

COMMUNITY HEALTH AND WELLNESS

TOPIC REPORT

TRENTON250
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BACKGROUND

There is growing consensus in both the planning and public health professions that the way we have designed our communities over the past 60-70 years plays an important role in determining health outcomes. While prior interventions have contributed to a reduction in the transmission of infectious diseases, chronic health problems such as obesity, heart disease, diabetes, cancer and asthma have become more prevalent. The Community Health Needs Assessment report released in 2013 by the Trenton Health Team identified obesity/healthy lifestyles; safety and crime; chronic disease; substance abuse; and health literacy/disparities as critical health issues needing community-wide attention. Problems associated with childhood obesity were of particular concern. The January 2016 Update and Addendum to the 2013 report reaffirmed these same five issue areas, while also drawing attention to housing, bed bugs, food and job insecurity, city planning, transportation and several other specific indicators of inequitable health care access and health literacy, including health insurance-specific knowledge.

In March of 2015, the New Jersey Chapter of the American Planning Association received funding through the American Planning Association Plan4Health Project to bring together a coalition of partners to undertake the *Trenton Healthy Communities Initiative*. The initiative was designed to address inactivity and unhealthy diet—two primary determinants/risk factors of chronic disease—as well as housing and health equity issues in the City of Trenton. The initiative has advocated for: adoption of new health-focused policies in the City; nurturing and expansion of health-oriented partnerships; health literacy among City residents and a health focus in local government decision-making. Specific project activities included:

1. Developing a Community Health and Wellness Plan for the Trenton250 Master Plan;
2. Expanding health literacy among Trenton residents through the creation of health literacy toolkits;
3. Conducting Health in All Policies training for Trenton City decision-makers and departments; and
4. Transferring the knowledge gained and lessons learned from the project by developing and disseminating a model health and wellness master plan element for adoption by other NJ communities.

The Trenton Healthy Communities Initiative has involved a diverse set of partners, including core team members: the American Planning Association-New Jersey Chapter, the New Jersey Public Health Association, the City of Trenton departments of Health and Human Services and Housing and Economic Development, the Planning Healthy Communities Initiative of the Edward J. Bloustein School of Planning and Public Policy, Rutgers University and the Trenton Health Team.

INTRODUCTION

As described on the Trenton250 website, a Master Plan (also called a comprehensive plan) provides a long-range vision for the built environment of a community. It guides the appropriate use of lands within a municipality in order to protect public health and safety and to promote general welfare. Among other issues, the Master Plan can identify:

- Suitable locations for commercial, housing, and mixed-use development;
- Locations where the city should increase density, use redevelopment, or intervene in other ways;
- Opportunities to extend and/or improve open space, recreational areas, and civic facilities;
- Strategies for increasing economic development;
- Environmental, historic, and cultural resources that need conservation; and
- Strategies for solving congestion and improving transit services.

As a result, the Master Plan has a direct relationship to its residents and other users of the municipal jurisdiction such as business owners and employees. The Master Plan establishes a shared vision and set of goals for the City. In addition, the New Jersey Municipal Land Use Law (MLUL) requires that all municipalities have a Master Plan if they want to utilize zoning or other similar land use controls. The MLUL stipulates that cities must update that plan at a minimum once every 10 years. Trenton’s 1999 Land Use Plan reexamination was adopted in 2015.¹

The Trenton250 Master Plan

In February 2013, the City of Trenton launched Trenton250, a process designed to comprehensively rewrite the City’s Master Plan. Trenton250 is Trenton’s long-range Comprehensive Master Plan that will guide the City from now to the 250th Anniversary of its incorporation in 2042. In October of 2014, the City of Trenton Planning Board unanimously adopted the Visioning Element of the Trenton250 Master Plan. The Vision Statement includes eight Guiding Principles that resulted from an 8-month long community engagement process.

In 2017, Trenton adopted a unified master plan with six strategically important “Elements” – addressing economic development, land use, circulation, housing, environment, education,

¹ Trenton Division of Planning. “Foundational Material.” *Trenton250*.
<http://trenton250.org/background/foundational-material>.

and now proposing a health plan to be adopted – will work together to provide a clear direction for achieving the City’s Vision and Guiding Principles.²

Purpose of this Community Health and Wellness Plan

The Community Health and Wellness Plan is intended to provide a policy framework and action agenda for: expanding access to and the uptake of healthy foods; increasing opportunities and pursuit of physical activity; improving health literacy and access to healthcare services; and addressing unhealthy housing conditions in the City. The Element also highlights the relationship between health and other Trenton250 Master Plan elements. It is anticipated that implementation of the strategies described in the Community Health and Wellness Plan, as well as the other Trenton250 Master Plan elements, will lead to material changes in Trenton’s economic, social, and physical environment over time, which will improve the health and wellness of Trenton residents.

Legal Authority

The New Jersey Municipal Land Use Law (MLUL) defines the responsibilities of municipal Planning Boards and Zoning Boards of Adjustment. The MLUL provides municipalities the right to zone land and enact related land use and development ordinances if a current Master Plan is prepared. [Chapter 291, New Jersey Statutes Annotated, 1975, NJSA 40:55D - 1 et. seq.]. According to the MLUL, all master plans must include: a Statement of Purpose; a Land Use Element; and a specific policy statement describing the relationship between the master plan and other plans, including: the master plans of contiguous municipalities and the County; the County’s Solid Waste Management Plan and Water Quality Management Plan; the New Jersey State Development and Redevelopment Plan; and where applicable, the Highlands Regional Master Plan.

In addition, municipalities are authorized to include optional elements that can enhance the master plan. These optional elements include, but are not specifically limited to, addressing: housing; circulation; utility service; community facilities; recreation; conservation; economic development; historic and farmland preservation; recycling; development transfer; educational facilities; and green buildings and environmental sustainability. The Trenton250 Community Health and Wellness Plan, along with the other Trenton250 Master Plan Elements, is intended to protect and improve public health and safety in Trenton and promote the general welfare of Trenton residents.

² Trenton Division of Planning. “Executive Summary.” Trenton250. <http://www.trenton250.org/executive-summary>.

TRENTON TODAY

As a small, post-industrial city with lower socioeconomic status and education rates and higher rates of poverty among its population than the surrounding region, Trenton's residents face many challenges to sustaining good health. In addition to personal behavior and lifestyle factors, many aspects of the City's built and natural environment can affect health outcomes. This section provides an overview of some of the challenges facing Trenton's residents and neighborhoods, drawing from research, reports, and archived data available on New Jersey's capital city.

Current Health Status of Trenton Population

According to the Community Health Needs Assessment Report prepared by the Trenton Health Team in 2013, the January 2016 Update and Addendum, and the 2019 Community Health Needs and Assets Assessment, health challenges in Trenton include the following:

- **Food Insecurity, Access, and Nutrition:** Trenton has been identified as a food desert, due to lack of access to healthy, fresh foods. Poor food options and choices and limited safe places for children to play have taken a toll on Trenton's children and adults in the form of obesity and physical inactivity. Hunger is also an issue, with 17 percent of Trenton households regularly lacking enough food to eat.
- **Chronic disease:** Trenton residents have high rates of diabetes, hypertension, and cancer. Sixteen percent of the City's residents were diabetic in 2009. Heart disease and cancer are two of the three leading causes of death in Mercer County. Unmanaged chronic illness, as well as concerns such as lack of health care, co-payments, and fear of tests lead to acute, costly, avoidable emergencies, increased disability, and poorer quality of life for residents.
- **Substance abuse and behavioral health:** Emergency departments are disproportionately used by individuals with substance abuse issues,³ which is ranked at the top of Trenton residents' concerns.⁴ Residents surveyed reported their second greatest concern to be mental health screening and counseling for youth and their third greatest concern to be school-based prevention and counseling on mental health and substance abuse.

³ Trenton Health Team. "Community Health Improvement Plan." January 2014. <https://trentonhealthteam.org/wp-content/uploads/THT-Community-Health-Improvement-Plan-2014-Jan.pdf>.

⁴ Trenton Health Team. "Community Health Needs Assessment: Update and Addendum to the 2013 Report." January 2016. <http://www.trentonhealthteam.org/wp-content/uploads/THT-CHNA-2016-Update.pdf>.

- **Safety and community crime:** Trenton’s rate of violent crime in 2010 was 4.5 times higher than in New Jersey as a whole. At least two of Trenton’s 11 gangs operate within the City’s schools. Decreased numbers of police officers, ongoing gang activity, substance abuse, and poverty contribute to Trenton’s high violent crime rate. Understandably, 45 percent of Trenton parents feel their neighborhoods are somewhat or very unsafe due to crime⁵, and ranked community violence 112.5 percent higher than other Mercer County communities did.
- **Health literacy and health disparities:** Trenton residents report lacking any type of health insurance at a rate more than double that of Mercer County as a whole. For several zip codes, the need for insurance was ranked by the community as a very high or the highest need. Language barriers also negatively impact health care access and literacy in Trenton, where over 35 percent of the population speaks a language other than English in the home.⁶ In some zip codes, little more than 50 percent of residents were high school graduates.
- **Housing:** Many Trenton residents struggle with the cost of housing and the age of the City’s housing stock can pose health challenges. Common health challenges caused by poor housing quality include asthma and lead poisoning. Over 28 percent of health survey respondents report that unstable or costly housing negatively impacts their health.⁷ Homelessness is also a serious challenge in the City.
- **Racial/Ethnic Inequities:** As a city where a majority of the population is made up of minorities, Trenton is disproportionately affected by health inequities that occur along racial and ethnic lines. Conditions that are tied to race and ethnicity include heart disease, diabetes, maternal health, and cancer.⁸ Discrimination and/or racism were reported as having a major impact on the health of a quarter of survey respondents.
- **Adverse Childhood Experiences:** It is now widely accepted that adverse events during childhood and youth can have a major effect on the well-being of individuals throughout their lives, impacting physical and behavioral health, opportunities, and

⁵ Trenton Health Team. “Community Health Needs Assessment: Trenton, New Jersey.” July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

⁶ Trenton Health Team. “Community Health Needs Assessment: Trenton, New Jersey.” July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

⁷ Trenton Health Team. “Trenton Community Health Needs and Assets Assessment.” June 2019. <https://trentonhealthteam.org/reports/tht-community-health-needs-assets-assessment-2019/>

⁸ Trenton Health Team. “Trenton Community Health Needs and Assets Assessment.” June 2019. <https://trentonhealthteam.org/reports/tht-community-health-needs-assets-assessment-2019/>

violence victimization and perpetration.⁹ Many Trenton residents have a history of childhood trauma, including physical or psychological abuse, alcoholism or addiction in the household, or incarceration or death of a family member.¹⁰ The City must address the underlying abuse and trauma experienced by local residents if it is to improve the health and safety of its residents.

Obesity and related conditions

Based on the 2015 County Health Rankings, Mercer County's adult obesity rate was approximately the same as the state at 24 percent of residents reporting a body mass index (BMI) of 30 or more.¹¹ Trenton's adult population, however, at 39 percent¹² evidences a higher rate of obesity than the county and state.¹³ Compared with national estimates (NHANES, 2007-2008)¹⁴, nearly half of the City's children aged three to five years old (49 percent) are overweight and obese (more than twice the national rate), and more than one in four children are obese in every age category (NJ Child Obesity Study, 2010). Hispanic children made up the highest percentage of overweight children of all ethnic group categories in the study. Many parents of these children speak Spanish as a first language and as a result, may experience barriers in accessing information on this health concern.

⁹ Center for Disease Control. "Adverse Childhood Experiences." April 3, 2020.
<https://www.cdc.gov/violenceprevention/aces/index.html>

¹⁰ Trenton Health Team. "Trenton Community Health Needs and Assets Assessment." June 2019.
<https://trentonhealthteam.org/reports/tht-community-health-needs-assets-assessment-2019/>

¹¹ University of Wisconsin. "Population Health Institute County Health Rankings and Roadmaps." *County Health Rankings*. 2015. <http://www.countyhealthrankings.org/app/new-jersey/2015/measure/factors/11/map>.

¹² Trenton Health Team. "Community Health Improvement Plan." January 2014.
<https://trentonhealthteam.org/wp-content/uploads/THT-Community-Health-Improvement-Plan-2014-Jan.pdf>.

¹³ Lloyd, Kristen, M. Yedidia, and P. Ohri. "New Jersey Childhood Obesity Study." *Rutgers, the State University of New Jersey, Center for State Health Policy*. May 2, 2011.
<http://www.cshp.rutgers.edu/Downloads/8800.pdf>.

¹⁴ Centers for Disease Control and Prevention. "National Health and Nutrition Examination Survey."
<http://www.cdc.gov/nchs/nhanes/index.htm>.

Table 1. Prevalence of Childhood Overweight and Obesity in Trenton by Age Group

Age Group	Percent Children Overweight and Obese	Percent Children Obese	Percent Children Very Obese
3-5 (n=455)	49	26	19
6-11 (n=4682)	48	29	22
12-19 (n=2956)	46	27	20
Total (n=8093)	47	28	21

Source: Trenton Health Team (2013). Community Health Needs Assessment Report.

The health ramifications of childhood obesity are numerous, and there is evidence that chronic health problems can start to appear much sooner than previously realized in obese children,^{15, 16} such as increasing children’s risk of coronary heart disease, cancer, stroke, and diabetes in adulthood.

Regarding recent levels of physical activity in Trenton’s youth, the 2013 Trenton Community Health Needs Assessment noted that only one third of Trenton children meet national recommended exercise guidelines of 60 minutes of activity per day, with almost half not getting even 30 minutes a day. Hispanic children are least active, with three quarters not meeting the 60-minute/day recommendation. Sixty to 76 percent of residents in all age categories ranked school-based programs that promote physical activity and healthy eating as a high priority.

Chronic diseases

Trenton residents have higher rates of chronic illness than Mercer County, the state of New Jersey and the rest of the nation. The most significant chronic diseases in Trenton are diabetes, hypertension, cardiovascular disease and cancer. Rates for diabetes, at 16 percent,

¹⁵Centers for Disease Control and Prevention. “Childhood Obesity Causes & Consequences.” June 19, 2015. <http://www.cdc.gov/obesity/childhood/causes.html>.

¹⁶ Nestle, Marion. *Food Politics: How the Food Industry Influences Nutrition and Health*. Berkeley, California. University of California Press. 2007.

are almost twice as high in Trenton as in Mercer County as a whole (9 percent).¹⁷ Data strongly indicate that, while there are substantial disparities and inequities among groups of those affected, affected individuals are located throughout the City, suggesting that many are not receiving recommended treatments.¹⁸ Populations most at risk for diabetes include those over 45 years of age, ethnic minority populations (especially African American and Latino groups), and obese individuals.¹⁹ Hospitalizations for cardiovascular disease and stroke as primary diagnoses (not including hypertension) totaled 2,918 in Trenton for 2014, along with 4,269 cardiovascular secondary diagnoses.²⁰

Mercer County asthma hospitalization rates are also among some of the highest in New Jersey, with a rate of 16.7 per 10,000.²¹ In 2014, there were 380 hospital admissions with asthma as a primary diagnosis and 1,866 with asthma as a secondary diagnosis, notwithstanding recent improvements. Compared to 2009-2011 rates, both adult and pediatric ER rates due to asthma have decreased somewhat (1 percent and 5 percent respectively) in the period 2011- 2013.²²

Adverse Childhood Experiences (ACEs)

Trauma informed care, a concept that has evolved over the past twenty years, is based on the assessment that most individuals, particularly in struggling neighborhoods, have been impacted by some degree of trauma and/or toxic stress. Determining factors for the level of trauma experienced has typically been measured by the degree to which people have experienced Adverse Childhood Experiences (ACEs). The ACEs assessment is a brief, 10-question instrument which counts the number of experiences a person has had before the age of 18, with emotional, physical or sexual abuse, violence or neglect; divorce or mental illness; or death or incarceration of a family member. Research has shown that the ACEs experienced

¹⁷ Trenton Health Team. "Community Health Needs Assessment: Trenton, New Jersey." July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

¹⁸ Trenton Health Team. "Community Health Needs Assessment: Trenton, New Jersey." July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

¹⁹ Trenton Health Team. "Community Health Needs Assessment: Trenton, New Jersey." July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

²⁰ Center for Health Statistics. "New Jersey State Health Assessment Data." *State of New Jersey Department of Health*. <https://www-doh.state.nj.us/doh-shad/>.

²¹ Center for Health Statistics. "New Jersey State Health Assessment Data." *State of New Jersey Department of Health*. <https://www-doh.state.nj.us/doh-shad/>.

²² Center for Health Statistics. "New Jersey State Health Assessment Data." *State of New Jersey Department of Health*. <https://www-doh.state.nj.us/doh-shad/>.

during early stages of life (birth through adolescence) have resulted in diminished maturation in regions of the brain. These conditions have apparently contributed to such poor outcomes as chronic disease (high blood pressure and hypertension; stroke; heart disease; diabetes; etc.), violence, incarceration, and premature death.

Trauma informed care is an acknowledgement that care providers of every stripe will best serve patients and clients by changing the focus of their initial inquiry from, “What’s wrong with you?” to “What happened to you?” From that reframed vantage point, social, medical, and behavioral services providers are better equipped to deliver support that empowers clients and patients to develop more effective levels of resilience.

The City of Trenton’s Department of Health and Human Services and the Trenton Health Team have joined forces to address trauma in the City and lead the community on the journey to becoming a healing-centered City. To that end, the Resilience film has been shown at least 10 times, including a large screening at the Trenton War Memorial. So far, approximately 300 individuals and organization leaders have seen the film. In December 2019, with the help of over 22 organizations, the City launched Resilient Trenton! – the Mayor’s Task Force for a Healing Centered City, to continue to work together to achieve two primary goals:

1. To create a community-wide network of healthcare, human services and social services providers that will deliver a consistent, high-quality pattern of trauma-informed care, that is offered within a coordinated, integrated strategy; and
2. To support constituencies in achieving outcomes of wellness and healing that reflect the people of Trenton’s intrinsic resilience. This initiative seeks an overall reduction in violence, recovered mental health wellness, and improved long-term healing from chronic disease, within a newly built system that supports constituents such that they are empowered to move towards physical and socio-economic wellness.

Lead poisoning

The City of Trenton has been designated a Priority I area for prevention of lead poisoning.²³ Approximately 18 percent of children tested in the City’s clinics have increased lead levels, and dust samples conducted by ISLES, Inc. in 1,299 homes in the City resulted in 66 percent testing positive for hazardous levels of lead. Lead can affect the development and function of

²³ City of Trenton Department of Housing and Economic Development. “City of Trenton 2010 Five Year Consolidated Plan.” August 6, 2010. <http://www.trentonnj.org/documents/housing-economic/community%20development%20block%20grant/2010%20five%20year%20plan/2010%20five%20year%20consolidated%20plan%20narrative.pdf>.

virtually every body system, and particularly the normal growth of children’s brain and central nervous system causing seizures and brain damage.²⁴

HIV/AIDS

As of December 31, 2018, 2,531 people were living with HIV or AIDS²⁵ in Trenton, one of the top ten cities in New Jersey with the highest number of cases. Women are affected by the infectious disease at a rate of about 44.3 percent of the total number of cases, with African Americans making up 72 percent of the total cases. Statistics indicate that the case-fatality rate has declined precipitously since 2010. From 2010 forward, Trenton has seen fewer than 50 cases per year. In 2017, the City saw only 32 cases, and only 23 cases in 2018. From 2010 forward, there were only five or fewer deaths, (in 2012, there were 6 deaths). This is a clear indication that people are living longer and better, with better treatments and safer behavior.

The City no longer has the ability to provide testing due the absence of a medical director. Those activities are now covered by Henry J. Austin Health Center. The City should partner with other organizations, working with them to provide literature and education.

Incidence of reported disability

Approximately 57 percent of the state’s disabled population lives with an ambulatory disability, while 37.5 percent of individuals are not able to live independently because of a physical or mental disability.²⁶ While 9.5 percent of Mercer County’s population has some type of disability and 5.3 percent of residents have a physical disability, Trenton and Hamilton are home to a higher percentage of residents with disability needs than other parts of Mercer County.²⁷

Behavioral health and substance abuse

Regarding behavioral health, Trenton faces challenges just like most other communities; stigma and inadequate screening results in misidentification. Nationally, only 43 percent of

²⁴ State of New Jersey Department of Health. “Childhood Lead Poisoning Prevention.” July 28, 2014.
<http://www.state.nj.us/health/fhs/newborn/lead.shtml#clp>.

²⁵ NJ Department of Health - Trenton Residents - 2018
https://nj.gov/health/hivstdtb/documents/stats/hiv/other_cities/trenton.pdf

²⁶ State of New Jersey Department of Community Affairs. State of New Jersey FY2015-2019 Analysis of Impediments to Fair Housing Choice. 2015.
http://www.state.nj.us/dca/announcements/pdf/2015_Analysis_of_Impediments_maste.pdf.

²⁷ State of New Jersey Department of Community Affairs. State of New Jersey FY2015-2019 Analysis of Impediments to Fair Housing Choice Appendices. 2015.
http://www.state.nj.us/dca/announcements/pdf/2015%20Analysis%20of%20Impediments_7.16.15_APPE NDICES_FINAL.pdf.

adults with mental illness, 64 percent of adults with serious mental illness, and 51 percent of children with mental illness get treatment in a given year.²⁸ Many diverse communities often rely on family support and/or religious leaders to help address disabling psychiatric conditions with varying degrees of success. In addition, community members with dual diagnoses for both serious psychiatric conditions and substance abuse problems require special care. Table 2 shows the breakdown of substance abuse treatment admissions by drug type for Mercer County and Trenton. Trenton’s rates of admission for both marijuana and cocaine are higher than the admission rates for Mercer County. The density of alcohol outlets can also create more access to alcohol and opportunities for overuse and abuse.

Table 2. Substance Abuse Treatment Admissions by Drug Type

Drug Type	Percent of Mercer County Admissions (Total = 2,698 admissions)	Percent of Trenton Admissions (Total = 1,474 admissions)
Marijuana	23	34
Cocaine	11	17
Heroin & Other Opiates	31	18
Alcohol	33	29
Other Drugs	3	2

Source: NJ SAMS Substance Abuse Overview, Mercer County 2011.

<https://www.nj.gov/humanservices/dmhas/publications/statistical/Substance%20Abuse%20Overview/2011/Mercer.pdf>.

²⁸ National Alliance on Mental Illness. “Mental Health Care Matters.” 2019.
<https://www.nami.org/NAMI/media/NAMI-Media/Infographics/NAMI-Mental-Health-Care-Matters-FINAL.pdf>

In 2010, Mercer County had a 37.4 percent unmet need for substance abuse treatment based on a total demand of 3,487 adults.²⁹ While drug use among high school students and concerns about personal safety was a primary focus during the Community Needs Assessment community forums, the City’s Screening, Brief Intervention and Referral to Treatment (SBIRT) program had not been screening adolescents nor was it in place across the City.³⁰ Currently, detoxification services are available only remotely for Trenton residents, who can also benefit from follow-up integrated rehabilitation assistance.

