy foods, at 5.03, and the health of their families, at 4.72. In comparing these satisfaction ratios to the open needed responses, we saw potential correlations between the family's happiness with the proximity to local stores & amenities to their satisfaction ration of access to healthy foods. Other notable potential correlations include that nearly 75% of respondents stated that one of the things they liked most about the neighborhood was that it was quiet and that they felt safe overall. We saw this potentially correlated to their Satisfaction ration of Health of their families.

Neighborhood Priorities Report

That provides aggregate information from the neighborhood resident interviews to document the most prominent priorities for neighborhood residents related to redevelopment and health outcomes.

Program Interest		
<i>(N = 25)</i>	<i>Number</i>	<i>Percent</i>
Homeownership	9	36%
Home Rehabilitation	15	60%
Home Maintenance Classes	15	60%
Free/Discounted Gym Membership	17	68%
Free Neighborhood Youth Groups	14	56%
Free Family Activities	17	68%
Small Business Education	16	64%
GED Classes	12	48%
Second Language Education	20	80%
Computer Classes	12	48%
Parenting Classes	13	52%
Job Readiness	13	52%

The final portion of the neighbor surveys were in regards to potential programs that could be implemented in the community as part of the revitalization program. Categories were selected based on previous conversations with neighbors over the years about things they felt were necessary in the neighborhood. The two types of activities that saw the most interest of the cohort of respondents were (1) Second Language classes, this includes Spanish as a second language for English native residents, (2) Free Family Activities, and Free or discounted gym memberships.

Deer Park Neighborhood Association is pleased to provide this report to the county. We are grateful for your partnership and are eager to continue to help advocate to bring potential partners to our community to offer these types of services.

Appendix E

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