Social and Environmental Determinants of Health in Trenton

Health problems result from a complex interplay of several forces. An individual’s health-related behaviors (particularly diet, exercise, and smoking), surrounding physical environments, social capital, socioeconomic status, mental health, and healthcare (both access to and quality of), all contribute significantly to how long and well we live.³¹

Social and environmental determinants of health include a range of influences, all of which can play a role in determining the health of individuals and the overall population. The box to the right shows a list of

Examples of Social and Environmental Determinants of Health
• Availability of resources to meet daily needs (e.g., safe housing and local food markets)
• Access to educational, economic, and job opportunities
• Access to health care services
• Quality of education and job training
• Availability of community-based resources in support of community living and opportunities for recreational and leisure-time activities
• Transportation options
• Public safety
• Social support
• Social norms and attitudes (e.g., discrimination, racism, and distrust of government)
• Exposure to crime, violence, and social disorder (e.g., presence of trash and lack of cooperation in a community)
• Socioeconomic conditions (e.g., concentrated poverty and the stressful conditions that accompany it)
• Residential segregation
• Language/Literacy
• Access to mass media and emerging technologies (e.g., cell phones, the Internet, and social media)
• Natural environment, such as green space (e.g., trees and grass) or weather (e.g., climate change)
• Built environment, such as buildings, sidewalks, bike lanes, and roads
• Worksites, schools, and recreational settings
• Housing and community design
• Exposure to toxic substances and other physical hazards
• Physical barriers, especially for people with disabilities
• Aesthetic elements (e.g., good lighting, trees, and benches)
Source: Healthy People 2020

²⁹ Division of Mental Health and Human Services. “Estimate of Treatment Need for Alcohol and Drug Addiction.” State of New Jersey Department of Health Services. 2010.

³⁰ Trenton Health Team. “Community Health Improvement Plan.” January 2014.

³¹ Los Angeles County Department of Public Health. “Social Determinants of Health: How Social and Economic Factors Affect Health.” 2013

health determinants that are relevant to the community master planning process. The following sections point to social and environmental conditions in the City of Trenton that have been linked to short- and longer-term health outcomes.

Socioeconomic Status and Education

The occupants of six zip codes encompassing neighborhoods in the City of Trenton, and parts of Ewing and Lawrence Townships, are disproportionately poorer than the remaining communities in Mercer County.³² Trenton has the highest poverty rate in Mercer County. The 2008-2012 Five-Year American Community Survey reports Trenton's median household income to be approximately \$36,700, about half the level in the county and state. Further, approximately 18 percent of Trenton residents are unemployed while 26 percent live below the federal poverty level, compared to just under 12 percent for the state.³³ In addition, the number of children living in poverty has increased and continues to trend upward.³⁴

Income is shown to correlate negatively with health conditions. For example, The Food Trust, a nonprofit organization started in the neighboring City of Philadelphia, found that obesity rates in New Jersey are over 35 percent higher for those earning less than \$15,000 a year when compared to those earning \$50,000 or above.³⁵ Modest income margins affect one's ability to meet basic needs including healthy foods, afford health-related costs, access adequate housing and transportation, and therefore have access to community resources.

Cultural, linguistic, and educational barriers compound negative impacts related to the quality of many activities affecting health outcomes. For example, anywhere from one- to two-thirds of Trenton residents are renters, half of whom spend one-third to one-half of their monthly income on housing expenses. This leaves little money to cover other expenses, including not just basic living expenses but also supplemental education or training that might lead to a higher income.

³² Greater Mercer Public Health Partnership. "Mercer County, NJ Community Health Assessment Report." *United Way of Greater Mercer County*. 2012. https://www.uwgmc.org/sites/uwgmc.org/files/Final_Mercer_CHARReport_July122012.pdf.

³³ New Jersey Community Capital, Center for Community Progress, Isles Inc., and the Joseph C. Cornwall Center for Metropolitan Studies at Rutgers University-Newark. "Laying the Foundation for Strong Neighborhoods in Trenton, NJ." *New Jersey Community Capital*. October 2015. http://newjerseycommunitycapital.org/sites/default/files/Trenton%20Report%20Full_Final%20Copy.pdf.

³⁴ University of Wisconsin. "Population Health Institute County Health Rankings and Roadmaps." *County Health Rankings*. 2015. <http://www.countyhealthrankings.org/app/new-jersey/2013/rankings/outcomes/overall/by-rank>.

³⁵ Fitzgerald, Beth. "More Cash Coming to Help Eliminate New Jersey's Food Deserts." *NJ Spotlight*. January 4, 2012. <http://www.njspotlight.com/stories/12/0104/0034/>.

Limited educational attainment has a negative impact on income and health outcomes. There are large differences in education attainment among zip code regions, ranging between 9 and 20 percent of Trenton residents having a bachelor’s degree, compared with close to 40 percent in Mercer County (See Table 3). High school graduation ranges from 53 to 72 percent. While a lack of education drives the City’s unemployment rate, which averages 18 percent across the six zip codes, some census tracts are witnessing increases in the percent of individuals with high school, GED, or BA degrees, without improvement in unemployment rates.³⁶

Table 3. Selected Demographic Characteristics for New Jersey, Mercer County and Trenton (2009-2013)

Characteristic	New Jersey	Mercer County	City of Trenton
Race and Hispanic Origin, Percent			
White alone, not Hispanic or Latino	59.3	54.5	13.5
Black or African American alone	13.7	20.3	52.0
Hispanic or Latino	17.7	15.1	33.7
Asian alone, percent	8.3	8.9	1.2
Two or More Races	2.7	2.8	4.1
Educational Attainment, Percent			
High school graduate or higher, age 25 years+	88.1	87.3	71.1
Bachelor's degree or higher, age 25 years+	35.8	38.8	10.9
Health			
With a disability, under age 65	6.5	6.9	11.2
Persons without health insurance, under age 65	15.1	14.6	25.8
Income and Poverty, (in 2013 dollars)			
Median household income	71,629	73,480	36,662
Percent persons in poverty	11.4	11.8	26.5

Source: U.S. Census Bureau, American Community Survey

³⁶ New Jersey Community Capital, Center for Community Progress, Isles Inc., and the Joseph C. Cornwall Center for Metropolitan Studies at Rutgers University-Newark. “Laying the Foundation for Strong Neighborhoods in Trenton, NJ.” New Jersey Community Capital. October 2015. http://newjerseycommunitycapital.org/sites/default/files/Trenton%20Report%20Full_Final%20Copy.pdf.

Maternity and Infants

While New Jersey has one of the lowest rates of infant mortality in the United States, there are wide disparities in across regions and backgrounds. The overall infant mortality rate was 4.7 per 1,000 live births in NJ in 2015, with an infant mortality rate of 3.0 per 1,000 births for non-Hispanic white infants and 9.7 per 1,000 births for non-Hispanic black infants.³⁷ These disparities have persisted for the past decade.

The City of Trenton is one of eight municipalities in the state identified as having particularly high levels of black infant mortality. Approximately 72 percent of women in New Jersey begin prenatal care in the first trimester of pregnancy; but fewer than half of Trenton mothers have a prenatal visit in that time period.³⁸ Only 57.8 percent of Trenton women have what is considered to be adequate prenatal care, which consists of care beginning by the end of the fourth month of pregnancy and the completion of 80 percent of recommended prenatal visits. This falls far below rates for Mercer County (71.1 percent) and New Jersey (72.3 percent).

There are also wide disparities in maternal mortality across racial groups, with black mothers in New Jersey almost twice as likely as mothers from other ethnic groups either during pregnancy, delivery, or the postpartum period. From 2009-2017, the maternal mortality rate in the City of Trenton was 37.2 deaths/100,000 live births.

In 2015, Trenton had a teen birth rate (age 17 and younger) nearly six times higher than the state average (30.5/1,000 to 5.8/1,000 live births). Having one or more pregnancies before age 17 is often a predictor for poor future educational and economic attainment.

At present, the closest medical centers where women from Trenton can give birth are the Capital Health Medical Center in Hopewell and the Penn Medicine Princeton Medical Center in Plainsboro. In 2017, there were 1407 babies born in Hopewell to women who reside in Trenton. For prenatal services, the Capital Health HealthStart Clinic is the only care provider in Trenton that accepts Medicaid. Women in Trenton have reported difficulty getting prenatal appointments in their first trimester.

Trenton's Senior Citizens

The senior population represents just over thirteen percent of the City's residents, according to data compiled by the Trenton Health Team, through the Conduent Healthy Communities

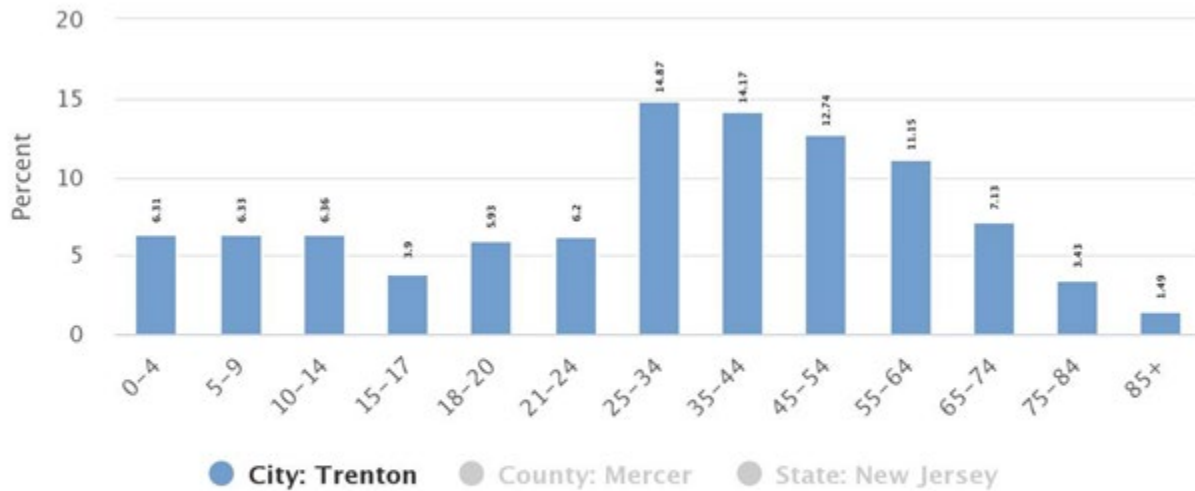
³⁷ New Jersey Department of Health. *New Jersey's Healthy Women, Healthy Families Request for Applications*. 2018. https://healthapps.state.nj.us/noticeofgrant/documents/DFHS19OTR_rfa.pdf

³⁸ Trenton Health Team. *Trenton Community Health Needs and Assets Assessment*. 2019. <https://trentonhealthteam.org/reports/tht-community-health-needs-assets-assessment-2019/>

Institute. These data have been updated as recently as January 2020. According to their most recent numbers, there are approximately:

- 8,160 persons (7.13 percent) between the ages of 65 and 74 years old
- 3,925 persons (3.43 percent) between the ages of 75 and 84 years old, and
- 1,707 persons (1.49 percent) 85 years and older

Table 4. Population by Age Group for Trenton, NJ, 2020



Claritas, 2020. trentonhealthteam.thehcn.net

Approximately 14.4 percent (1,266) of Trenton’s seniors are living alone. Approximately 2,800 seniors (20.3 percent) are living below the poverty level. The breakdown of the senior population, by gender, is as follows:

Male Population by Age		Female Population by Age	
65 – 74 years	3,690	65 – 74 years	4,470
75 – 84 years	1,636	75 – 84 years	2,289
85+ years	528	85+ years	1,179

Not surprisingly, women are tending to live longer than the men.

Trentonians over the age of 65 years are facing typical health challenges. According to the U.S. Census American Community Survey data, some 5,793 persons (42 percent) among the City’s older residents are living with a physical, mental or emotional disability. This means that they need substantial social services, and an accommodating environment, to enable them to

live independently. In fact, some 22 percent, or 3,034 aging Trentonians have disabilities that make it difficult for them to live alone. This means they may encounter hardships when trying to shop for themselves or visit a doctor’s office on their own. They may have difficulty accessing public transportation. For example, approximately 1,260 (9.1 percent) of seniors have an ambulatory challenge, making it difficult to impossible for them to move around on their own. They may find it difficult or be unable to walk, reach for things, or lift items on their own. Approximately 1,600 (11.6 percent) adults over 65 experience self-care difficulties, meaning they cannot dress or bathe themselves, and/or they cannot prepare food on their own. There are close to 1,000 senior Trentonians (7 percent) who have difficulty with vision. Those seniors in our community with independent living difficulties will experience a decline in their quality of life, unless they are provided with appropriate support.

In addition to mobility issues, seniors also are subject to high rates of such chronic diseases as hypertension, asthma, obesity, and high blood pressure. Nearly five percent (4.7 percent) of Trenton’s seniors have been stricken with some form of cancer.

The City’s Department of Health and Human Services concerns itself with addressing three primary themes when it comes to the well-being of our senior citizens: Maintenance, Movement and Management. Maintenance issues reference their health, wellness and housing needs. Movement issues speak specifically to the needs that seniors have for exercise, mobility and transportation. Finally, their Management needs occur primarily in the realm of financial security, and their interactions with other family members.

Diet and Nutrition

To be responsive to the needs of Trenton’s seniors, the City’s Division on Aging operates four Senior Centers; one in each Ward, as follows:

West Ward	Jennye Stubblefield Senior Center
South Ward	South Broad Street Senior Center
East Ward	Sam Naples Senior Center
North Ward	Reading Senior Center

Altogether, the Centers host approximately 200 seniors as “regulars” throughout the year. Those who are still driving or who are in good physical shape are able to get to the Centers on their own. Others who need assistance are transported daily, to and from home, in a city van or bus. Each day, the Senior Centers feed participants lunch provided and prepared by the Mercer County Office on Aging – Nutritional Program. This food service is an in-kind contribution that accompanies annual funding (Title 20 and Title III) from that County agency.

The City is actively engaged in outreach to all other seniors as well. Outreach activities include an annual fashion and talent show, as well as an annual December holiday party. Transportation is provided for any senior who wishes to attend the annual Valentine's Day Party, hosted by local members of the NJ State Assembly. In addition to the meals served daily at the Centers, the City encourages seniors to enjoy healthy foods by supporting their participation at local farmers' markets, where they can get fresh fruits and vegetables for a discounted price.

Communication and Compliance with Doctors

The Department of Health and Human Services uses Mercer County Title III funding to support seniors, including accompanying them to doctor's visits. If they are alone, support is provided at those meetings such as making sure seniors understand medical directives. The Department also provides well-being visits when it is aware of seniors who are living alone with limited mobility.

During the outbreak of the coronavirus / covid19, the Division on Aging delivered over 700 meals on a daily basis to seniors living in high-rise complexes. The Division conducted well-being visits during those delivery events, making sure that seniors were eating their meals and taking their medications. If any seniors needed refills, the Division made sure that those prescriptions were filled and delivered.

Housing Maintenance and Repair

One area that continues to be a challenge for the City is identifying, connecting with and providing services to those seniors who are homeowners and no longer able to implement regular, necessary maintenance and repairs. The Department of Health and Human Services has conducted home visits when neighbors complain that the upkeep of properties is declining. The Housing and Economic Development Division of Property Inspections has also conducted site visits, and can issue citations, when warranted. However, if occupants are maintaining payments for taxes and utilities, there is little that can be done beyond dispatching the Department of Public Works to remove overgrown trees and brush and mow lawns.

Ideally, the City of Trenton would like to be able to conduct regular inspections, and implement required repairs, when necessary. However, the City does not currently have the funding to conduct this kind of maintenance.

Physical Activity

The City of Trenton applies a portion of our Mercer County Title III funding toward programming that includes exercise activities. It has incorporated programming such as tai chi, yoga, swimming (in collaboration with the YMCA), walking and other kinds of physical

exercise. The City will continue to look for opportunities to connect seniors with very young children, to keep them socially and emotionally engaged (when such engagement does not lead to annoyance). The idea is to provide intergenerational relationships that are beneficial to both seniors and children.

Beyond physical movement, the City's Senior Centers have made a point of ensuring that seniors have transportation to events and programs, whenever possible. The City picks them up, transports them to various destinations, and then returns them, as needed. Further, the Social Services unit makes sure that they have the transportation needed to get them to and from doctor's appointments. During the pandemic, transportation for medical visits was also provided by the Mercer County TRADE group, as well as NJ Transit Medical Transport. The seniors much preferred in-office visits to tele-med visits when these options were both available.

Personal Management

When it comes to the management of their personal business matters, seniors often find themselves at a disadvantage. Specifically, they are often targeted, by both strangers and family members, because of their access to a steady, albeit fixed, income.

For example, family members have been known to commit identity theft, either covertly or overtly. They take out credit cards, or other loan agreements, where they sign their elderly family member's name, or they complete applications and push their elderly family member into signing the agreement. Then, when the bill goes unpaid, the senior is harassed by the creditor. In most of these cases, the senior doesn't want to report the perpetrator, creating a criminal charge. Moreover, seniors are often embarrassed about the circumstances, and won't let anyone know, except if the financial loss puts the senior in jeopardy of losing housing.

Similar situations arise when younger family members will invite their senior relatives to move into their homes, offering the pretense of care and concern. Sometimes, they are invited in to participate as caretakers for young grandchildren or great nieces or nephews. While family may have concern for their senior relatives, or for childcare needs, they sometimes extend these invitations in order to take advantage of the senior's regular monthly income for rent payments, or perhaps for cable or utility payments. In some of the more egregious cases, the seniors are coaxed into co-signing for the apartment, under the belief that costs will be shared. Then, when the younger family members fail to pay their share, the senior is put in jeopardy of losing housing due to non-payment of rent. Even if they can manage these costs, the senior is forced into the position of having to pay for the entirety of the bills, leaving nothing for their own well-being.

For those seniors living on their own, either in rental housing or in their own home, they are frequently targeted by third-party energy providers. These companies solicit contracts promising vastly reduced energy bill payments. In reality, many of these providers end up charging more than the major energy provider in this area (Public Service Electric and Gas).

Senior Center staff make every effort to be attentive to the demeanor of the seniors who attend our facilities. They pay close attention to changes in mood and inquire about living circumstances so that they are alerted when seniors are being taken advantage of, or preyed upon, even from the people closest to them.

Homelessness

Individuals and families that lack shelter are subjected to numerous health risks related to exposure, lack of sanitary conditions, assaults, unattended medical conditions like high blood pressure or diabetes, and housing instability, leading to poor medical follow-up, inadequate diet and physical activity, and school attendance and educational disruptions. Many homeless households also have difficulties accessing transportation and services that are distributed in different parts of the community. According to a 2012 “point-in-time count,” there were 1,009 homeless men, women and children counted in Mercer County.³⁹ However, it is estimated that the actual number who are homeless over the course of a full year could be two to four times the number counted at that one point in time.⁴⁰

Approximately 27 percent of adult homeless individuals in Trenton have mental health issues, 22 percent have medical disabilities and 18 percent have substance abuse issues.⁴¹ Housing needs for homeless individuals can be complex. For example, of those sheltered at the Rescue Mission, the only registered emergency shelter in Mercer County, 65-70 percent needed treatment for both drug or alcohol abuse and mental health issues and required supported housing arrangements for recovery and referrals to needed services.⁴² This group

³⁹ Trenton Health Team. “Community Health Needs Assessment: Trenton, New Jersey.” July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

⁴⁰ Trenton Health Team. “Community Health Needs Assessment: Trenton, New Jersey.” July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

⁴¹ Trenton Health Team. “Community Health Needs Assessment: Trenton, New Jersey.” July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

⁴² City of Trenton Department Of Housing and Economic Development. “City of Trenton 2010 Five Year Consolidated Plan.” August 6, 2010. <http://www.trentonnj.org/documents/housing-economic/community%20development%20block%20grant/2010%20five%20year%20plan/2010%20five%20year%20consolidated%20plan%20narrative.pdf>.

represents perhaps one of the biggest housing challenges, with implications for Housing First and other evidence-based housing interventions. There is also a need for homeless and other individuals living with AIDS to have access to supported housing and hospice settings for those individuals in later stages of the disease.⁴³

Housing Cost and Conditions

Housing quality is important to health in many ways, including the safety of housing conditions, presence of indoor air irritants that can cause or exacerbate respiratory diseases, and exposures to hazards in the surrounding environment. Exposure to lead paint (an estimated three-quarters of homes built prior to 1978 likely contain lead paint⁴⁴) or to rodents or insects, and inadequate plumbing, cooking, or heating equipment are important precursors to disparate health outcomes. An extrapolation from survey data indicates that approximately 50 percent of Trenton’s housing stock poses a lead exposure problem for occupants (See Figure 1.).⁴⁵

Many rental properties in Trenton suffer from inadequate sanitation, poor lighting, a compromised structure, and hazardous wiring and heating.⁴⁶ In addition, between 2006 and 2013, gross rents increased by an estimated 12 percent while incomes did not keep up or at times decreased. As a result, approximately two-thirds of residents paid 35 to 50 percent of their monthly incomes on housing expenses, often to correct problems resulting from deficient

⁴³ Trenton Health Team. “Community Health Needs Assessment: Trenton, New Jersey.” July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

⁴⁴ Environmental Protection Agency. “EPA and HUD Real Estate Notification and Disclosure Rule Questions and Answers.” <https://www.epa.gov/sites/production/files/documents/1018qa.pdf>.

⁴⁵ City of Trenton Department of Housing and Economic Development. “City of Trenton 2010 Five Year Consolidated Plan.” August 6, 2010. <http://www.trentonnj.org/documents/housing-economic/community%20development%20block%20grant/2010%20five%20year%20plan/2010%20five%20year%20consolidated%20plan%20narrative.pdf>.

⁴⁶ Trenton Health Team. “Community Health Needs Assessment: Trenton, New Jersey.” July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

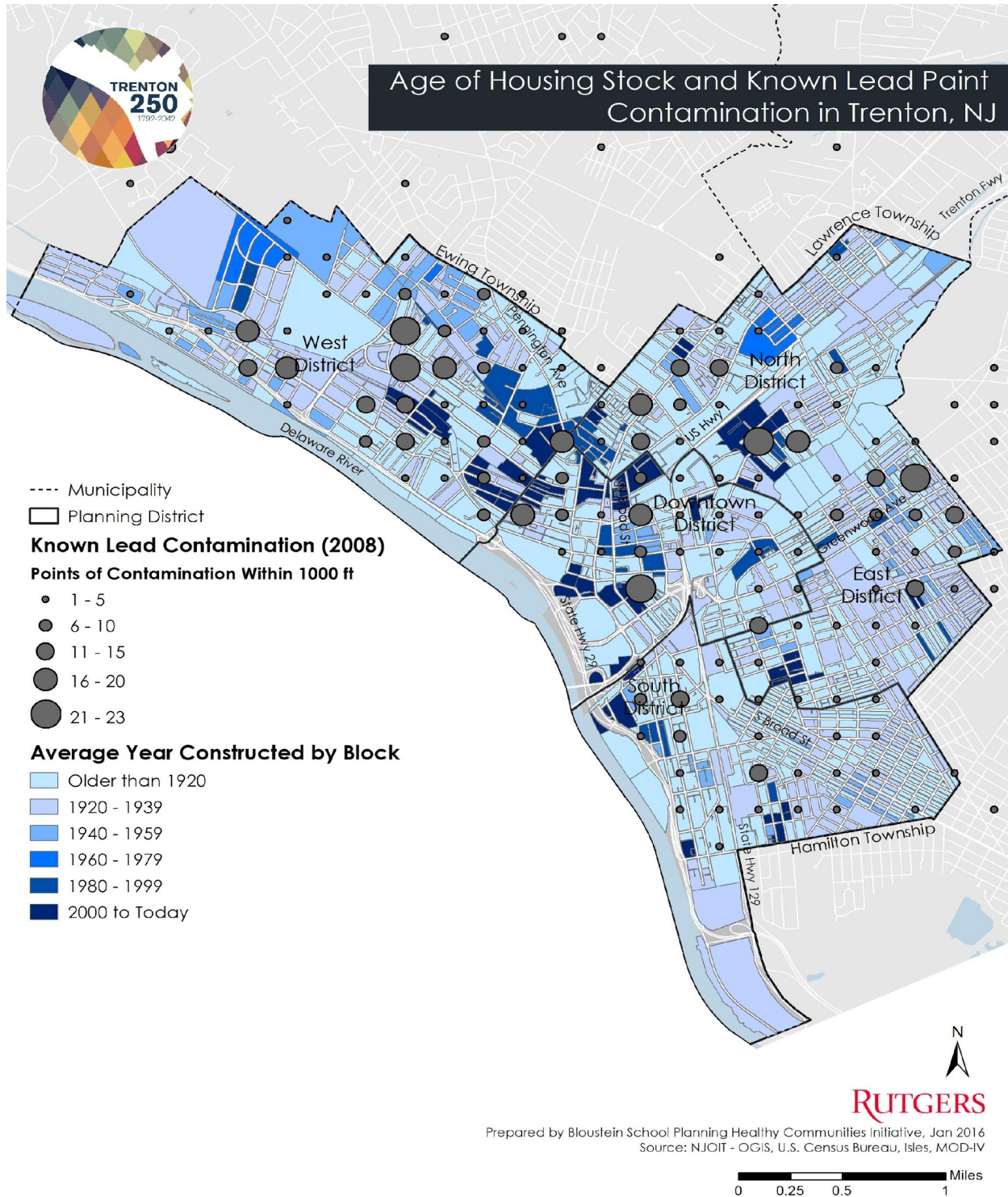


Figure 1. Age of Housing Stock and Known Lead Paint Contamination in Trenton, NJ

conditions.^{47,48} In 2015, it was estimated that an hourly wage of \$24.40 was needed to rent a 2-bedroom home in Mercer County and Trenton, while the estimated average wage of Trentonians was approximately \$17.14. Monthly rent that is affordable to this segment of the population is \$891.⁴⁹ For disabled or senior individuals receiving Supplemental Security Income (maximum monthly payments of \$764), an affordable rent of \$229 is needed, which confirms the need for alternative forms of housing development and ownership.

Vacant properties can cause stress in neighborhoods, as they attract pests, become weed-infested and can become harborage for unsafe activities and increased crime rates. There are about 6,300 abandoned properties, comprised of 3,800 structures and almost 2,500 vacant lots. The City's 5-Year Consolidated Plan cited research pointing to vacant city property as being the primary hazard identified by residents. Table 5 identifies those neighborhoods with the highest vacancy rates.

Table 5. Neighborhoods with highest vacancy rates

Neighborhood	Percent Vacant
Miller/ Wall	40.0
Central West 2	33.5
Wilbur 1	30.3
North Trenton 3	28.6
Hanover Academy	27.3

Source: Trenton Neighborhood Conditions Report, 2015

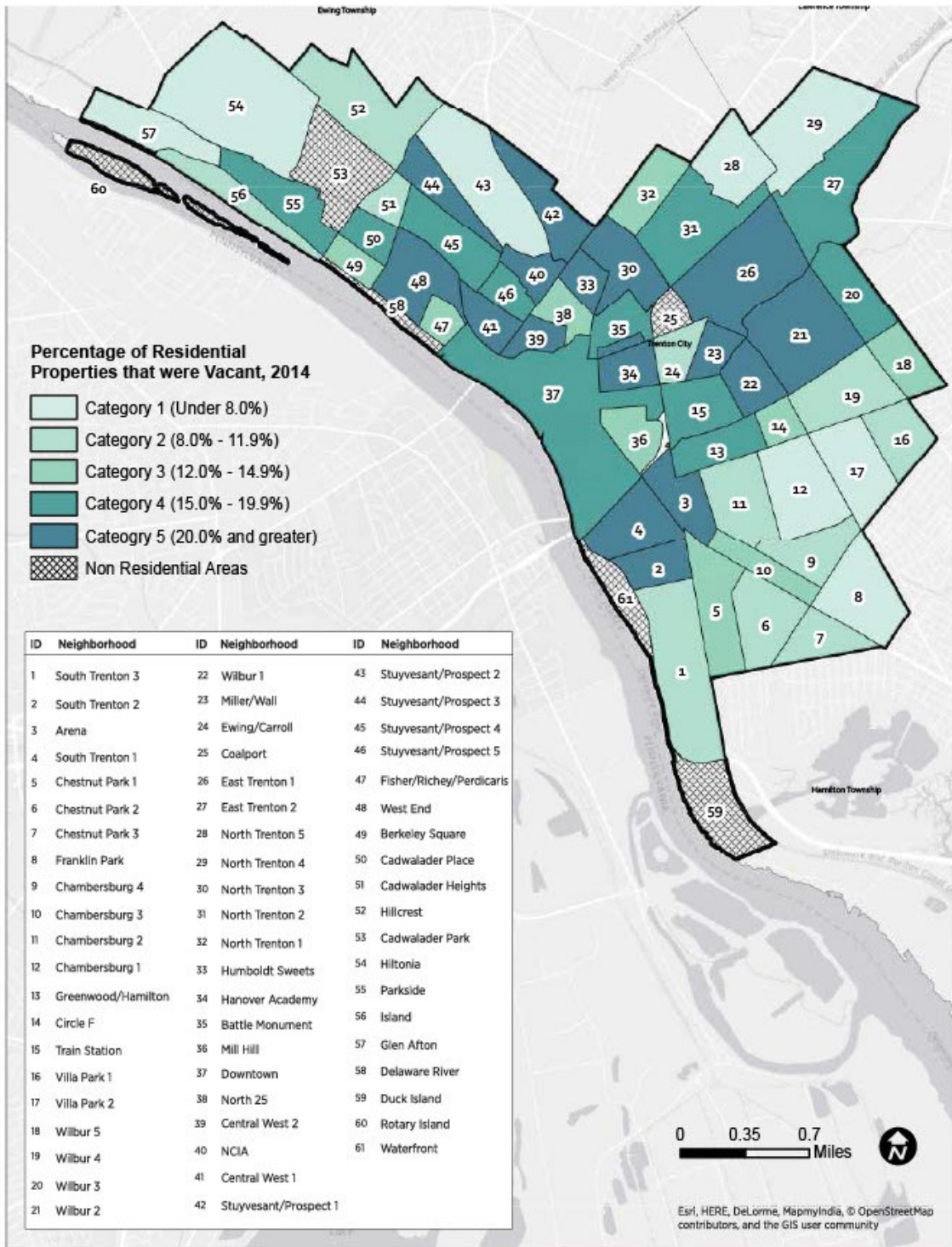
Homeownership is strongly associated with positive neighborhood features, including greater investment in one's property, greater neighborhood engagement, and stronger social capital.⁵⁰

⁴⁷ New Jersey Community Capital, Center for Community Progress, Isles Inc., and the Joseph C. Cornwall Center for Metropolitan Studies at Rutgers University-Newark. "Laying the Foundation for Strong Neighborhoods in Trenton, NJ." New Jersey Community Capital. October 2015.
http://newjerseycommunitycapital.org/sites/default/files/Trenton%20Report%20Full_Final%20Copy.pdf.

⁴⁸ Trenton Health Team. "Community Health Needs Assessment: Trenton, New Jersey." July 2013.
<https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

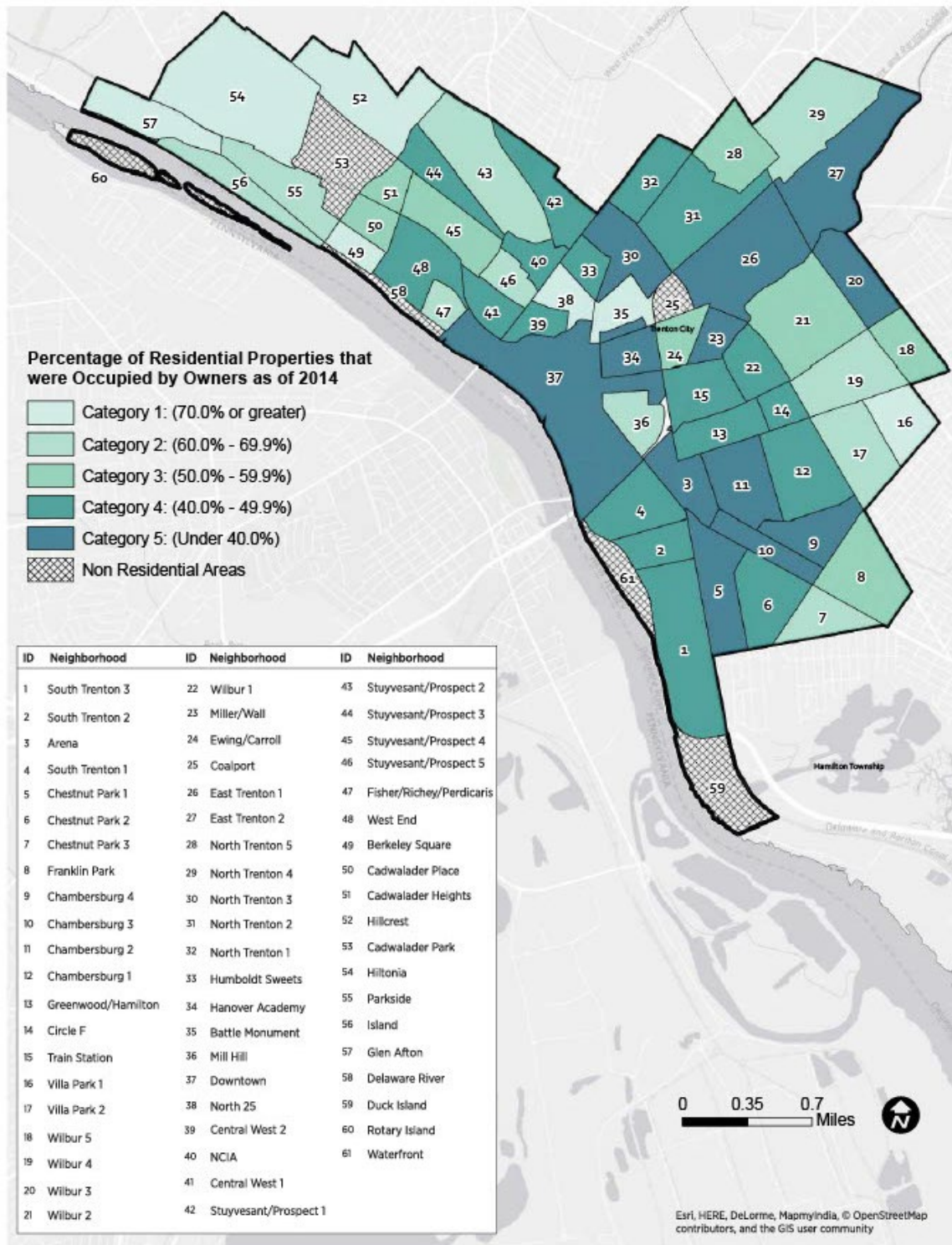
⁴⁹ National Low Income Housing Coalition. "Out of Reach 2015." 2015.
http://nlihc.org/sites/default/files/oor/OOR_2015_FULL.pdf.

⁵⁰ New Jersey Community Capital, Center for Community Progress, Isles Inc., and the Joseph C. Cornwall Center for Metropolitan Studies at Rutgers University-Newark. "Laying the Foundation for Strong Neighborhoods in Trenton, NJ." New Jersey Community Capital. October 2015.
http://newjerseycommunitycapital.org/sites/default/files/Trenton%20Report%20Full_Final%20Copy.pdf.



SOURCE: Isles, Inc. Trenton Parcel Survey (summer of 2014)

Figure 2. Residential Vacancy Rate



SOURCE: New Jersey Association of County Tax Boards Owner's Assessment List

Figure 3 Homeownership Rate

As with vacancy rates, the central and eastern sections of Trenton have some of the lowest homeownership rates (See Table 6).

Table 6. Neighborhoods with the Lowest Homeownership Rates

Neighborhood	Percent Owner Occupied
Arena	19.4
Miller/ Wall	21.4
Hanover Academy	26.2
Chestnut Park 1	29.9
Downtown	30.5

Source: Trenton Neighborhood Conditions Report, 2015

Exposures to Environmental Hazards

The quality of the environment is important to human health in many ways. In addition to material exposures such as lead in homes, air pollutants such as particulate matter, ozone, nitrogen oxides, and toxic air contaminants lead to health impacts such as lung cancer, cardiovascular disease, asthma, and other respiratory illnesses. While contaminated sites can be associated with some of these exposures, living near sources such as busy roadways, heavy industrial processing facilities, or gas stations can also expose community members to unhealthy conditions including pollution, accidents, and noise that additionally can cause stress and disruption of sleep patterns. Exterior sources of pollution can become trapped indoors and, in addition to interior sources, can have cumulative effects on occupant health.

Proxy measures such as known contaminated sites, proximity to facilities that emit air pollutants and flood prone areas are sometimes used as indicators of the existence of toxins that building occupants are likely to be exposed to without measuring the presence of the contaminant in the body. As shown in Figure 1, there are 137 active known contaminated sites (KCS) within or on the border of the City. Many of these sites are in residential areas, recreational areas, water resources, or vacant properties or have impact on use of these areas.

Toxins in the soil, groundwater, surface water, or a combination of conditions can migrate off site to create exposure conditions to hydrocarbons, solvents, pesticides, lead, and other heavy metals that are associated with disease as endocrine disruptors or carcinogens. Similarly, air toxins that are posing the greatest hazards for Mercer County include diesel particulate matter,

formaldehyde, carbon tetrachloride, and benzene. The County is a designated non-attainment area⁵¹ (not meeting EPA standards for public health) for ground level ozone, exposure to which is known to be associated with serious chronic diseases.⁵² The County was also a non-attainment area for particulate matter 2.5 until 2013. While the County has now met federal standards 2.5 for particulate matter, past levels may still be responsible for ongoing health issues.

Contaminated sites located in residential areas can pose threats of potential direct contact with soil or air emissions. In the case of soil-based contaminants, children can ingest toxins through hand-mouth behaviors, and residents may track soil into residential, commercial or school settings on shoes and items of clothing. Similarly, exposure to repetitive flooding in building structures may result in exposure to mildew and mold, exacerbating asthma and related respiratory and allergic conditions. Figure 4 also represents flood areas affecting the City, with implications for the development or redevelopment of housing and other priorities such as remediation of contaminated sites and siting of day care centers and early education facilities.

⁵¹ United States Environmental Protection Agency. "NAAQS Overview." *State of New Jersey Department of Environmental Protection*. <http://www.nj.gov/dep/baqp/aas.html>.

⁵² Linn, Christopher. "City of Trenton Natural Resources Inventory." Delaware Valley Regional Planning Commission. 2015. http://www.issueLab.org/resource/city_of_trenton_natural_resource_inventory_nri.

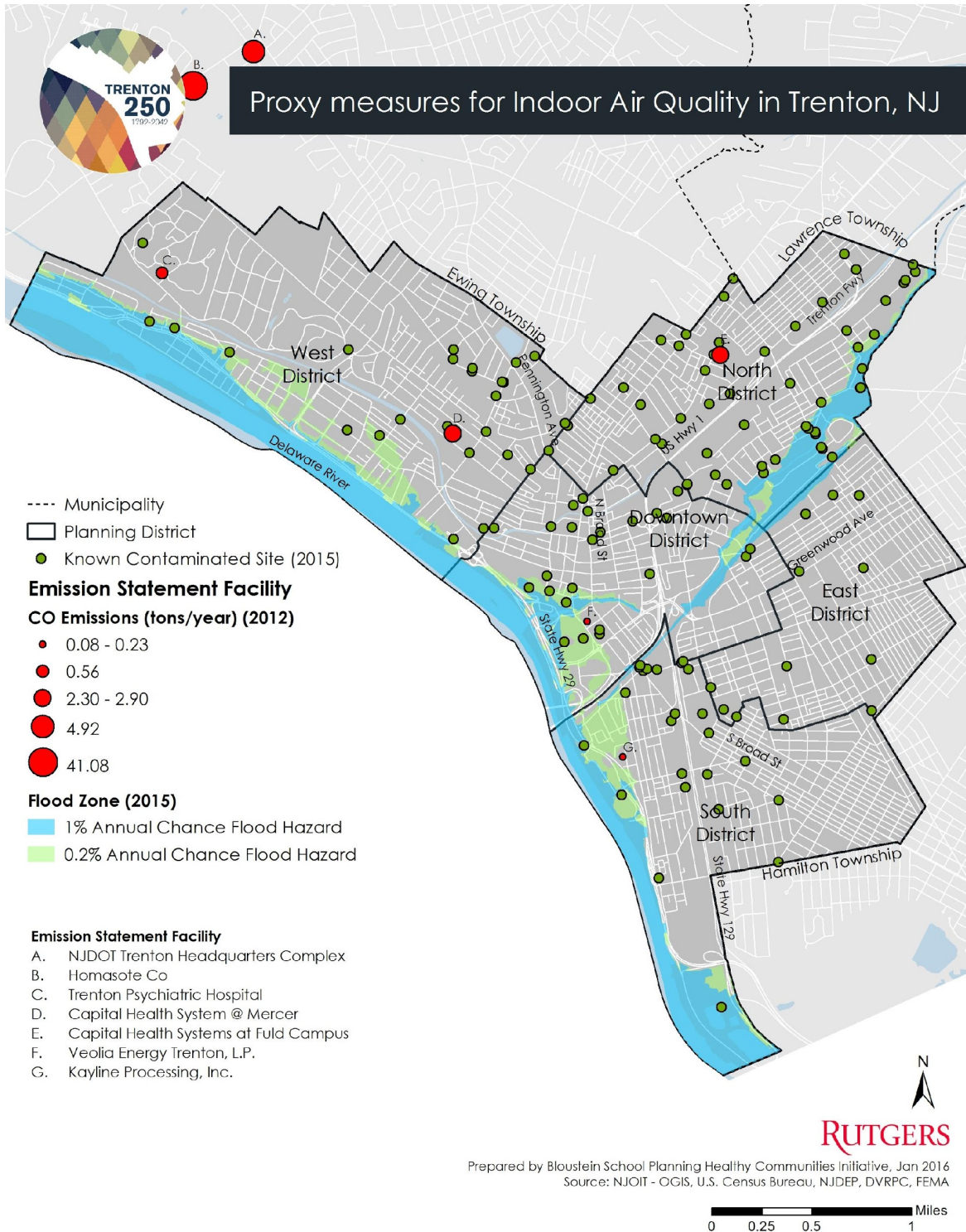


Figure 4. Proxy measures for Indoor Air Quality in Trenton, NJ

Safety and Crime

Safety and crime directly and indirectly connect to health in a variety of ways, including through physical harm as well as psychological and emotional stress and illness. As shown in Table 7, violent crime rates in Trenton are more than four times higher than that of New Jersey and approximately tenfold greater than in nearly every neighboring municipality in the county. Violent crime was double the national average.⁵³ Complicating this problem is the presence of 11 reported gangs comprising around 5,325 members, with two to four of these gangs present in the City’s schools.⁵⁴

Between 2009 and 2013, violent crime rates in the United States fell by 15 percent;⁵⁵ however, violent crimes committed in Trenton rose by 13 percent. In 2013, the Trenton Police Department recorded a total of 1,122 violent crimes—37 homicides, 3 rapes, 525 robberies, and

Table 7. Offenses Known to Law Enforcement per 100,000 Population, 2010

Geography	Violent Crime Rate*	Property Crime Rate**
New Jersey	307.7	2,081.9
East Windsor	91.2	1,236.1
Ewing	330.5	1,939.3
Hamilton	206.7	2,017.7
Hightstown	167.6	1,359.4
Hopewell Borough	50.0	549.7
Hopewell Township	60.9	559.2
Lawrence	127.7	2,563.5
Pennington	74.8	710.5
Princeton Borough	156.2	2,781.1
Princeton Township	79.6	967.0
Robbinsville	47.7	930.6
Trenton	1,433.8	3,011.3
West Windsor	44.1	1,466.8

* Violent crime includes: murder and non-negligent manslaughter; forcible rape; robbery; and aggravated assault. ** Property crime includes: burglary; larceny-theft; motor vehicle theft; and arson. Source: Trenton CHNA (2013)

⁵³ New Jersey Community Capital, Center for Community Progress, Isles Inc., and the Joseph C. Cornwall Center for Metropolitan Studies at Rutgers University-Newark. “Laying the Foundation for Strong Neighborhoods in Trenton, NJ.” New Jersey Community Capital. October 2015. http://newjerseycommunitycapital.org/sites/default/files/Trenton%20Report%20Full_Final%20Copy.pdf.

⁵⁴ Trenton Health Team. “Community Health Needs Assessment: Trenton, New Jersey.” July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

⁵⁵ Federal Bureau of Investigation. “Violent Crime.” <https://www.fbi.gov/about-us/cjis/ucr/crime-in-the-u.s/2010/crime-in-the-u.s.-2010/violent-crime>.

547 assaults. The number of homicides in 2013 was an all-time high for the City.⁵⁶ Fortunately, that data on violent crime citywide for 2014 shows a significant decline from 2013.⁵⁷

As with other characteristics, the incidence of crime is not uniform across the City (see Table 8). While Trenton has several high-crime areas, crime rates in other parts of the City are comparable to or below national levels.

Table 8. Highest and Lowest Violent Crime Rates by Neighborhood

	Violent Crime Rate per 100k people
Neighborhood with Lowest Rates	
Hiltonia	20
Cadwalader Heights	100
South Trenton 2	184
Villa Park 1	352
Chestnut Park 3	382
Neighborhoods with Highest Rates	
Hanover-Academy	2,017
Chambersburg 3	2,087
Wilbur 1	2,180
Chambersburg 2	2,247
Central West 1	2,367

Source: Laying the Foundation for Strong Neighborhoods in Trenton, NJ. New Jersey Community Capital, Center for Community Progress Isles, Inc., Joseph C. Cornwall Center for Metropolitan Studies, Rutgers University-Newark. 2015

Opportunities for Physical Activity

The amount of physical activity people engage in each day is influenced by many factors. These include personal characteristics and characteristics of the built environment. For example, personal motivation, the type of job one has, and physical limitation play a role, but

⁵⁶ Areavibes Inc. "Trenton, NJ Crime." 2010-2016. <http://www.areavibes.com/trenton-nj/crime/>.

⁵⁷ New Jersey Community Capital, Center for Community Progress, Isles Inc., and the Joseph C. Cornwall Center for Metropolitan Studies at Rutgers University-Newark. "Laying the Foundation for Strong Neighborhoods in Trenton, NJ." New Jersey Community Capital. October 2015. http://newjerseycommunitycapital.org/sites/default/files/Trenton%20Report%20Full_Final%20Copy.pdf.

so do neighborhood conditions, availability of recreational opportunities, and having safe places to walk and bike. A lack of physical activity is one of the leading causes of preventable death worldwide.⁵⁸ These preventable deaths are higher among those that sit still more than 5 hours per day. The more inactivity, the higher risk of chronic diseases. People that sit still on a couch or chair at home more than 4 hours per day have a 40 percent higher risk of chronic disease than those that sit fewer than 4 hours per day. However, those that exercise at least 4 hours per week are as healthy as those that sit fewer than 4 hours per day. Thus, activity of any kind is important to a healthy life.⁵⁹

Lack of physical activity has been shown to be a risk factor for cardiovascular disease and related conditions:

- Less active and less fit people have a greater risk of developing high blood pressure.
- Studies show that physically active people are less likely to develop coronary heart disease than those who are inactive. This is even after researchers accounted for smoking, alcohol use, and diet.
- Lack of physical activity can add to feelings of anxiety and depression.
- Physical inactivity may increase the risk of certain cancers.
- Physically active overweight or obese people significantly reduced their risk for disease with regular physical activity.⁶⁰

There are some opportunities for physical activity in Trenton. As shown in Figure 5, there are many parks or recreational facilities located throughout the City. These include: Cadwalader Park—the City’s largest park—located in the West Ward; the Delaware and Raritan Canal, with several access points in the City; and the Greater Trenton Area YMCA. In addition, the City has a mostly-complete network of sidewalks citywide.

However, making the choice to be physically active is made difficult through a number of factors that are both quantifiable and, in some cases, subjective. For example, built

⁵⁸ Lopez AD, Mathers CD, Ezzati M, Jamison DT, Murray CJ. "Global and regional burden of disease and risk factors, 2001: systematic analysis of population health data." *The Lancet*. May 2006.
<http://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736%2806%2968770-9.pdf>.

⁵⁹ Han, Esther. "Sitting can lead to an early death: study." *The Sydney Morning Herald*. March 28, 2012.
<http://www.smh.com.au/lifestyle/diet-and-fitness/sitting-can-lead-to-an-early-death-study-20120328-1vy64.html>.

⁶⁰ John Hopkins Medicine. "Risks of Physical Inactivity." Health Library.
http://www.hopkinsmedicine.org/healthlibrary/conditions/cardiovascular_diseases/risks_of_physical_inactivity_85,P00218/.

environment conditions in the City compromise pedestrian and bicycle safety, and crime and fear of crime significantly influence how much physical activity people get. Perceived fear of crime in the streets and parks greatly influences the ability of Trenton residents to safely access opportunities for physical activity, including walking and biking as a form of active transportation and participating in recreational activities at City parks. Figure 5 shows the location of homicides and aggravated assaults committed with guns overlaid with opportunities for physical activity.

About 45 percent of Trenton parents feel that their neighborhoods are somewhat or very unsafe due to crime. Vacant properties have been noted as a primary threat to community safety and require diligent activity to bring these sites to productive use in order to enhance site lines for both official and informal surveillance. This includes, but is not limited to, sealing off access points, trimming brush and trees, and cleaning on- and off-site contamination.

Current levels of activity among young people living in Trenton are low. The 2013 Trenton Community Health Needs Assessment noted that only one third of Trenton children meet the national recommended exercise guidelines of 60 minutes of activity per day, with almost half not even getting 30 minutes a day. Hispanic children are the least active, with three quarters not meeting the 60-minute/day requirement. Research has also shown Trenton Hispanic children to have among the highest rates of obesity of all ethnic groups in the City.⁶¹

Despite the number of small parks scattered throughout the City, Trenton was viewed by the youth participants in a recent survey as lacking in recreational amenities, including parks and recreation facilities.⁶² In fact, in the City's 2010 survey of residents and service providers as part of Citizen Participation Plan for the Five Year Consolidated Plan, parks and recreational facilities ranked as being the highest in importance (76 percent).⁶³

⁶¹ Trenton Health Team. "Community Health Needs Assessment: Trenton, New Jersey." July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

⁶² Trenton Historic Development Collaborative. "Neighborhood Plan." *Isles, Inc.* April 2011. <https://isles.org/sites/default/files/THDC%20Neighborhood%20Plan%20FINAL%20110420%20%20lowerres.pdf>.

⁶³ City of Trenton Department Of Housing and Economic Development. "City of Trenton 2010 Five Year Consolidated Plan." August 6, 2010. <http://www.trentonnj.org/documents/housing-economic/community%20development%20block%20grant/2010%20five%20year%20plan/2010%20five%20year%20consolidated%20plan%20narrative.pdf>.

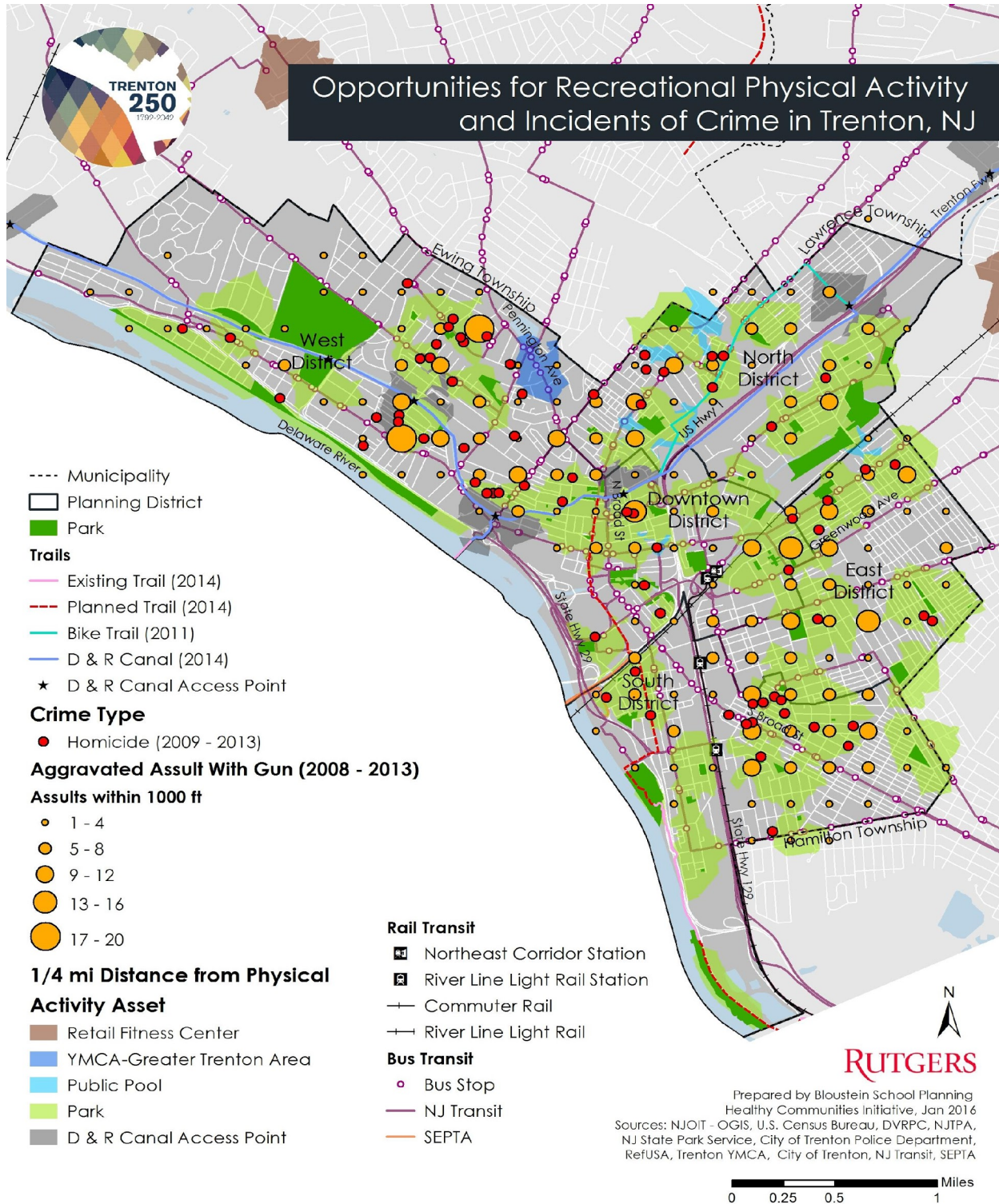


Figure 5. Opportunities for Recreational Physical Activity and Incidents of Crime in Trenton, NJ

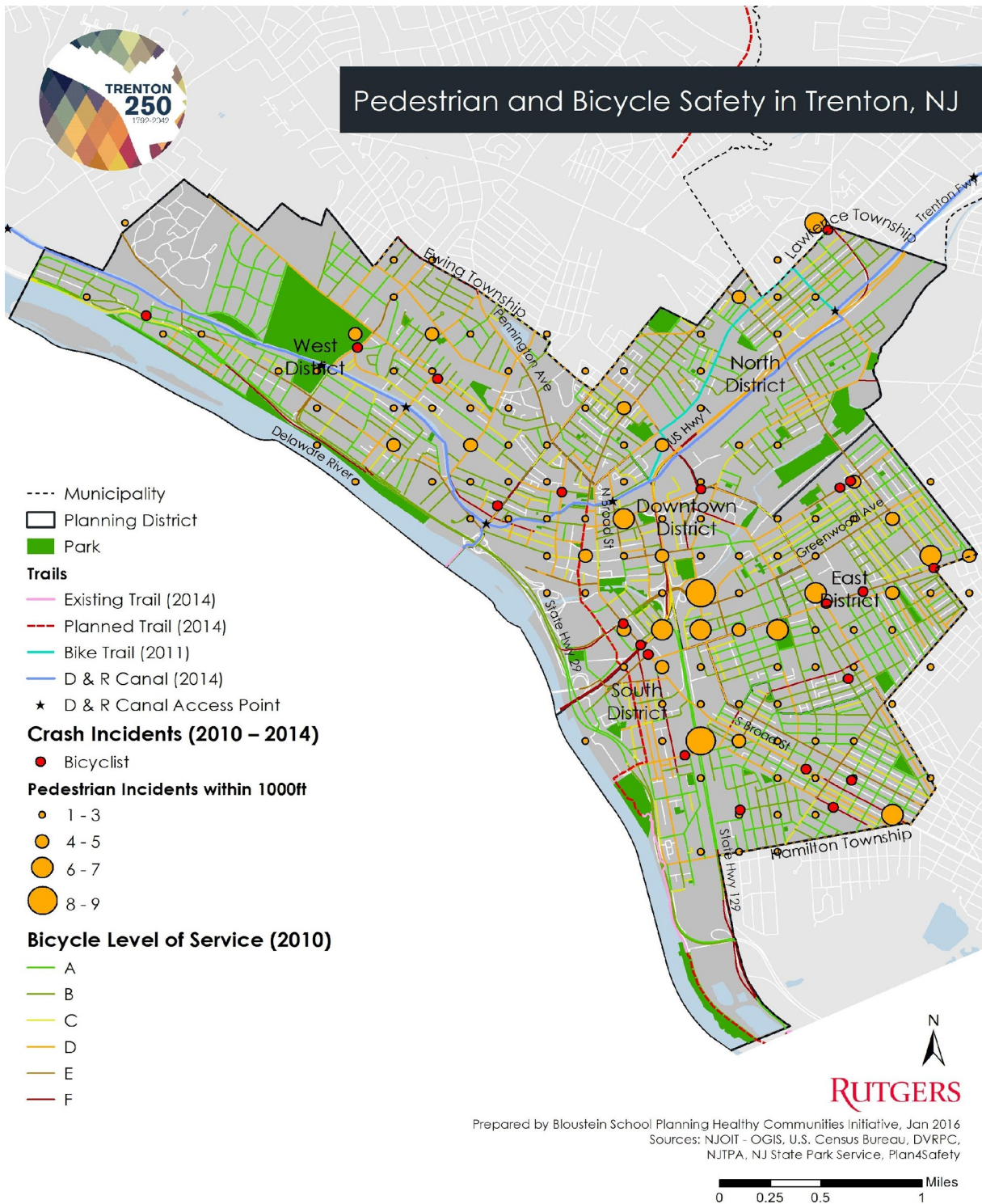


Figure 6. Pedestrian and Bicycle Safety in Trenton, NJ

In terms of walking and biking for transportation, Trenton has a sound foundation on which to build. The City adopted a Complete Streets resolution in March of 2012. The resolution states that: “All City streets shall be designed and constructed to include accommodations for pedestrians, bicyclists, public transit, and motorists. Complete streets shall accommodate users of all ages and abilities.” The current network of sidewalks is mostly completed throughout the City. However, as shown in Figure 6, crashes involving pedestrian and bicycles happen throughout the City, especially in the City’s Downtown, South and East Wards, despite the adoption of the Complete Streets Resolution, showing there is still need for implementation of this resolution and safe cycling education.

Access to Healthy Food

Food insecurity affects about one in five Trenton households.⁶⁴ Fewer than 60 percent of Trenton residents that participated in a recent survey said it was easy to find fresh produce in their community.⁶⁵ With 17 percent of Trenton households regularly lacking enough food to eat, hunger is also present. Many households utilize emergency food programs, but many more who qualify do not take advantage of these benefits.

Trenton has been identified as a food desert due to lack of access to healthy foods such as fresh fruits and vegetables.⁶⁶ With only three supermarkets, the City has the lowest number of supermarkets per capita in the state. Estimates indicate that, up to six more supermarkets are needed in the City to adequately serve residents.⁶⁷ In addition, approximately 10 percent of City residents lack complete kitchen facilities in their homes.⁶⁸

⁶⁴ Trenton Health Team. “Community Health Needs Assessment: Update and Addendum to the 2013 Report”, page 11. January 2016. <http://www.trentonhealthteam.org/wp-content/uploads/THT-CHNA-2016-Update.pdf>

⁶⁵ Trenton Health Team. “Community Health Needs Assessment: Update and Addendum to the 2013 Report.” January 2016. <http://www.trentonhealthteam.org/wp-content/uploads/THT-CHNA-2016-Update.pdf>.

⁶⁶ Ploeg, V. et al. “Access to Affordable and Nutritious Food—Measuring and Understanding Food Deserts and Their Consequences: Report to Congress.” *United States Department of Agriculture*. June 2009. https://www.ers.usda.gov/webdocs/publications/42711/12716_ap036_1_.pdf.

⁶⁷ Trenton Health Team. “Community Health Needs Assessment: Update and Addendum to the 2013 Report.” January 2016. <http://www.trentonhealthteam.org/wp-content/uploads/THT-CHNA-2016-Update.pdf>

⁶⁸ City of Trenton Department Of Housing and Economic Development. “City of Trenton 2010 Five Year Consolidated Plan.” August 6, 2010. <http://www.trentonnj.org/documents/housing-economic/community%20development%20block%20grant/2010%20five%20year%20plan/2010%20five%20year%20consolidated%20plan%20narrative.pdf>.

Most Trenton residents do not live within walkable distance (half a mile) of a grocery store,⁶⁹ as area supermarkets are typically located on high-traffic corridors near the City's edge and are accessible only by car. This makes accessing the supermarkets difficult for the many residents who do not own cars and find it difficult to rely on public transportation even when buses are available.⁷⁰ Figure 7 shows locations of supermarkets, farmers markets, food pantries, and "healthy" corner stores within the City.

In addition to supermarket access, which is associated with better health, research also indicates that the lowest rates for being overweight or obese in the U.S. are found where people have easy access to alternative food sources such as farmers' markets and community supported agriculture (CSA). As of 2016, there were three farmers markets located within or immediately adjacent to the City. Two are seasonal and the other located in an area not conveniently served by public transportation.

Figure 8 shows the location of community gardens in the City. As shown on the map there are a number of residential neighborhoods in the City located outside a ¼ mile walking distance of community gardens. However, a recent survey of residents indicated that the locations of community gardens are not well known to many residents.⁷¹

It is noteworthy that nearly half of Trenton's public schools are located proximate to local bodegas with limited healthy food options (See Figure 9). The convenient location of bodegas allows Trenton's youth to frequent these venues before, during, and after school. Compared to supermarkets, bodegas tend to carry minimally nutritious and overly sweetened and processed items including soda, candy and cooked fast food, as well as tobacco products.⁷² Most

⁶⁹ The Food Trust for the Healthy Corner Stores Network. "Healthy Corner Stores Issue Brief." *The Food Trust*. Spring 2011. http://thefoodtrust.org/uploads/media_items/spring2011issuebrief.original.pdf.

⁷⁰ Edward J. Bloustein School of Planning and Public Policy, the State University of Rutgers. "A community food assessment of Trenton, New Jersey." *Ralph W. Voorhees Center for Civic Engagement*. Spring 2005. <http://rwv.rutgers.edu/wp-content/uploads/2013/08/FoodStudioReport2005.pdf>.

⁷¹ Edward J. Bloustein School of Planning and Public Policy, the State University of Rutgers. "A community food assessment of Trenton, New Jersey." *Ralph W. Voorhees Center for Civic Engagement*. Spring 2005. <http://rwv.rutgers.edu/wp-content/uploads/2013/08/FoodStudioReport2005.pdf>.

⁷² The Food Trust for the Healthy Corner Stores Network. "Healthy Corner Stores Issue Brief." *The Food Trust*. Spring 2011. http://thefoodtrust.org/uploads/media_items/spring2011issuebrief.original.pdf.

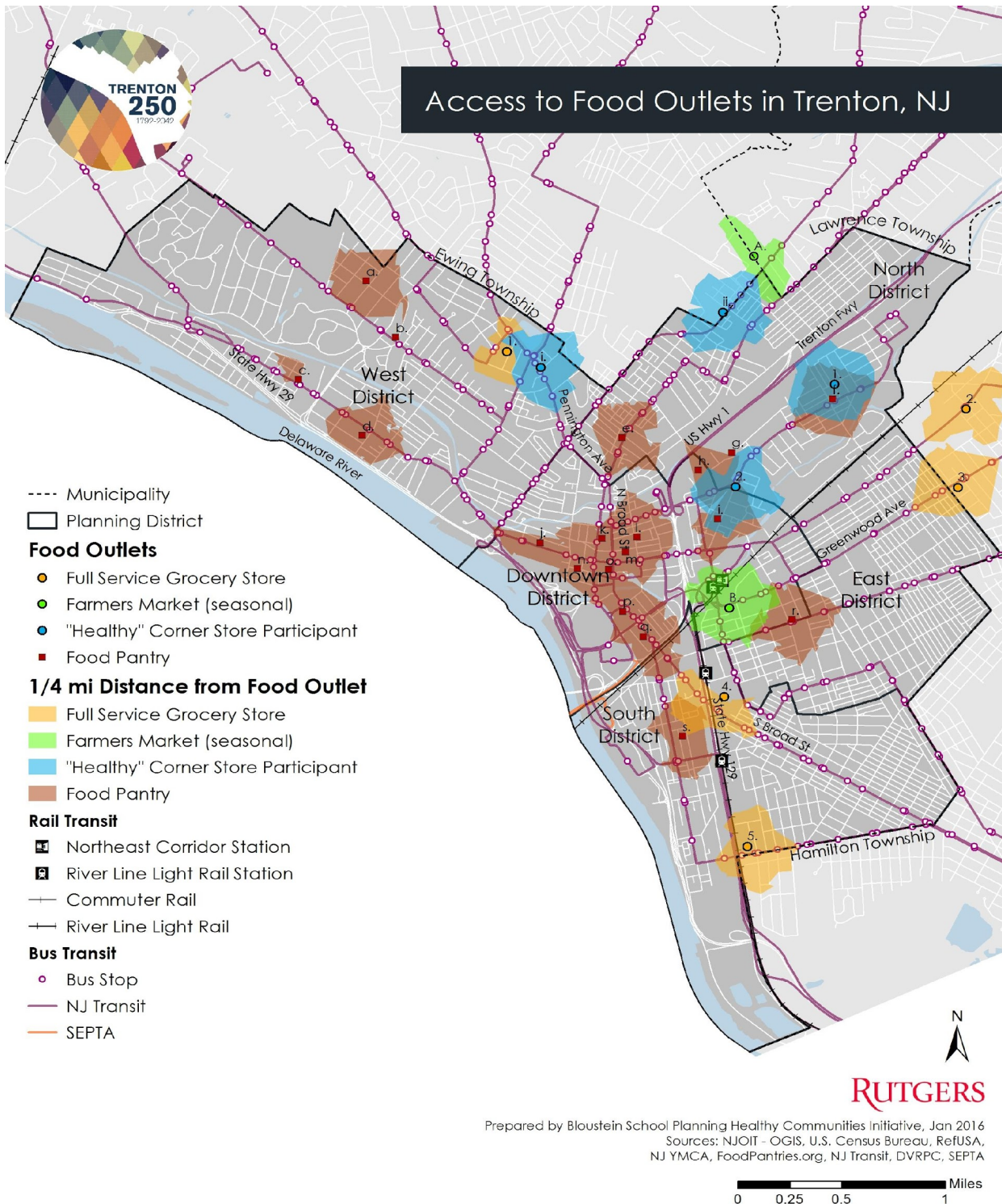


Figure 7. Access to Food Outlets in Trenton, NJ

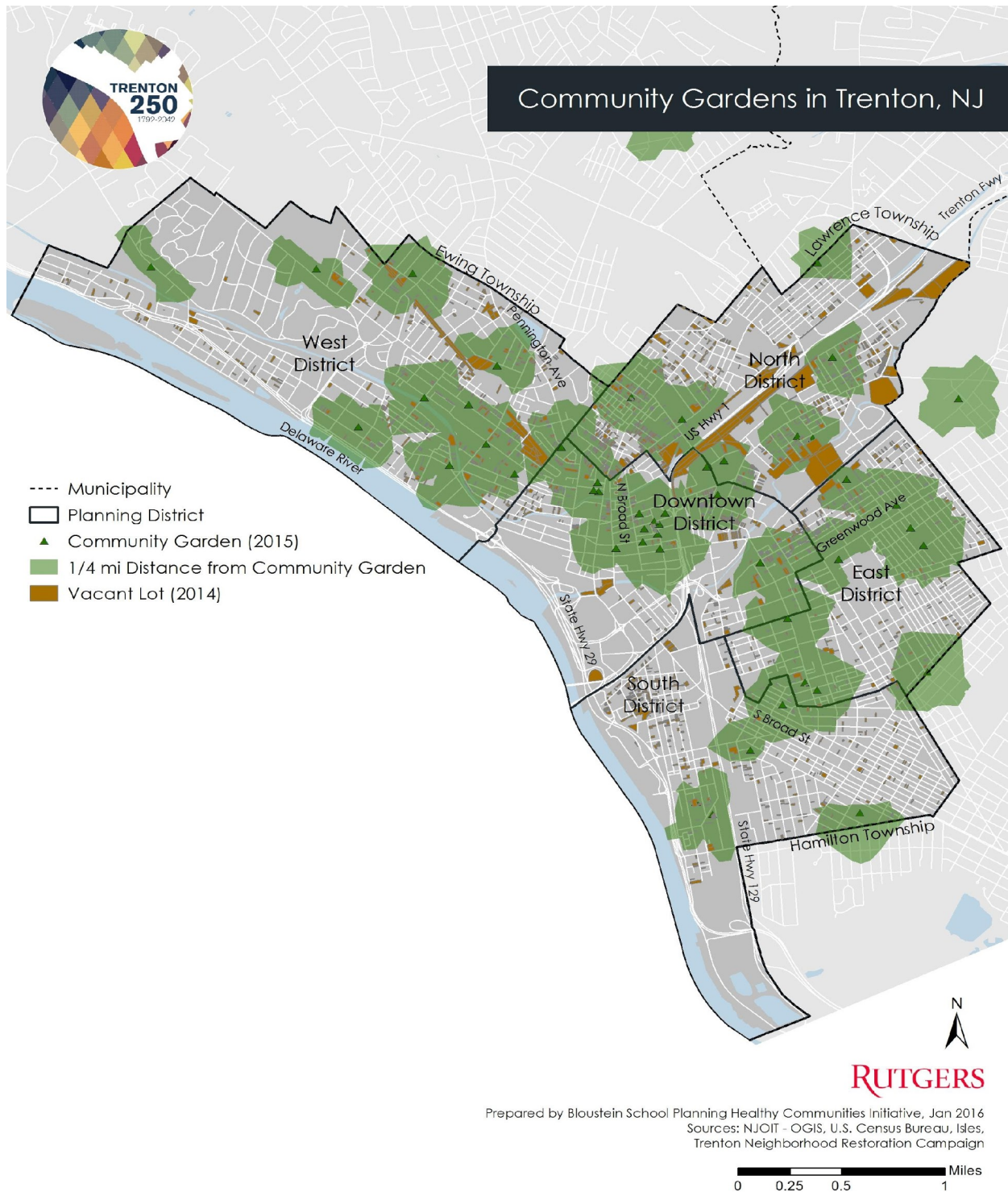


Figure 8. Community Gardens in Trenton, NJ

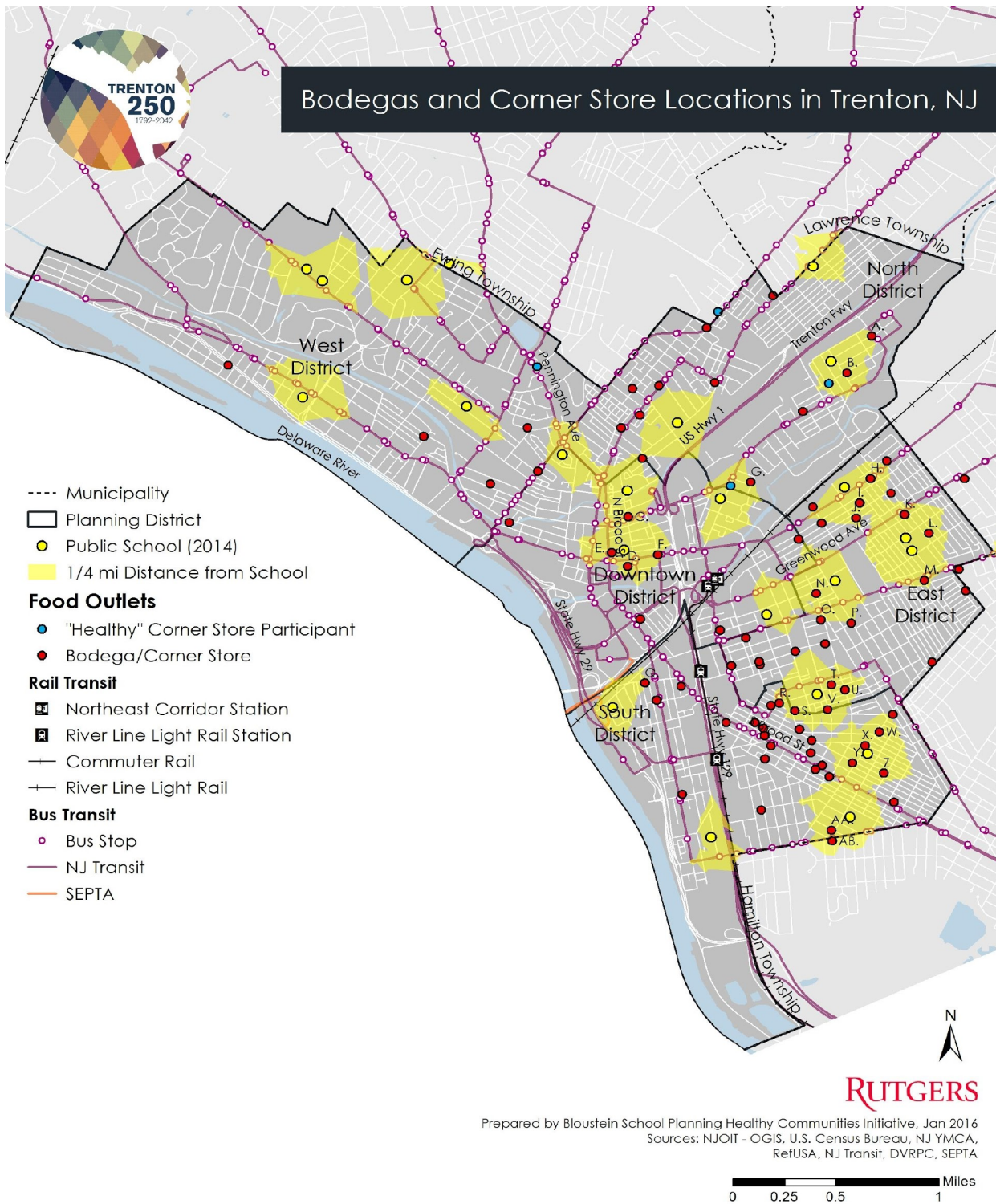


Figure 9. Bodegas and Corner Store Locations in Trenton, NJ

bodegas do not offer fresh fruits and vegetables, meat or dairy. As of 2016, there were only four bodegas participating in Trenton’s Healthy Corner Store Initiative.⁷³

In addition, while the National School Lunch and Breakfast programs have demonstrated improvements in dietary standards, school lunches have remained largely the same.⁷⁴ Sixty-one percent of students in Trenton are eligible for the free or reduced federal school food program.⁷⁵ While most schools are equipped with cooking facilities, it is estimated that 95 percent of breakfasts and lunches consist of canned foods. A study in 2005 found that 85 percent of students rated school cafeteria food as only “fair.”⁷⁶

Access to Healthcare Services and Health Literacy

While the City of Trenton and its surrounding region have many medical services and facilities (see Figure 10), access barriers exist. Affordability of healthcare and lack of health insurance, for unemployed, immigrants, undocumented or low-wage workers, creates barriers to health care. For non-English speaking populations, navigating the complex health system and getting appropriate and culturally competent information is challenging. For behavioral health services, stigma associated with seeking treatment creates an additional, substantial barrier to accessing needed services,⁷⁷ further reaffirming the need for non-institutional sources of services. Services for individuals diagnosed with both substance abuse and mental health problems are also lacking, exacerbated by extremely low Medicaid reimbursement rates,

⁷³ New Jersey YMCA State Alliance. “New Jersey Healthy Corner Store Initiative.”
<http://www.njymca.org/main/healthy-corner-stores/>.

⁷⁴ Edward J. Bloustein School of Planning and Public Policy, the State University of Rutgers. “A community food assessment of Trenton, New Jersey.” Ralph W. Voorhees Center for Civic Engagement. Spring 2005.
<http://rwv.rutgers.edu/wp-content/uploads/2013/08/FoodStudioReport2005.pdf>.

⁷⁵ Edward J. Bloustein School of Planning and Public Policy, the State University of Rutgers. “A community food assessment of Trenton, New Jersey.” Ralph W. Voorhees Center for Civic Engagement. Spring 2005.
<http://rwv.rutgers.edu/wp-content/uploads/2013/08/FoodStudioReport2005.pdf>.

⁷⁶ Edward J. Bloustein School of Planning and Public Policy, the State University of Rutgers. “A community food assessment of Trenton, New Jersey.” Ralph W. Voorhees Center for Civic Engagement. Spring 2005.
<http://rwv.rutgers.edu/wp-content/uploads/2013/08/FoodStudioReport2005.pdf>.

⁷⁷ Greater Mercer Public Health Partnership. “Mercer County, NJ Community Health Assessment Report.” United Way of Greater Mercer County. 2012.
https://www.uwgmc.org/sites/uwgmc.org/files/Final_Mercer_CHARReport_July122012.pdf.

resulting in added stress to clients, families, and public systems such as hospital emergency rooms, criminal justice system, and social services.^{78,79}

A lack of convenient and efficient transportation creates barriers to accessing appropriate health care services to meet individual's physical and mental health needs. Many residents of Trenton do not own cars, and public transportation in the City can be costly for longer distances. The North and East Wards with higher concentration of lower-income households are less likely to possess vehicles, have limited access to healthy food, and are more likely to face violence in and around their immediate environment. Additionally, there has been a decline in health care providers in low-income Trenton neighborhoods, which contributes to an inequitable access to primary and other health care, even for those who are insured or qualify for coverage (Medicare, Medicaid). At a time when the co-pay for services per encounter are increasing, additional expense for public transportation may have a detrimental effect on healthcare utilization and may even prevent patients with chronic diseases from adhering to prescribed frequencies of visit for effective management of their disease. Low educational attainment and language barriers also impact health literacy and access to care in Trenton, where over 35 percent of the population speaks a language other than English in the home, higher than the state percentage of about 29 percent.⁸⁰

⁷⁸ Trenton Health Team. "Community Health Improvement Plan." January 2014.
<https://trentonhealthteam.org/wp-content/uploads/THT-Community-Health-Improvement-Plan-2014-Jan.pdf>.

⁷⁹ Dickson, Virgil. "Medicaid plans struggle to provide mental health services." *Modern Healthcare*. July 4, 2015.
<http://www.modernhealthcare.com/article/20150704/MAGAZINE/307049979>.

⁸⁰ Trenton Health Team. "Community Health Needs Assessment: Update and Addendum to the 2013 Report." January 2016. <http://www.trentonhealthteam.org/wp-content/uploads/THT-CHNA-2016-Update.pdf>

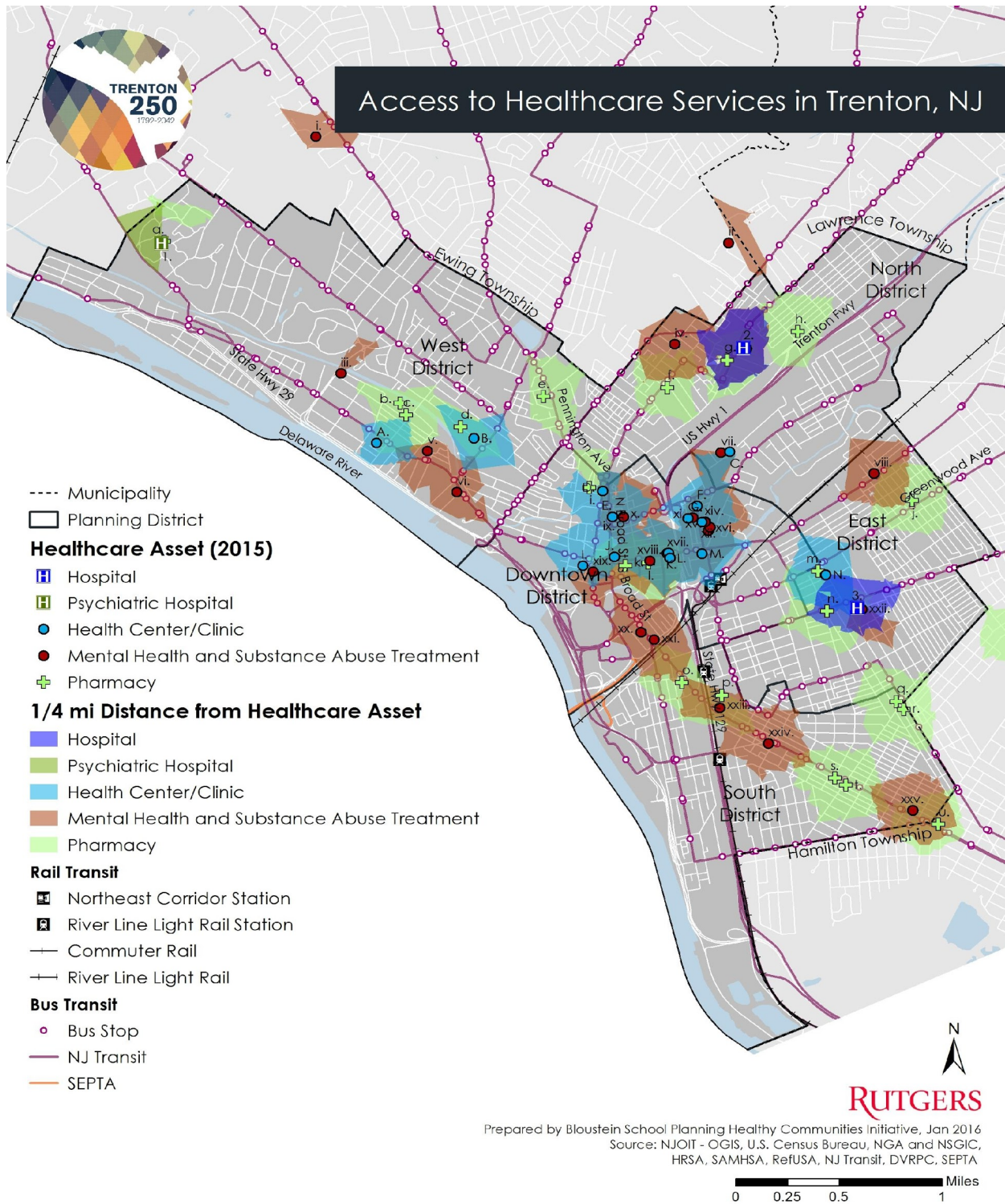
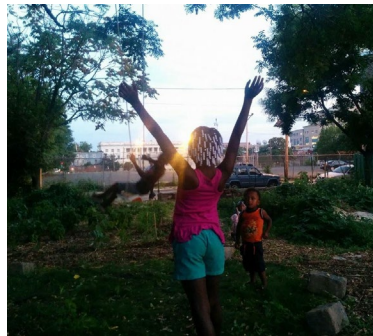


Figure 10. Access to Healthcare Services in Trenton, NJ

TRENTON'S HEALTH VISION

Cultivate a Healthy City

In 2042: Trentonians will have the opportunity to live a healthy life in a healthy environment. They will have access to locally grown fresh foods and opportunities for urban gardening. The City will be home to high-quality healthcare facilities that serve residents and the surrounding community while providing opportunities for health literacy and learning. Public spaces will be safe, well designed, and maintained. Further, Trenton will have capitalized on its wealth of built and natural amenities — including the waterfront — to reestablish a network of public spaces that reinforce Trenton's historic and urban character. This network will ensure residents and visitors have a diverse array of active recreation opportunities where they can walk, bicycle, and play. The City will have taken significant steps to adapt to a changing climate and address the environmental impacts of its industrial past. The City will promote green infrastructure, sustainable building practices, walkable neighborhoods, and multi-modal transportation options, among others. Equally important, there will be a continuing effort to remediate brownfield sites and return those lands to productive use.⁸¹



⁸¹ Trenton Division of Planning. "Vision Element." *Trenton250*. October 9, 2014.
<http://www.trentonnj.org/Documents/Vision-Element-for-Adoption-on-10.9.2014b.pdf>.

BUILDING ON THE WORK OF THE TRENTON HEALTH TEAM

Trenton Health Team was founded in 2006. It is an innovative collaboration that includes the City of Trenton’s two hospitals, St. Francis Medical Center and Capital Health; its only Federally Qualified Health Center, Henry J. Austin Health Center, and the City of Trenton Department of Health and Human Services. Trenton Health Team works with more than 60 community and social service agency partners throughout the City to expand access to high quality and coordinated healthcare, promote population health and address social determinants of health. Trenton Health Team is unique in its public-private, community-wide collaborative structure and in cultivating a shared commitment to improving health outcomes throughout the six zip codes of Trenton.

This Community Health and Wellness Plan builds upon the work of Trenton Health Team by embedding strategies and actions to improve health, with emphasis on eliminating health disparities, in municipal planning documents. Specific strategies and actions presented herein intentionally align with the priority areas and recommendations contained in Trenton Health Team’s *Community Health Needs Assessment* (July 2013, January 2016 Update and Addendum) and *Community Health Improvement Plan* (January 2014), as well as with the New Jersey Department of Health Strategic Plan, 2012-2015, and *Partnering for a Healthy New Jersey: New Jersey Chronic Disease Prevention and Health Promotion Plan, 2013-2018*.

Wherever possible, milestones (metrics) by which to gauge the implementation success of strategies and actions have been drawn directly from Trenton Health Team documents. As a result, the Community Health and Wellness Plan is designed as a living document, and the effort required to assess and redirect its impact over time should be sustainable.

HEALTH IN ALL POLICIES AND THE TRENTON 250 MASTER PLAN

Health in All Policies is a collaborative approach to improving the health of all people by incorporating health considerations into decision-making across sectors and policy areas. As noted in earlier sections, short- and long-term health outcomes are strongly influenced by a range of social, economic and environmental determinants. Also noted is the fact that the Trenton250 Master Plan includes six strategically important “Elements.” Implementation of the projects, programs, partnerships, and advocacy steps laid out in these elements can lead to material changes in Trenton’s economic, social and physical environment over time, which can improve the health and wellness of Trenton residents.

The Trenton250 Master Plan and its various elements provide many opportunities to contribute to cultivating Trenton as a Healthy City. For example, if implemented, the recommendations included in the *Economic Development* and *Education* elements have the potential to greatly improve the socio-economic status of Trenton residents. Socio-economic status is a well-documented determinant of individual health as well as health disparities seen across regions and populations. There are many factors that influence an individual's socio-economic status and community socio-economic conditions. Income and education are two very powerful determinants of health and well-being.

Poverty has long been associated with negative health outcomes. People with higher incomes generally have better access to high-quality housing options in safe, healthy neighborhoods; higher quality food, including more fruits and vegetables; a broader range of health care services as well as transportation to work and other needed services. In addition, those with higher incomes may experience lower levels of stress because they are able to provide for the needs of daily life. Lower levels of stress are often associated with a reduced risk for many chronic diseases such as heart disease and hypertension as well as a range of mental/behavioral health problems. Raising the household incomes of Trenton residents will result in a healthier city overall.

People with higher educational attainment often have better job prospects, earn higher wages/salaries, and are more likely to access health care services and avoid unhealthy behaviors like smoking. As a result, they are less likely to suffer from chronic diseases and they live longer. Educational attainment has also been linked with improved health outcomes for children.⁸² Improving educational attainment among Trenton residents of all ages can increase access to economic opportunity and improve health outcomes over time.

There are many potential barriers to employment that limit job prospects and earning potential, especially for low-income workers. Among the most important barriers are lack of appropriate education, training and experience; limited English proficiency; high transportation costs; and lack of affordable childcare. Programs designed to address barriers to work can improve employment prospects for Trenton residents, which can in turn improve health outcomes. Research shows that people with more education and higher income are likely to have better healthcare and have healthier habits, such exercising more, consuming healthier foods and experiencing lower levels of substance abuse.

⁸² Robert Wood Johnson Foundation, Commission to Build a Healthier America. "Issue Brief 6: Education and Health." September 2009. <http://www.commissiononhealth.org/PDF/c270deb3-ba42-4fbd-baeb-2cd65956f00e/Issue%20Brief%206%20Sept%2009%20-%20Education%20and%20Health.pdf>.

The Trenton 250 Master Plan Economic Development and Education Elements recommend a range of actions intended to ensure that residents have equitable access to the educational and economic opportunities necessary to meet life’s material needs and to support upward mobility. Other key master plan elements include the Housing, Land Use and Circulation, and Environment elements. Each will play an important role in shaping Trenton’s physical and built environments—buildings, sidewalks, traffic conditions, parks and other public spaces—all of which can have a profound effect that shapes health outcomes.

GOAL 1: INCREASE ACCESS TO HEALTHY FOODS AND NUTRITION

Introduction

With only three stores currently and the lowest number of supermarkets per capita in the state of New Jersey, Trenton has been identified as a food desert,⁸³ and in some areas, a food swamp. “A food swamp is a place where unhealthy foods are more readily available than healthy foods (unhealthy foods include those that are dense in calories, high in sodium, and high in sugar) and typically exist in food deserts, where there are limited options for purchasing healthy foods.”⁸⁴ Up to six more supermarkets are needed in the City to adequately serve residents.⁸⁵ Consequently, most Trenton residents do not live within a walkable distance (half a mile) of a grocery store.⁸⁶ Most supermarkets in neighboring areas outside of Trenton are accessible only by car. One in three Trenton residents lack regular access to a personal vehicle⁸⁷ and find it difficult to rely on public transportation to do their weekly food shopping.⁸⁸

This goal addresses existing aspects of Trenton’s food environment that need improvement, as well as strategies that are currently leading to progress in expanding access to healthy food and nutrition. This section outlines actions and activities that the City of Trenton can put in place to expand access to fresh and healthy foods, reduce obesity and chronic diseases, increase nutrition literacy, and promote a culture of healthy eating.

Milestones

- Reduce adult and childhood obesity and diabetes rates below national levels.
- Increase the percent of Trenton residents that live within a half-mile of a full-service grocery store and community gardening opportunity.

⁸³ Keyes, J., Ornelas, N., Penalosa, C., Rubira, P., & Sellers, J. “Food Assets: Trenton, NJ.” New York University - Wagner School of Public Service. https://cues.rutgers.edu/trenton-isles/pdfs/Capstone_Final_Report.pdf

⁸⁴ Behrens, A., Simons, J., Harding, J., & Milli, M. “Baltimore City Food Swamps: Wherever healthy food is lacking, unhealthy food tends to be abundant.” John Hopkins Bloomberg School of Public Health, John Hopkins Center for a Livable Future. http://mdfoodsystemmap.org/wp-content/uploads/2013/01/Atlas_CLF-Food-Swamp_final.pdf

⁸⁵ Ploeg, V. et al. “Access to Affordable and Nutritious Food—Measuring and Understanding Food Deserts and Their Consequences: Report to Congress.” *United States Department of Agriculture*. June 2009. <https://www.ers.usda.gov/publications/pub-details/?pubid=42729>.

⁸⁶ The Food Trust for the Healthy Corner Stores Network. “Healthy Corner Stores Issue Brief.” The Food Trust. Spring 2011. http://thefoodtrust.org/uploads/media_items/spring2011issuebrief.original.pdf.

⁸⁷ Keyes, J., Ornelas, N., Penalosa, C., Rubira, P., & Sellers, J. “Food Assets: Trenton, NJ.” New York University - Wagner School of Public Service. https://cues.rutgers.edu/trenton-isles/pdfs/Capstone_Final_Report.pdf

⁸⁸ Trenton Health Team. “Community Health Needs Assessment: Trenton, New Jersey.” July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

- Increase by 25 percent the number of corner stores and bodegas participating as a healthy corner store, in particular those within walking distance (half mile) of K-12 schools in Trenton.

Strategy 1.1: Expand the number of healthy food outlets located within walking distance (half mile) of all Trenton residents.

Rationale:

Access to healthy foods and nutrition is important to human health in many ways. The Food Trust has identified access to healthy and affordable food as an important factor in addressing obesity and chronic diseases by providing community residents the opportunity to make easy, healthy choices about their diets. When a community is in a food desert, access to affordable, healthy food options is restricted or nonexistent due to an inadequate number of full-service grocery stores within convenient traveling distance. Actions to improve access to healthy food and nutrition options by expanding access to healthy food outlets can increase the visibility and consumption of fresh produce and healthy prepared meals, strengthen health literacy, reduce obesity rates, combat chronic diseases, and boost the local economy.

Actions:

1. **Increase the number of full-service grocery stores located in the City.** The City of Trenton Department Housing and Economic Development should identify properties in underserved areas suitable for siting full-service grocery stores. Once appropriate sites are located, the Department should work with City Council to remove any zoning barriers that may exist as an impediment to having grocery stores located in the City. The Department should market the identified properties to national and regional supermarket chains and expedite the zoning and land development permitting process for interested applicants.
2. **Expand the number of businesses participating in the New Jersey Healthy Corner Store Initiative.** The New Jersey Healthy Corner Store Initiative is a public health and economic development initiative that links community partners with corner store owners to help stores stock, promote and sell healthy, affordable foods in communities that are underserved by supermarkets. The program provides bodegas and corner stores with technical assistance such as training on handling and displaying produce, assistance with marketing and promoting healthy items, recipe cards and other materials to educate customers. In some cases, bodegas and corner stores are eligible for improvements such as refrigeration and shelving units to display healthy items. Originally, only four stores in the City of Trenton participated in the program. The City of

Trenton Department of Housing and Economic Development should partner with Department of Health and Human Services, The Food Trust, and the New Jersey Partnership for Healthy Kids – Trenton, which has led the program in Trenton to expand the number of stores that participate in the program and ensure there are at least three stores participating in the program in each of the City's Wards.

3. **Implement pop-up food banks and pantries in low-income, underserved areas in Trenton.** The City of Trenton Department of Health and Human Services should partner with Trenton Health Team and organizations in the City that have food banks and pantry programs to expand access to nutritious foods and expand healthy food literacy by implementing pop-up food pantries in underserved areas of Trenton. The program can be modeled after a similar program run by the Greater Cleveland Food Bank, which works with over 100 program partners to operate a mobile food pantry that brings healthy and nutritious food to convenient locations in food deserts and underserved areas where clients can pick up food, as they would from a regular pantry. To expand healthy food literacy and enhance the experience, the Greater Cleveland Food Bank's program also hosts cooking and health demonstrations, provides information on social benefits and services, plays music, provides recipes, and offers arts, crafts and children's activities.

4. **Increase the number of farmers markets operating in the City.** The City of Trenton Department of Health and Human Services should support and promote the successful Greenwood Ave Farmers Market that is operated by the New Jersey Partnership for Healthy Kids, the Capital City Farmers Market that is operated by the Trenton Downtown Association, and form new partnerships with faith- and community-based organizations to expand the number of farmers markets operating in other neighborhoods year-round. Every effort should be made to engage community members in the planning and operation of the markets and use advertising strategies to build community champions that will be important to increasing neighborhood participation. Farmers markets have the potential to improve access to and utilization of fresh produce in communities.

5. **Develop a new "Healthy Food Trucks and Carts" Initiative.** The City of Trenton Department of Health and Human Services, in partnership with the Department of Housing and Economic Development, should develop a new "Healthy Food Trucks and Carts" initiative designed to encourage small business start-ups that operate food trucks and carts in the City that offer healthy food options and encourage those already operating to adjust their product lines to include healthier foods. In New York City, the

Department of Health and Mental Hygiene provides incentives for food carts to become Green Carts and provide mobile opportunities for fresh produce in New York City neighborhoods with limited access to healthy foods and a high incidence of food-related health issues such as obesity, diabetes and heart disease. The convenient siting and affordability of the Green Carts has led to increased produce consumption by customers.⁸⁹

6. **Encourage local restaurants to sell locally produced foods.** The City of Trenton Department of Housing and Economic Development should work with the Trenton Chamber of Commerce, Trenton Downtown Association, the farmers and vendors selling their products at the Greenwood Ave and Capital City Farmers Markets in Trenton, Isles and others to promote the sale and use of locally-grown produce and other food products by restaurants operating in the City. A program run by Grow Pittsburgh could be used as a model. Grow Pittsburgh is a community-based organization focused on urban agriculture. They sell their locally grown produce to restaurants as an additional method of expanding access and consumption of locally grown produce. Not only does this strategy boost the local economy, it also increases the availability and consumption of prepared healthy food options.
7. **Improve walking, biking and transit access to healthy food outlets.** The City of Trenton Department of Housing and Economic Development should work with Rutgers University Bloustein School of Public Policy, Voorhees Transportation Center to conduct a series of “safe routes to food” audits that examine pedestrian, bicycle and public transit access to food outlets in the City that sell healthy food. The Department can then work with the Department of Public Works, Mercer County Department of Engineering and the NJ Department of Transportation to enhance street design and make improvements that prioritize safe walking and bike access to the food outlets. In addition, the Department of Housing and Economic Development can work with NJ Transit to assess what changes to bus routes might be feasible to improve transit access and work with the residents and local businesses to change the location of bus stops and routes as needed. The City can also work with store owners to sponsor free or low-cost shuttle services to help residents living further than walking distance (1/2

⁸⁹ Fuchs, Esther, S. Holloway, K. Bayer, and A. Feathers. “Innovative Partnership for Public Health: An Evaluation of the New York City Green Cart Initiative to Expand Access to Healthy Produce in Low-Income Neighborhoods.” *Columbia School of International and Public Affairs*. June 2014. <http://www.foodpolitics.com/wp-content/uploads/Green-Carts-Report-Final-June-11.pdf>

mile) to access grocery stores and markets. Improving walking, biking and transit access to and from healthy food outlets can increase a community's access to healthy foods.⁹⁰

- 8. Encourage local restaurants to reduce the salt and sugar content in their menus.**
The Department of Health and Human Services, in collaboration with the Department of Housing and Economic Development, will engage with local restaurants to promote the inclusion of healthier menu items in their stores.

Strategy 1.2: Expand access to locally grown fresh food.

Rationale:

Community-based agriculture is seen to have lasting social, health, and economic impacts. Social impacts include: safer environments, social capital, education and youth development opportunities and cross-generational and cultural integration. Health Impacts include: food access and security, increased fruit and vegetable consumption, food and health literacy and general well-being (mental health and physical activity). Economic impacts include: job creation, training, and business incubation, market expansion for farmers, economic savings on food, savings for municipal agencies and increased home values.⁹¹

Actions:

- 1. Promote the production and distribution of locally grown food.** The City of Trenton Department of Housing and Economic Development should work with community partners such as Isles, Inc. and regional partners such as the Urban Mayor's Association to encourage the development of community agriculture through farmers markets, food cooperatives, urban farms such as the Capital City Farm, neighborhood/community gardens, and mobile vending. Urban agriculture can be both a source of healthy locally grown food and a focus for economic development. The Department should review the City's zoning and land development ordinances to identify barriers to the production and distribution of locally grown food. As needed, the Department should then work with City Council to amend the ordinance to remove barriers. The City of Philadelphia recently implemented a new zoning code that can be

⁹⁰ Centers for Disease Control and Prevention. "Transportation and Food Access." March 7, 2014. <http://www.cdc.gov/healthyplaces/healthtopics/healthyfood/transportation.htm>.

⁹¹ Golden, Sheila. "Urban Agriculture Impacts: Social, Health, and Economic: A Literature Review." University of California Agriculture and Natural Resources.2013. <http://asi.ucdavis.edu/programs/sarep/publications/food-and-society/ualitreview-2013.pdf>.

used as a model. The Philadelphia code defines urban agriculture in four subcategories: community gardening, market and community-supported farming, horticultural nurseries or greenhouses, and animal husbandry, which permits community gardening in all zoning districts. Market- and community-supported farms are also permitted almost as broadly but require a special review in certain districts.⁹² Evidence has shown that local food markets can promote greater consumption of fresh fruits and vegetables.⁹³

2. **Expand access to publicly owned vacant land for community gardening and agriculture.** The City of Trenton Department of Health and Human Services should identify, advertise and make available public vacant land suitable for community gardening and urban agriculture. This effort could be modeled after a Jersey City program that makes available certain vacant lots for one-year leases of only \$1 under the condition that they be converted into a community garden. Locally, over the past 30+ years, Isles, Inc. has been providing support and technical assistance to community gardens throughout Trenton. The Capital City Farm – Trenton’s first commercial urban farm – grows over 37 varieties of fruits and vegetables with a yield of over 1,000 lbs. of produce per year.⁹⁴ Produce is distributed to Trenton stores, the Trenton Area Soup Kitchen, schools, senior centers, hospitals, and neighborhood residents. Future plans for the farm already include partnering with the Trenton Area Soup Kitchen to provide educational programming.

3. **Develop an urban agriculture-based youth training program.** The City of Trenton Department of Health and Human Services should partner with local schools, Mercer County Community College, Rutgers New Jersey Agricultural Experiment Station Cooperative Extension of Mercer County and community-based organizations to expand Isles’ youth training program centered on urban agriculture. In Los Angeles, two teachers at Crenshaw High School started a classroom garden and worked with students to draft a business plan that resulted in “Food from the Hood.” This program raised over \$100,000 in scholarship funds while teaching students valuable entrepreneurial skills.

⁹² Shareable. “9 Urban Food Policies for Strong Local Food Systems.” September 9, 2013. <http://www.shareable.net/blog/9-urban-food-policies-for-strong-local-food-systems>.

⁹³ O’Hara, Jeffrey K. and R. Pirog “Economic impacts of local food systems: Future research priorities.” *Journal of Agriculture, Food Systems, and Community Development*. 2013. http://www.agdevjournal.com/attachments/article/355/JAFSCD_Econ_Impacts_Commentary_July-2013.pdf.

⁹⁴ D&R Greenway Land Trust. “Capital City Farm.” 2019. <https://drgreenway.org/capital-city-farm/>

4. **Encourage resident businesses to plant edible landscaping.** The idea behind edible landscaping is to use edible plants and fruits instead of typical landscaping and shrubbery as a way to increase access to locally grown fresh food. The City of Trenton Department of Housing and Economic Development should partner with Mercer County Community College, Rutgers New Jersey Agricultural Experiment Station Cooperative Extension of Mercer and community-based organizations to encourage residents and businesses to plant edible landscaping. For example, the Sacramento Hunger Commission prepared a toolkit to promote the use of edible landscaping in low-income areas. The Beacon Food Forest in Seattle, which is a seven-acre public park, includes an edible forest available to visitors as well as opportunities for personal garden plots.

Strategy 1.3: Work with the Trenton Public School System to promote healthy eating and nutrition.

Rationale:

The Centers for Disease Control and Prevention (CDC) has identified schools as one of the most effective settings to address preventable health problems, such as obesity among children and adolescents. The CDC cited that schools can give children and adolescents more chances to consume nutritious meals, snacks, and beverages, as well as learn about the importance of lifelong healthy behaviors. Action for Healthy Kids has based its mission and programs on the evidence-based promise that school wellness policies promote lifelong wellness behaviors, and link healthy nutrition and exercise to students' overall physical well-being (www.actionforhealthykids.org).

On average, children spend over six hours each day at school and many consume food from federal nutrition assistance programs, as well as other foods sold at school outside the school meal programs. Educational and other activities in schools have been shown to have an important impact on students' nutrition and physical activity behaviors. "Children's choices depend on what is most visible and easily accessible; seemingly small differences in the school environment can have large effects on what children eat."⁹⁵

⁹⁵ Let's Move!. "Healthy Foods in School."
http://www.letsmove.gov/sites/letsmove.gov/files/TFCO_Healthy_Food_in_Schools.pdf.

Actions:

- 1. Promote a culture of health in Trenton schools by supporting full implementation of the District Wellness Policy.** The City of Trenton Department of Health and Human Services should support awareness, implementation, and monitoring of the District Wellness Policy passed by the Trenton Board of Education on January 20, 2015. The Wellness Policy provides guidelines governing the nutritional quality of foods and beverages sold and served on campuses and for school-sponsored celebrations and events, as well as for physical activity in schools. The City should also seek to support and expand partnerships like the one Joyce Kilmer Middle School in Trenton, supported by Novo Nordisk and the Robert Wood Johnson Foundation through the New Jersey Partnership for Healthy Kids-Trenton. Funding provided by Novo Nordisk and RWJF made it possible for the school to adopt a comprehensive approach to implementing the District Wellness Policy. This included a wellness room, a salad bar for the cafeteria, expansion of the student garden, nutrition education for every student and physical fitness programming.
- 2. Expand the use of school gardens to improve nutrition and healthy food literacy among students.** The City of Trenton Department of Health and Human Services should expand partnerships with the Trenton Public School District and Isles to implement school gardens, with complementary programming that promotes increased consumption of fruits and vegetables. In Newark, Philip's Academy Charter School has been cultivating its school garden program over the past 6 years. The primary goal is to teach students about health/wellness. Slow Food USA's National School Garden Program cites that children who are more familiar with growing their own food tend to eat more fruits and vegetables and are more inclined to continue healthy eating habits through adulthood.⁹⁶
- 3. Implement school-based programs designed to teach children how to prepare healthy food options.** The City of Trenton Department of Health and Human Services should partner with the Trenton Public School District to implement a strong home economics curriculum that teaches students how to prepare healthy food options at home and the fundamentals of nutrition. The original premise of home economics is on producing good, nutritious food, which can be used today to increase healthy food and

⁹⁶ Slow Food USA. "National School Garden Program." <http://gardens.slowfoodusa.org/>.

nutrition literacy, as well as prevent obesity and chronic disease. Possible career paths in food service and nutrition may also be explored.

Strategy 1.4: Increase access to healthy food through government policies and programs.

Rationale:

A growing number of city governments are enacting legislation, adopting policies and implementing programs that expand the availability of healthy food and improve the quality of available food in low-income underserved communities. City governments are using plans, regulatory tools, fiscal incentives, and institutional mechanisms to strengthen local food systems.⁹⁷ These policies and programs have been shown to improve health and revitalize communities by creating jobs and serving as anchors to other commercial development, which increases retail activity, employment rates, and property values in surrounding neighborhoods.⁹⁸ Government policies and programs can increase access to local healthy foods, improve dietary habits, combat obesity and chronic diseases, and expand a culture and values of healthy eating.

Actions:

1. **Leverage efforts to expand community-based agriculture in the City with complementary programming.** The City of Trenton Department of Health and Human Services should coordinate efforts to expand community-based agriculture with parks and recreation programming. Coordinating events such as cooking classes and gardening lessons in publicly available spaces such as neighborhood schools, community and senior centers and area churches will promote interest in healthy local foods and help develop a community around these issues. In both cases this will make a culture of health more prevalent and visible in Trenton.
2. **Adopt a Healthy Food and Beverage policy.** The City of Trenton Department of Health and Human Services, in partnership with the Departments of Administration and Finance, should develop, adopt and implement a Healthy Food and Beverages Policy

⁹⁷ Neuner, Kailee, S. Kelly, and S. Raja “Innovative Local Government Plans and Policies to Build Healthy Food Systems in the United States.” *Food Systems Planning and Healthy Communities Lab, University at Buffalo, The State University of New York*. September 2011.
http://cccfoodpolicy.org/sites/default/files/resources/planning_to_eat_sunybuffalo.pdf

⁹⁸ Healthy Food Access and Portal. “Policy Efforts and Impacts.” <http://www.healthyfoodaccess.org/policy-efforts-and-impacts>.

that ensures that the foods, snacks and drinks sold in vending machines on City-owned property and at City-sponsored events and the snacks distributed and/or sold at youth sports and recreation programs include healthy food options. Such a policy and guidelines will reinforce a culture of health among City residents and workers as well as program/event sponsors, participants and attendees. The National Alliance for Nutrition & Activity has developed beverages and food vending machine standards to help government agencies promote healthy eating. In addition, New Jersey Youth Soccer in partnership with Healthy Kids Out of School have developed recommendations for promoting healthy food and drink decisions during soccer practice. Recommendations include providing water instead of sugary drinks and using fruits and vegetables for snacks instead of less healthy options. These standards and recommendations can be used as a model for to develop a Trenton-specific policy.

3. **Expand the number of farmers' market vendors that accept WIC and SNAP and the level of awareness that food assistance benefits can be used at farmers markets.** The City of Trenton Department of Health and Human Services should work with operators of farmers markets to expand the number of participating vendors that accept WIC and SNAP. The New Jersey Department of Agriculture in collaboration with the New Jersey Department of Health and Senior Services is actively recruiting local farmers to be Certified Farmer Vendors in WIC and Seniors Farmers Market Nutrition Programs, which provides low-income individuals with vouchers for fresh grown food through farmers markets. In addition, the City of Trenton should use City-sponsored events to spread awareness of government assistance programs, including WIC, SNAP, and EBT, and that the benefits received through these programs can be used to purchase healthy food options at area farmers markets.
4. **Increase the healthy food options in the workplace.** Many Trenton residents both live and work in the City. Evidence has shown that promoting healthy foods in the workplace can improve workers' dietary habits.⁹⁹ The City of Trenton Department of Health and Human Services should partner with local employers to adopt policies that increase the availability of healthy food options in the workplace including in vending machines, cafeterias, snack bars, common areas, meetings, and company-sponsored events such as holiday parties. One model for such a program is Leading by Example, a

⁹⁹ Quintiliani, Lisa, S. Poulsen, and G. Sorensen. "Healthy Eating Strategies in the Workplace." *US National Library of Medicine, National Institutes of Health*. September 1, 2012. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3737584/>

peer-to-peer communication campaign that educates CEOs about the benefits of worksite health promotion and encourages employers to adopt effective practices to improve employee health.¹⁰⁰ Another strategy is to establish a garden market where local farmers and growers can come to the worksite and sell fresh produce.¹⁰¹

- 5. Hire a Food Access and Policy Coordinator.** – The City of Trenton should hire a food access and policy coordinator in the Department of Health and Human Services to oversee citywide healthy food policy, programs, projects, and partnerships. Having a dedicated staff person could result in expanded access to healthy foods and nutrition across the City of Trenton and improved healthy food literacy among Trenton residents.

¹⁰⁰ Partnership for Prevention. “Creating a Corporate Health Strategy: the American Health Strategy Project Early Adopter Experience.” 2014. <http://www.prevent.org/Initiatives/Leading-by-Example.aspx>.

¹⁰¹ Centers for Disease Control and Prevention. “Workplace Health Promotion: Nutrition.” October 23, 2013. <http://www.cdc.gov/workplacehealthpromotion/implementation/topics/nutrition.html>.

GOAL 2: INCREASE PHYSICAL ACTIVITY AMONG TRENTON RESIDENTS

Introduction

Increasing levels of physical activity among Trenton residents requires more than having places to exercise. It also requires a physical environment and supportive policies that promote greater levels of physical activity in all daily activities. For example, Trenton residents should be able to safely and conveniently walk or bike to school, work, or other places they need to go. They should have safe and clean parks and recreational facilities to play in and natural areas to explore. They should also have programming that encourages physical activity as a leisure time pursuit. This goal is aimed at improving Trenton's physical environment as well as supportive programming in ways that will promote physical activity among Trenton residents. The strategies recommended under this goal are strongly connected to those described in other elements of the master plan, including but not limited to the combined Land Use and Circulation element; the Parks, Open Space and Recreation element; and the Public Safety element.

Milestones

- All Trenton residents have safe and convenient access to parks, recreational facilities and/or natural areas within a half mile of where they live.
- Physical design improvements such as Complete Streets and improved lighting; maintenance practices such as street cleaning, landscape maintenance and vacant lot upkeep; and successful community policing initiatives have combined to reduce street crime and improve perceived safety in Trenton's downtown, other commercial shopping areas and at/near schools, parks and recreational facilities located in the City.
- All children in the City have safe routes to walk and bike to school.
- Sidewalk, intersection and crosswalk improvements have reduced the number of pedestrian and bicycle crashes below national averages for similarly sized cities.

Strategy 2.1: Make it easier and safer to walk and bike in the City.

Rationale:

There are many potential barriers and impediments to physical activity. Some are personal, such as finding the time and motivation to exercise more, while others relate to external factors such as community safety, the presence of sidewalks and the availability of parks and recreational programming. A key part of encouraging physical activity among Trenton residents is ensuring that the City's built environment supports active lifestyle choices. This strategy, which is closely aligned with the strategies recommended in the combined Land Use and

Circulation element, is aimed at improving Trenton’s built environment in ways that make it easier and safer to walk and bike more and to get more exercise.

Actions:

1. Inventory and assess pedestrian and bicycle facility conditions in the City.

Understanding and documenting the location and condition of pedestrian and bicycle infrastructure and other existing built environment conditions in the City is the first step to systematically addressing barriers and impediments that can keep Trenton residents from walking and biking more for transportation and recreation. The Department of Public Works, in partnership with the Department of Housing and Economic Development, should develop a comprehensive citywide inventory and map of bicycle and pedestrian facilities and conditions in the City. The inventory should be comprehensive and include not just infrastructure location and conditions, but also built environment conditions such as adjacent land uses, lighting conditions, traffic conditions, ADA facilities, presence of street trees and furniture, public transit amenities, and others.

- 2. Systematically improve pedestrian and bicycle facility conditions and address other barriers to walking and biking.** The availability of safe, well-designed and well-maintained sidewalks, crosswalks, bike lanes, shared-use routes, and off-street pathways is critical to encouraging residents to walk and bike more. The Department of Public Works, in partnership with the Department of Housing and Economic Development, should use the completed inventory and assessment of sidewalks and bicycle lanes to develop a multi-year “pedestrian-first” strategy designed to improve conditions for walking and biking citywide. The strategy should seek to implement the City’s Complete Streets policy through redesign, reconstruction, improved maintenance and construction of new pedestrian and bicycle connections as needed.

The strategy should also include: improved crosswalks and traffic signal systems to provide pedestrians with sufficient cross times with pedestrian countdown signals at all crosswalks; ADA improvements and compliance at intersections; and other streetscape enhancements where needed, including landscaping, street furniture, lighting, public art, and the installation and proper maintenance of shelters, seating, and real-time information at all bus stop facilities. This should also include the Safe Routes to School Program, which is intended to ensure a safer environment for school children to walk to school. As needed, the City should partner with Mercer County and the NJ Department of Transportation to implement improvements on roadways under county and state jurisdiction.

3. **Seek grant funding to implement *Safe Streets to Transit* improvements.** Research has shown that public transit users get more daily overall physical activity than non-users.¹⁰² As such, removing barriers to accessing public transit could increase levels of physical activity among Trenton residents. The City of Trenton has a robust network of public transit services including bus, light rail, and commuter rail services. Many Trenton residents rely on public transportation as their primary means of getting around; however, more might utilize public transit if access to available services was safer and more convenient. In addition to improving pedestrian and bicycle conditions generally throughout the City, special attention should be paid to improving walking and bicycle access to the Trenton Transit Center, the Hamilton Avenue and Cass Street River Line stations and major bus transfer locations in the City. The Department of Housing and Economic Development should seek grant funding through the NJ Department of Transportation Safe Streets to Transit program and other sources to implement specific improvements within a half-mile of these public transit facilities.

4. **Develop and implement a Crime Prevention through Environmental Design initiative.** Crime Prevention through Environmental Design (CPTED) is an approach to deterring criminal behavior that focuses on how the physical, built environment in a community is laid out and maintained. The idea is that well-designed public and quasi-public spaces can reduce crime and fear and improve quality of life by increasing “natural surveillance” or “eyes on the street” and well maintained spaces can increase “territoriality” because they are cared for and matter to those living in the area.¹⁰³ Improved safety and reduced fear of crime in the City can contribute to higher levels of physical activity by making it safer to walk, bike and visit City parks. The City of Trenton Department of Housing and Economic Development should partner with the Trenton Police Department, community-based organizations and neighborhood residents to develop and implement a CPTED initiative that seeks to analyze and address the built environment characteristics that contribute to crime and safety concerns in Trenton’s neighborhoods.

¹⁰² Saelens et al. “Relation between Higher Physical Activity and Public Transit Use.” *American Journal of Public Health*. 2014. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3987609/>.

¹⁰³ Ryan, Julia. “What Is CPTED and How Can It Help Your Community?” *National Training and Technical Assistance Center*. July 10, 2014. <https://www.bjatrain.org/media/blog/what-cpted-and-how-can-it-help-your-community>.

Strategy 2.2: Improve access to parks, recreational facilities and natural areas.

Rationale:

Research has shown that while many people experiment with forms of physical activity that are good for them, they tend to stay with activities that they enjoy. Such activities include walking, hiking, jogging, running, bicycling, organized sports, unstructured and playground play, dancing, water-based recreational activity, bird and other animal watching and other activities commonly found at public parks and recreational facilities.¹⁰⁴ Furthermore, living close to parks and other recreation facilities is consistently associated with higher levels of physical activity among both adults and youth/adolescents. In fact, adolescents with easy access to multiple recreation facilities are more physically active and less likely to be overweight or obese than their peers without access to such facilities.¹⁰⁵ For example, according to a study published in the American Journal of Epidemiology, in distressed neighborhoods of Philadelphia, PA, where vacant lots were converted into small parks and community green spaces, residents in those neighborhoods reported significantly less stress and more exercise.¹⁰⁶

Actions:

1. **Ensure that there is an equitable distribution of parks and recreational facilities in the City.** The City of Trenton Department of Housing and Economic Development, in partnership with the Departments of Recreation, Natural Resources, and Culture and Public Works should prepare a comprehensive inventory of parks and recreational facilities located within the City and the amenities available at each location. This information should be analyzed using Geographic Information Systems to understand the distribution of facilities and amenities in relation to residential neighborhoods throughout the City.

¹⁰⁴ Godbey Geoffrey and Andrew Mowen. "The Benefits of Physical Activity Provided by Park and Recreation Services: The Scientific Evidence." National Recreation and Park. 2010.
http://www.nrpa.org/uploadedFiles/nrpa.org/Publications_and_Research/Research/Papers/Godbey-Mowen-Research-Paper.pdf.

¹⁰⁵ National Recreation and Parks Association. "Role of Parks and Recreation on Health and Wellness."
<http://www.nrpa.org/About-NRPA/Position-Statements/Role-of-Parks-and-Recreation-on-Health-and-Wellness/>.

¹⁰⁶ Branas, C. et al. "A Difference-in-Differences Analysis of Health, Safety, and Greening Vacant Urban Space." American Journal of Epidemiology. November 11, 2011.
<http://aje.oxfordjournals.org/content/early/2011/11/11/aje.kwr273.full.pdf+html>.

The analysis should be used to develop a parks and recreation plan for the City. This plan will identify and prioritize opportunities to expand parks and recreation facilities, to address gaps and ensure equitable access. As appropriate, vacant properties can be purchased or, if already City-owned, turned into new facilities and/or improved access points between neighborhoods and parks. Every effort should be made to ensure that per capita parks and recreational standards are being met. In addition, efforts should be made to ensure that available facilities meet the diverse cultural needs of Trenton residents.

2. **Promote the use of shared use agreements to increase opportunities for physical activity.** Where appropriate and feasible, the City of Trenton, led by the Department of Health and Human Services, should enter into shared use agreements with public schools and other community facilities that have sports fields, gym facilities and other recreational amenities. According to the Safe Routes to School National Partnership, “a shared use agreement is a formal agreement between two separate government entities, often a school district and a city or county, setting forth the terms and conditions for the shared use of public property. Typically, each party under a shared use agreement helps fund the development, operation, and maintenance of the facilities that will be shared. In so doing, no single party is fully liable for the costs and responsibilities associated with the recreational facilities. Furthermore, after regular school hours, schools can continue to provide their students and the local community with the facilities needed to maintain active and healthy lifestyles, while incurring little to no additional costs.”¹⁰⁷

3. **Reconnect Trenton residents with the City’s natural and environmental assets.** Trenton has many natural and environmental assets that can serve as places for passive recreation and respite. These include the Delaware River, the Delaware and Raritan Canal State Park and others. The Department of Housing and Economic Development should work with a range of partners to reconnect the City’s residents with these assets. Specific actions should include:
 - a. Restore Stacy Park to its original dimension by working with the State of NJ to bring the realignment of Route 29 as an urban boulevard back to the table and

¹⁰⁷ Safe Routes to School National Partnership. “Shared Use of School and Community Facilities: Addressing Childhood Obesity Through Shared School Facilities.”
<http://saferoutespartnership.org/state/bestpractices/shareduse>

- commit to implement it. Utilize traffic signals to reconnect pedestrians to the riverfront in the area between Lower Ferry Road and the Route 1 overpass.
- b. Work with the Lambertton Neighborhood to create stronger links between the Arena and Waterfront Park.
 - c. Work with Mercer County to rebuild the pier near Waterfront Park.
 - d. Continue restoring and implementing the Assunpink Creek Greenway Park.
 - e. Create connections from downtown south the waterfront, to the Marina and Tow Path leading along the Hamilton Marshes toward Bordentown City.
 - f. Improve the canal path in the Canal Banks area near the State House to improve safety and accessibility.
 - g. Integrate Trenton trails into regional Circuit Trails network and national East Coast Greenway network, including signage to make them easier for residents to find.
 - h. Activate waterfront access: Develop a trail connection from the Heritage Trail approach from the south to the Stacy Park trail to the north, with connections to the Canal Tow Path heading further north. Connect Market Street and the Assunpink Creek Trail with the riverfront – providing access to the health loop and the Daylighting project.
4. **Coordinate with outside agencies to tap into a regional network of parks, open space and recreational facilities.** There are many parks and recreational resources available outside the jurisdictional boundaries of the City that can provide opportunities for physical activity for City residents. The Department of Housing and Economic Development should engage in dialogue and work with adjacent municipalities, Mercer County, and other potential partners to improve access to the larger regional network of parks and recreational facilities. Specific actions should include:
- a. Work with D&R Canal Commission to improve Canal tow path access throughout the system; south to Bordentown City; Northwest to and through Ewing Township; and North to and through Lawrence and Princeton Townships.
 - b. Work with Ewing Township to improve land use and development patterns around the Capital City Sports Complex (Father Rocco Field), including discussion about how to create a rail-to-trail link along the former Johnson Trolley Line, which is part of the proposed Ewing-Lawrence Greenway.
 - c. Continue to work with Lawrence Township on the extension of the Assunpink Creek Greenway Park.
 - d. Work with Mercer County and NJ Transit to improve access to Mercer County Park and other parks, open spaces and recreational facilities in the county.

Strategy 2.3: Promote and support physical activity through school-based initiatives.

Rationale:

As noted previously, nearly half of the City’s children aged three to five years old are overweight or obese. This is more than two times the national rate. Moreover, more than one in four children are obese in every age category. The U.S. Department of Health and Human Services recommends that children and adolescents age 6-17 years of age get at least 60 minutes of physical activity each day.¹⁰⁸ Given the amount of time most children and adolescents spend at school and participating in school-related activities, school-based programs designed to encourage physical activity can be very important to ensuring that minimum standard of activity are met or exceeded.

Actions:

- 1. Support and expand existing Safe Routes to School efforts in the City.** Several years ago, the Trenton Public School District, in partnership with New Jersey Partnership for Healthy Kids-Trenton, developed school travel plans for the Hedgepeth Williams School, Monument Elementary, and Woodrow Wilson Elementary. The Department of Public Works, in partnership with the Department of Housing and Economic Development, should work with the Trenton Public Schools, Partnership for Healthy Kids-Trenton, Greater Mercer TMA and other community partners to build on past successes to develop and implement school travel plans for all primary, elementary and middle schools in the district. The City should also work with the Trenton School District to seek grant funding to implement the recommendations of the plans once developed.
- 2. Work with the Trenton Public School District to Develop and implement a Comprehensive School Physical Activity Program.** According to National Association for Sport and Physical Education, Comprehensive School Physical Activity Programs include a quality physical education curriculum, physical activity before, during and after school, staff involvement and community engagement.¹⁰⁹ To establish such a program, the Department of Health and Human Services should partner with the

¹⁰⁸ Centers for Disease Control and Prevention. “Youth Physical Activity Guidelines Toolkit.” August 27, 2015. <http://www.cdc.gov/healthyschools/physicalactivity/guidelines.htm>.

¹⁰⁹ National Association for Sport and Physical Education. “Comprehensive school physical activity programs.” 2008. <http://www.shapeamerica.org/cspap/resources.cfm>.

Trenton Public School District and the Trenton Health Team to conduct an assessment of existing physical activity programs and opportunities at each school, set goals and identify desired outcomes, and take the necessary steps to implement program components that will result in increased activity levels among students of all ages. The Centers for Disease Control has developed several guidance documents that can be used to inform program development.

Strategy 2.4: Support physical activity and healthy lifestyle choices through government plans, policies and programs.

Rationale:

Local government plans, policies and programs not only shape the physical, built environment of a city, they can also shape the “social environment” of a city and help to create a culture of healthy lifestyle choices. Through its community policing activities, parks planning, and recreational programming, the City can take steps that encourage higher levels of physical activity among Trenton residents.

Actions:

- 1. Adopt an employee wellness policy/program that highlights physical activity and healthy lifestyle choices and encourage other employers in the City to do the same.** The City of Trenton is one of the largest employers of city residents. In keeping with the Mayor’s Task Force for a Healing Centered City, the Department of Health and Human Services will support each city department in becoming a trauma-informed organization. This will involve a plan to ensure that each employee is provided with support to achieve mind-body wellness and well-being. This might include mindfulness and meditation training; nutritional guidance and information; weight management information and strategies; access to mental health counseling and exercise programs, including gym membership discounts, etc. From that vantage point, the City can deliver upon its intention to provide trauma-informed response to all of its constituents. To that end, the City will adopt an employee wellness policy and program that highlights the importance of physical activity and other healthy lifestyle choices. Such a policy will make clear that the City values the health of its employees and residents and contribute to creating a culture of health in the City. Such a program could be a model for other employers in Trenton, including the Trenton Public Schools and other public and private agencies.
- 2. Reestablish a prominent role in City government for the Recreation Department, Natural Resources, and Culture.** Recreational programming can be an important way

to encourage both children and adults to be more physically active. The Mayor's Office should continue its recent efforts to reestablish the functions of the Department of Recreation, Natural Resources, and Culture. This should include funding and staffing so the Department can offer a year-round, health-oriented program of activities that utilize and capitalize on the City's parks and open space assets.

3. **Strengthen inter-agency and community collaborations that have the potential to encourage physical activity.** The Mayor's Office should encourage City departments and agencies such as the Department of Recreation, Natural Resources, and Culture, the Police Department and Trenton Public Schools to strengthen existing and new collaborations that encourage Trenton residents to be more physically active. This can take place through sponsored programs as well as allowing outside groups and individuals to utilize public facilities to run private programs, for fee or otherwise.

4. **Develop a community-wide awareness campaign about the importance of being physically active.** The Department of Recreation, Natural Resources, and Culture should partner with the Department of Health and Human Services and the Trenton Health Team to develop and implement a comprehensive, community-wide public awareness campaign about the relationship between physical activity and health, promoting opportunities to be physically active in the City. The newly available *Physical Activity Toolkit* created as part of the Plan4Health Trenton Healthy Communities initiative is a ready-to-use resource in this regard.

5. **Appoint a Physical Activity Coordinator and Coordination Team.** The Mayor should appoint a Physical Activity Coordinator within the Department of Recreation, Natural Resources, and Culture that can act as a champion for supportive policies and action. The coordinator should be supported by a coordination team with representatives from the departments of Public Works, Housing and Economic Development, Health and Human Services and Recreation and the Trenton Health Team. The coordinator and coordination team can assess and recommend changes to City policies and programs to increase physical activity and actively seek funding for bicycle and pedestrian infrastructure improvements and recreational programs.

GOAL 3: IMPROVE ACCESS TO HEALTHCARE AND HEALTH LITERACY

Introduction

The interactions between health, social factors, and physical environments (natural and built) are complex. An estimated 20 percent of the US population lack adequate access to primary health care; racial and ethnic minorities are overrepresented in this group.¹¹⁰ Neighborhood characteristics have significant impacts on health outcomes because they influence an individual's ability to adopt behaviors that promote health.¹¹¹ In almost all urban areas, serious health problems are highly concentrated in a fairly small number of distressed neighborhoods, and the health problems of high-poverty neighborhoods remain substantially more serious than those of middle-class and affluent neighborhoods.¹¹² People living in neighborhoods with high rates of poverty can have life expectancies up to 14 years shorter than those who live in neighborhoods with less poverty.¹¹³ If health care disparities are to be successfully addressed, we must make a concerted effort to improve the stressors existing both within and outside of the healthcare system itself to improve population health. Through a collective understanding and partnership around health and its relationship to community environments, we can advance a framework to expand access to healthcare services and literacy in the City of Trenton.

Milestones:

- All residents of Trenton will have access to affordable and equitable health care, including expanded access for:
 - Children and adolescents, routine and non-routine care
 - Prenatal care
 - Patients with chronic diseases, e.g., asthma, cardiovascular disease, diabetes,
 - Patients with disabilities, mental health, behavior/substance abuse needs,

¹¹⁰ Centers for Disease Control and Prevention. "Definitions of racial & ethnic populations." *Office of Minority Health and Health Disparities*. <http://www.cdc.gov/minorityhealth/populations/remf.html>.

¹¹¹ Commission on Social Determinants of Health. "Closing the gap in a generation: Health equity through action on the social determinants of health." *World Health Organization*. 2008. http://whqlibdoc.who.int/publications/2008/9789241563703_eng.pdf.

¹¹² United States Department of Health and Human Services. "A Nation Free of Disparities in Health and Healthcare." Office of Minority Health. http://minorityhealth.hhs.gov/npa/files/plans/hhs/hhs_plan_complete.pdf.

¹¹³ Bay Area Regional Health Inequities Initiative. "Health inequities in the Bay Area. California." 2008. http://www.barhii.org/press/download/barhii_report08.pdf.

- o Residents experiencing hyper/chronic stress and trauma from poverty and violence
- o Patients with oral and vision health needs
- o Infectious disease detection, treatment, prevention
- o Routine immunizations
- The City, the Trenton Health Team, Trenton Public Schools and other collaborating organizations will succeed in their efforts to expand health literacy for all residents of Trenton. This will be measured through tracking participation in campaign programming.

Strategy 3.1: Expand primary care providers' capacity

Rationale:

Many Trenton residents lack access to healthcare centers that provide advanced primary care, a critical factor in chronic disease management and prevention of possible complications. As a result, outcomes from chronic diseases tend to be worse in Trenton than in the surrounding communities.¹¹⁴ Unmanaged chronic illness leads to acute, costly, avoidable complications and hospitalizations (ER visits, for example) that cause society to incur unnecessary cost and patients to suffer from avoidable outcomes such as disability and early death. Provision of easily accessible primary care to residents of such communities will not only help mitigate the escalating costs and effects of chronic conditions, but also reduce the burden of disease in the community. Illustratively, on an age-adjusted basis, diabetes mellitus and related emergency room visits average 85.3 ER visits per 10,000 people for the City of Trenton compared to 35.0 ER visits per 10,000 for Mercer County as a whole. This rate is as high as 108.6 ER visits per 10,000 people in areas of Trenton with zip codes 08609, 08611 and 08618.

Actions:

1. **Assist existing primary care providers to increase their capacity.** The City of Trenton Department of Housing and Economic Development should make use of real estate policies such as permissive/flexible zoning and financial policies such as providing assistance in purchasing or rehabilitating real estate assets through tax credit or other programs.
2. **Increase access to outpatient treatment in the City.** The City of Trenton Department of Administration should work with City Council to provide incentives to encourage regional hospitals to retain, develop and expand outpatient treatment and educational

¹¹⁴ State of New Jersey Department of Health; Maintained By: Conduent Healthy Communities Institute. Data from 2015-2017

centers throughout the City. The City should also partner with Trenton Health Team to seek grant funds to do the same.

3. **Increase the supply of physicians, nurse practitioners, and physician assistants in the community.** The Department of Health and Human Services should partner with Trenton Health Team and the NJ Department of Health Office of Primary Care/Rural Health to take advantage of the federal government’s workforce development initiative programs, including the Primary Care Practitioner Loan Redemption Program and others that can help to attract health care professionals to practice in the City.¹¹⁵

4. **Develop a Wellness Center that Includes birthing facilities in the City of Trenton.** The provision of maternity services in the City will improve outcomes for both women and infants. The City of Trenton Department of Health and Human Services should work with Trenton Health Team to develop a Wellness and Birthing Center within the City that will address the needs of pregnant women and their babies. This Center will include facilities for prenatal visits, deliveries, and early postpartum care. It will also include wellness spaces that incorporate such services as group dialogue opportunities; mindfulness; relationship counseling; and best practices for early childhood learning experiences. The space should also include activities to improve the wellness of pregnant women, including exercise and yoga space, nutritional programming, and mental health care.

5. **Improve coordination among healthcare providers.** The Trenton Health Information Exchange (HIE) is a database that allows doctors and other providers to share medical information about patients across departments and facilities in the Trenton area.¹¹⁶ This promotes improved healthcare through improved coordination, better clinical decisions, and fewer repeated services. The Department of Health and Human Services, in partnership with the Trenton Health Team, acting as a State appointed regional health hub, should continue to expand and enhance the implementation of a Culture of Health for the Trenton Community utilizing the robust tool of the Health Information Exchange.

¹¹⁵ State of New Jersey Department of Health. “Workforce Development.” Family Health Services. <http://www.state.nj.us/health/fhs/professional/workforce.shtml>.

¹¹⁶ Trenton Health Team. “Trenton Health Information Exchange. 2020. <https://trentonhealthteam.org/projects/trenton-health-information-exchange-hie/>

Strategy 3.2 Expand Youth Access to Primary Healthcare

Rationale:

Children from low-income families may have access to social programs such as Children’s Health Insurance Program (CHIP) but having health insurance does not guarantee that children receive the health care they need. Non-economic factors also interfere with access to health care services. In many poor communities, including Trenton, there is a shortage of health professionals specializing in pediatric and adolescent care. An inadequate supply of health professionals, coupled with inaccessible healthcare centers, inevitably results in a lower coverage of immunization, poor asthma control and a failure to obtain the regular check-ups and well care that is essential for the normal development of children.

Actions:

1. **Expand access to high-quality primary health care services for children and adolescents.** The Department of Health and Human Services should continue to work with Trenton Health Team and the New Jersey Academy of Pediatrics to increase the number of health professionals specializing in pediatric and adolescent care with offices in the City. This should include partnering with the State and seeking the support of New Jersey’s Congressional delegation to obtain federally available incentives.

Strategy 3.3: Expand and integrate mental, behavioral and substance abuse health care services in primary care settings in the community.

Rationale:

Behavioral health issues, including substance abuse and mental illness, are associated with increased occurrence of chronic diseases such as cardiovascular disease, diabetes, obesity, asthma, and cancer.¹¹⁷ Estimates indicate that up to one in four primary care patients suffer from depression; yet, primary care doctors identify less than one-third (31 percent) of these patients.¹¹⁸ Although there are no discrete data that enumerate the exact number of persons who are poor and have a behavioral or serious mental illness, such associations are widely accepted. In low-income and largely minority neighborhoods, such as those found in Trenton, disparities in mental health status have received increasing attention. There are demonstrated

¹¹⁷ National Center for Chronic Disease Prevention and Health Promotion. “National Diabetes Statistics Report, 2014.” CDC. 2014. <http://www.cdc.gov/diabetes/pubs/statsreport14/national-diabetes-report-web.pdf>.

¹¹⁸ Centers for Disease Control and Prevention. “CDC Report: Mental Illness Surveillance Among Adults in the United States.” December 2, 2011. http://www.cdc.gov/mentalhealthsurveillance/fact_sheet.html.

differences in rates and patterns of mental health treatment in minority persons who have received mental health treatment, and premature termination has been especially problematic.¹¹⁹ Lack of insurance coverage and lack of access to receptive and culturally compatible providers have been attributed to the observed disparities in provision of effective mental health care in poor and minority communities.¹²⁰

Actions:

1. **Promote culturally sensitive mental health care delivery services.** The Department of Health and Human Services should work with Trenton Health Team and other partners such as Oaks Integrated Care (formerly Greater Trenton Behavioral Health Services), Catholic Charities, the Mercer County Division of Mental Health, and the Mental Health Association of New Jersey to ensure that mental health services in the City are culturally and linguistically appropriate to meet the needs of Trenton’s diverse population. This should include: programs to recruit and retain staff members who reflect the diversity of Trenton’s population; expanded use of interpreter services and bilingual providers for patients with limited English proficiency; and cultural competency training for mental health providers practicing in the City.

2. **Conduct a study on alcohol licenses.** The City of Trenton Department of Administration, in partnership with the Department of Finance, should work with City Council to exercise its discretion under New Jersey law to conduct a study on alcohol licenses that appropriately indicates the number of licenses that balances the Trenton market with alcoholism/mental health within Trenton’s population. The study should also indicate what thresholds will show a need for new licenses. Programs should be considered if the study shows a demand to retire licenses.

3. **Improve Substance Abuse Programming.** The Trenton Municipal Alliance Committee for substance Abuse Prevention Education (TMAC) is a partnership between government and the community to reduce substance abuse in the City. The Department of Health and Human Services is transitioning to take over leadership of this group from

¹¹⁹ Centers for Disease Control and Prevention. “CDC Report: Mental Illness Surveillance Among Adults in the United States.” December 2, 2011. http://www.cdc.gov/mentalhealthsurveillance/fact_sheet.html.

¹²⁰ Agency for Health Research and Quality. “Program Brief: Mental Health Research Findings.” AHRQ. <http://www.ahrq.gov/sites/default/files/wysiwyg/research/findings/factsheets/mental/mentalhth/mentalhth.pdf>.

Mercer County. Information about resources and programming provided by this group will be posted on the City website and social media. TMAC will work closely with the schools and other Municipal Alliances in providing substance abuse prevention and avoidance programming to young people, from 3rd grade through high school.

4. **Address the Impacts of Adverse-Childhood Experiences.** The City of Trenton will adopt trauma-informed practices throughout City government departments, offices and divisions, in support of the Citywide campaign to become a Healing-Centered City. The Department of Health and Human Services will assist and support all other organizations and institutions in the City on their journey to become trauma-informed operations. In collaboration with the Trenton Health Team and over 25 additional partner institutions in the City, the Department will develop an ACEs strategy, coordinate programming, and lead outreach and education efforts.

Strategy 3.4: Improve transit accessibility to healthcare facilities

Rationale:

Expanding and improving access to healthcare facilities must include a focus not only on its availability, but also on its proximity. Until very recently, most, if not all, of the Federally Qualified health centers and hospitals were located at the distant edges of the communities that need them the most. One of the largest healthcare providers in the City of Trenton, Capital Health, has moved its Mercer Medical Center operations formerly located on Bellevue Avenue to a location to Hopewell Township, five miles outside of the city center. This has left a large gap in healthcare access for Trenton residents, especially those living in the West Ward. Many residents do not own cars and public transportation in the City reportedly can be unreliable and costly. At a time when the co-pay for services per encounter is increasing, additional expense for public transportation may have a detrimental effect on healthcare utilization and may even prevent patients with chronic diseases from adhering to prescribed frequencies of visit for effective management of their disease. Urgent attention is therefore warranted to ensure expansion, improvement and accessibility of quality healthcare services in Trenton, including cancer screening, diabetes, asthma and other chronic disease management centers in or near these communities.

Actions:

1. **Investigate the merits of a healthcare transit loop.** The Department of Housing and Economic Development, in partnership with the Department of Health and Human Services, should investigate the merits of a healthcare transit loop. In conjunction with

the Trenton Health Team, the City's hospitals, Greater Mercer TMA, Mercer County TRADE, and NJ Transit, the City will work to investigate, plan and implement transit service(s) that better link Trenton residents with healthcare service providers in the City and surrounding communities. Tactical transit lanes may be another strategy investigated to help achieve this goal.

- 2. Work with partner agencies to ensure that Trenton's healthcare transportation needs are fully addressed in regional human services transportation planning efforts.** The Department of Housing and Economic development should work with Mercer County TRADE, Greater Mercer TMA and the Delaware Valley Regional Planning Commission to ensure that the City's healthcare-related transportation needs are incorporated in the next update of the Mercer County Coordinated Human Services Transportation Plan. This should include efforts to increase the availability of ride services to healthcare appointments similar to Bon Secours Care-A-Van and others. Finally, the City should seek better enforcement and/or incentives to ensure timely and otherwise dependable Medicaid non-emergency medical Transportation. In negotiating the upcoming contract renewal, the City and/or Trenton Health Team should seek to structure performance payments/penalties into the contract.

Strategy 3.5: Promote and support non-traditional settings for health care services

Rationale:

As previously documented, not all healthcare locations at which Trenton residents might seek care could be considered proximate and not all Trenton residents are comfortable seeking out healthcare in traditional settings. The provision of healthcare in non-traditional settings is a strategy for improving health care access for underserved communities, as in Trenton. Non-traditional health care delivery venues can be cost-effective, high quality, easily accessible (with flexible hours) and available to all residents of a city and need not be in a fixed location. An additional approach, which has been used in many communities around the US, is the use of community health workers/promotoras as a method of delivering healthcare and health related messages to unique communities (e.g., communities that tend to be made up of religiously or ethnically diverse populations). Community health workers and promotoras that stem from the community not only have a greater chance of succeeding in increasing healthcare utilization rates, but also serve as a local and sustained vehicle for health messaging.

Actions:

1. **Re-examine routing/utilization of mobile health units.** Currently, the Department of Health and Human Services mobile health unit has operated on an as-requested basis. A 2016 grant from the Robert Wood Johnson Foundation allowed the expansion of services to include regularly scheduled, recurring visits in underserved areas of the City. Partner hosts include: faith-based organizations, schools, and commercial locations such as pharmacies and Healthy Corner Stores. The City should identify ways to sustain and expand these efforts.

2. **Consider using/expanding community health workers and *promotoras*.** The Department of Health and Human Services should work with Trenton Health Team to evaluate and expand the use of community health workers to ensure community wide reach of available health benefits. The Individualized Management for Patient-Centered Targets (IMPACT) Program developed at University of Pennsylvania in Philadelphia could serve as a possible model.

3. **Expand healthcare services being offered by retail pharmacies.** In 2012, the retail health care division of CVS Caremark, and Virtua, South Jersey's largest healthcare provider, entered into a clinical collaboration to enhance access to high quality, affordable health care services in three counties in the region. Under the agreement, Virtua physicians serve as medical directors for five MinuteClinic walk-in medical clinics open seven days a week inside select CVS/pharmacy stores in Burlington, Camden and Gloucester counties. The Department of Health and Human Services should work with Trenton Health Team to document the extent to which this type of service is being provided at pharmacies located in Trenton. To the extent that there are existing programs, steps should be taken to make the services more widely known. In addition, steps should be taken to expand the availability of physician services at retail pharmacy locations.

4. **Ensure health services provided are culturally and linguistically appropriate.** As the availability of healthcare services expands, especially in nontraditional settings, the Department of Health and Human Services should work with community partners to ensure that the choices available are diverse culturally and linguistically. This can help overcome barriers to or willingness to access healthcare.

Strategy 3.6: Promote health literacy

Rationale:

Health outcomes are measurably determined by health knowledge, which is itself a complex function of socio-economic factors. Cancer is the third leading cause of death in Mercer County, with lung, prostate, breast and colorectal cancers the most prevalent; yet, many Trenton residents either feel that breast or prostate cancer screenings are unnecessary for them and/or fear the tests.¹²¹ This demonstrates the manner in which health literacy, or lack thereof, poses a healthcare risk or concern. Moreover, the language in which health information is communicated is an issue – both in terms of the specific language as well as the complexity of language used. Diverse language barriers impact health literacy in Trenton; over 35 percent of the population speaks a language other than English in the home. At the same time, 25 percent of the population is without a high school diploma, potentially limiting the ability to understand health information that is presented in an overly technical manner.

Actions:

1. **Launch/market a multilingual graphic-friendly health access website.** Limited English proficiency can be a significant barrier to accessing healthcare. The Department of Health and Human Services should create and regularly update a website repository of multilingual healthcare access information and resources. Such a site could serve to increase awareness of already available services and provide new resources as they are developed. The site could be a useful tool for the general public as well as social service providers and care managers. The website should be mobile-friendly and available via kiosks at key locations in the City for Trenton residents that have limited or no access to the internet.
2. **Implement a diverse health literacy outreach and education campaign.** The Department of Health and Human Services, along with partner organizations, should engage community members through religious and other community agents, including promotoras, on the importance of nutrition, physical activity, discontinuing use of tobacco, and reducing the spread of sexually-transmitted diseases including HIV/AIDS. The Department should also develop quarterly robocalls to residents, encouraging them to visit the City's website, for the purpose of downloading relevant, and current health information.

¹²¹ Trenton Health Team. "Community Health Needs Assessment: Trenton, New Jersey." July 2013. <https://trentonhealthteam.org/wp-content/uploads/THT-CHNA-2013-July.pdf>.

3. **Implement an outreach and education program to increase flu and other vaccination acceptance, asthma prevention and care, and fire prevention awareness.** Lack of information and knowledge can be an impediment to accessing needed health services and taking steps at home to prevent accidents. The Department of Health and Human Services should partner with other City departments, as well as community- and faith-based organizations, to increase awareness regarding preventive care and accident prevention. For example, Isles, Inc.'s Healthy Homes Program could be expanded to include other prevention messaging.
4. **Distribute health literacy toolkits to residents and others.** As part of the Plan4Health-Trenton Healthy Communities Initiative, Rutgers University developed a series of Trenton-specific health literacy toolkits in English and Spanish. The toolkits address Healthy Homes, Nutrition and Physical Activity. In addition, there are other sources for health literacy materials. The Department of Health and Human Services should disseminate these toolkits and collaborate with personnel from other departments to identify ways to use the toolkits as part of existing City programs such as the Trenton Police Explorers program. In addition, the Department of Health and Human Services should work to disseminate and promote the use of these materials among its partner organizations.
5. **Develop a Culture of Health ordinance.** The Department of Health and Human Services should lead the City of Trenton, its agencies, schools, and other institutions that regularly program resources for the Trenton population to develop and practice a 'culture of health.' This can be achieved by adopting a multi-jurisdictional ordinance (city, school board) requiring a 'health in all policies' approach in vetting major policy, program and project decisions.

GOAL 4: PROMOTE HEALTHY HOUSING CONDITIONS

Introduction

Stable housing creates a foundation for management of daily living needs. Individuals can thrive when housing is affordable, safe, accessible to resources, and has healthy interior and exterior conditions. Housing location and its relationship to surrounding land uses greatly influences how easy it is to access basic services and whether there are opportunities to have safe access to open space, healthy food sources, health care services, quality schools and other educational resources, and even physical activity. Housing location and neighborhood quality can promote a sense of community integration, belonging and cohesion and offer protection from crime and exposures to environmental hazards. All these things can affect individual and family health outcomes. Reducing exposure to substandard building conditions, including hazardous elements in both housing exteriors and interiors, can have important influences on the health of community members who reside in the homes as well as those in the neighborhood.

Milestones

- Trenton’s adoption and implementation of green, healthy, and sustainable housing guidelines and programs has led to a substantial improvement in housing conditions in the City.
- All housing construction and housing rehabilitation projects in the City meet or exceed green, healthy building standards and best practice guidelines.
- A majority of vacant publicly-owned parcels in the City have been returned to productive uses that contribute to the health of neighborhoods and residents.
- Emergency room visits and hospitalizations for asthma, lead-poisoning, mold-induced illness, roach and rodent infestation related-illness, and other ailments and injuries attributable to poor housing conditions are down dramatically.

Strategy 4.1: Adopt healthy and green building guidelines for new housing and rehabilitation of existing housing.

Rationale:

Healthy, green building strategies are readily available and should be integrated into new housing development, rehabilitation, and re-leasing policy, based on the specifics of the project. Cool roofs can be affordable, durable, attractive, and a visual reminder of the City’s green initiatives, improving interior energy performance while reducing exterior “heat island” effect and greenhouse gases affecting the larger community. Reducing energy costs and

carbon footprint can make the home more affordable while improving outdoor air quality, particularly important for individuals with respiratory and other chronic illnesses. Incorporating native plantings can reduce use of water, damaging fertilizers, and pesticides to protect water supplies from non-point source contamination and reduce exposure to toxins on home exteriors and transport of toxins from exterior to interior spaces. Green and healthy management of construction sites emphasizes safe removal and recycling of construction and demolition (C&D) materials as well as preserving trees and reducing noise and other environmental exposures for safeguarding public health.

Actions:

1. **Adopt the New Jersey Green Building Manual standards.** Creation of the New Jersey Green Building Manual was authorized by the Legislature to provide a compendium of recommended practices for incorporating healthy and green building solutions at most phases of new construction, existing rehabilitation, and post-occupancy residential and commercial development. The manual is a free, online resource for local governments, developers and building owners to promote the development, rehabilitation and operation of healthy, sustainable housing and commercial development.¹²² The Department of Housing and Economic Development should work with the Mayor's Office, the Department of Inspections and Code Enforcement and City Council to adopt the New Jersey Green Building Manual as a standard of performance for new and rehabilitated housing in the City. These standards may be most easily implemented through updated redevelopment plans.
2. **Enforce the noise control ordinance.** Elevated noise levels can create stress, increase accident rates, and stimulate aggression and other antisocial behaviors. The most significant causes are vehicles, prolonged exposure to loud music, and industrial/commercial noise. The Trenton Police Department should reasonably enforce the City's noise control ordinance.
3. **Incorporate deep energy conservation strategies in new and rehabilitated housing projects.** The Department of Housing and Economic Development should seek grant funding and provide other assistance to residents and developers to equip and ready new and rehabilitated housing for energy efficiency and renewable energy systems. Programs to subsidize or otherwise support installation and operation of

¹²² Edward J. Bloustein School of Planning and Public Policy, Rutgers the State University of New Jersey. "New Jersey Green Building Manual." May 17, 2011. <http://greenmanual.rutgers.edu/>.

energy efficient homes for low-income housing residents should be coordinated with guidelines and referral information included in the permitting process.

4. **Incorporate strategies for enhancing safety and security in building-level common or open spaces.** The Department of Housing and Economic Development should encourage developers of new and or rehabilitated housing and commercial development to include environmental design features such as enhanced sightlines in immediate spaces exterior to the building and in the neighborhood to help encourage informal surveillance by community members. Design should also avoid entrapment areas and strategically situate technologies for obtaining help in high-incident (e.g., health emergencies, accidents, crime) neighborhoods.^{123, 124} Principles of Crime Prevention Through Environmental Design shall be codified in future Land Development Ordinance updates.
5. **Adopt and enforce guidelines for healthy, sustainable construction site management.** Construction activity, if not managed well, can have many impacts that have the potential to negatively affect human health. For example, dust, noise, visual, air pollution, and privacy intrusions. The Department of Inspections, in partnership with the Department of Housing and Economic Development, should provide best practice guidance to developers, construction companies and contractors on how to effectively manage the potential negative impacts of construction and enforce code regulations that do exist.¹²⁵ Particular attention should be paid to dust abatement strategies, reduction of dust and wind-blown diffusion of contaminants through use of moisture and protective walls, encouraging the use of low-emission construction equipment and low-sulphur fuels, and strict enforcement of time of day permit compliance for noise-producing equipment.
6. **Provide a non-emergency call center and an application or website interface for reporting housing problems.** The Department of Administration should investigate the procurement of a low-cost non-emergency reporting system that allows residents to

¹²³ Loukaitou-Sideris, Anastasia. "Is it safe to walk? Neighborhood safety and security considerations and their effects on walking." *Journal of Planning Literature*, 20(3), Sage Publications. February 2006.
<http://jpl.sagepub.com/content/20/3/219.full.pdf+html>

¹²⁴ Wekerle, Gerda and C. Whitzman. "Safe Cities: Guidelines for Planning, Design, and Management." 1995.

¹²⁵ Rutgers, the State University of New Jersey. "NJ Green Building Manual." May 17, 2011.
<http://greenmanual.rutgers.edu/newresidential/strategies.php>.

report housing and similar quality of life problems that are appropriately assigned to departments and prioritized.

Strategy 4.2: Improve the condition of Trenton’s existing housing stock to promote the health of Trenton residents.

Rationale:

Green and healthy options can be incorporated into most phases of housing rehabilitation. Improved energy efficiency through well-sealed, high-performing envelope and insulating features can enhance the affordability and thermal comfort of conditioned spaces. Residents with chronic health conditions who need to remain indoors and rely on air conditioning due to poor air quality days need affordable cooling costs. Asbestos and lead contamination also remain important threats to the health of residents.

Actions:

- 1. Require substantial repair and rehabilitation projects to incorporate affordable, green, high-performance materials and systems, and construction guidelines.** The City Department of Inspections should provide guidance and incentives (where possible) to homeowners, contractors and developers to encourage the use of materials and products with low off-gassing or emissions and energy efficient appliances that are appropriately sized for the unit and offer warranties. Useful resources and rebates should be provided with permit applications.^{126, 127}
- 2. Prioritize the use of affordable housing funds to support the healthy rehabilitation of housing units.** The Department of Housing and Economic Development should amend its policies and procedures for spending funds earmarked to create and maintain affordable housing in Trenton to include a strong preference for rehabilitation projects that incorporate deep energy efficient retrofits.¹²⁸ The program should also commit a larger portion of funds to those economically viable households with incomes between

¹²⁶ Rutgers, the State University of New Jersey. “NJ Green Building Manual.” May 17, 2011. <http://greenmanual.rutgers.edu/newresidential/strategies.php>.

¹²⁷ Healthy Building Network. <https://www.healthybuilding.net/>.

¹²⁸ “City of Trenton: Community Development Block Grant Program Emergency Solutions Grant Program.” *Collaboration Trenton*. June 25, 2015. http://www.collaborationtrenton.com/CDBG_Presentation2015.pdf.

30-50 percent of median household income and provide ranked amounts to other groups needing funds to address substantial critical housing defects.

3. **Integrate a *Healthy Homes* checklist into all housing construction and rehabilitation activities.** The Department of Inspections, in partnership with the Department of Housing and Economic Development, should adopt and utilize a Healthy Homes checklist to improve the safety of home environments and reduce residents' exposures to contaminants and hazards.^{129, 130, 131} The checklist should be coupled with personnel training and information resources aimed at improving housing-related conditions that contribute to the city's primary health concerns, e.g., asthma, lead poisoning, bedbugs, injuries.
4. **Institute strategic code enforcement or certificate of occupancy procedures that provide households with an initial screening for lead-based paint and asbestos exposure.** The Department of Inspections should utilize the housing inspection process to promote healthy home objectives and improve the property management practices of building owners. This should include an emphasis on implementing integrated pest management (IPM) guidelines, and lead and asbestos screening. As appropriate, the City should support adding contaminated residential properties to the NJ State Health Assessment Data (SHAD) repository and NJ Environmental and Occupational Health Assessment Program to help characterize the problem and demonstrate the need for economic resources to address the problem.^{132, 133}
5. **Develop temporary housing to facilitate the lead abatement and other short-term health improvement housing needs.** The Department of Health and Human Services,

¹²⁹ Isles Inc. "Lead, Asthma, and Healthy Homes." 2012. https://isles.org/services/healthy-homes-lead-asthma/about#.Vo_9PLEo7cs.

¹³⁰ Centers for Disease Control and Prevention. "Healthy Housing Reference Manual." December 8, 2009. <http://www.cdc.gov/nceh/publications/books/housing/housing.htm>.

¹³¹ United States Environmental Protection Agency. "Pesticide Poison Prevention Checklist." 2015. <https://www.epa.gov/safepestcontrol/pesticide-poison-prevention-checklist>.

¹³² State of New Jersey Department of Health. "Indicator Report - Children under 3 Years of Age with a Confirmed Elevated Blood Lead Level." *NJ SHAD*. August 8, 2014. https://www26.state.nj.us/doh-shad/indicator/view/Pb_blood_lev.Pb_GE10.html.

¹³³ State of New Jersey Department of Health. "Lead." *Environmental and Occupational Health Assessment Program*. <http://www.nj.gov/health/eohap/lead/index.shtml>.

in collaboration with the Department of Housing and Economic Development, will convert six city-owned residential units into short-term housing units. City residents who are having lead abatement or other health remediation performed by the city will be eligible to be relocated into these housing units while their homes are being remediated. A property manager will need to be appointed to take care of these units, especially in between different families staying there. This will save the city money in the long-term, as there will not be a continuous need to pay for hotels and long-distance transportation for families having remediation being completed in their homes.

- 6. Institute a Landlord Security Deposit program.** The Department of Housing and Economic Development, in partnership with the Department of Inspection, should develop and implement an innovative Landlord Security Deposit program that could provide funds for needed critical repairs in the case of negligent owners, and provide a basis to implement receivership actions to maintain safe and healthy housing where landlords are intransigent on repair violations. The deposit funds could be collected and escrowed by the City when certificates of occupancy are requested for rental housing units. The Borough of Ridgefield, NJ is an example of a community that successfully adopted a Landlord Security Deposit program, which it adopted in a 2018 ordinance.

Strategy 4.3: Improve the conditions of vacant and abandoned properties that are health hazards to neighboring homes and residents.

Rationale:

Vacant properties have been identified by residents as a primary safety hazard¹³⁴. They can become a harborage for vermin and illegal activities and detract from healthy neighborhood interactions. Research shows a spillover effect of vacant and abandoned properties on other neighboring properties, and can negatively affect tax revenues, crime rates, public health, and property values.¹³⁵

¹³⁴ City of Trenton Department Of Housing and Economic Development. "City of Trenton 2010 Five Year Consolidated Plan." August 6, 2010. <http://www.trentonnj.org/documents/housing-economic/community%20development%20block%20grant/2010%20five%20year%20plan/2010%20five%20year%20consolidated%20plan%20narrative.pdf>.

¹³⁵ Office of Policy Development and Research, U.S. Department of Housing and Urban Development. "Vacant and Abandoned Properties: Turning Liabilities into Assets." *Evidence Matters, HUD USER*. Winter 2014. <https://www.huduser.gov/portal/periodicals/em/winter14/highlight1.html>.

Actions

1. **Repurpose publicly owned vacant lots for healthy and safe activities.** The Department of Housing and Economic Development should work with the Department of Public Works and Isles to inventory and assess publicly owned vacant land with the potential to be repurposed for productive use. The properties should be categorized into at least four groups: a) properties that should be targeted for sale due to a high likelihood of successful redevelopment; b) properties that can be readily transformed into community assets with regular maintenance and limited investment; c) properties that might be readied for development or recreation with remediation of uncomplicated contamination; and d) properties that cannot be easily remediated for human use.

Once the properties have been categorized and prioritized, in accordance with the Master Plan, the City should partner with community-based organizations, neighborhood groups, and private interests where feasible to return as many properties as possible to productive reuses such as successful redevelopment, safe playgrounds that can be readily supervised by surrounding residences¹³⁶ and other recreational uses, farmers markets, cooperative extension projects, and community gardens. The City should partner with the NJ Department of Environmental Protection, colleges and nonprofits to facilitate soil and air testing where potential contamination may exist, where properties of interest are located adjacent to contaminated properties, or where contamination may persist after clean-up services.

2. **Vigorously enforce the City's property maintenance and vacant property ordinances.** The Mayor's Office should prioritize funding for property inspections and work with the Department of Inspections to vigorously enforce property maintenance requirements and the Law Department to enforce the City's vacant property ordinance and to invoke the creditor responsibility law to enforce upkeep.

¹³⁶ Trenton Health Team. "Community Health Improvement Plan." January 2014.
<https://trentonhealthteam.org/wp-content/uploads/THT-Community-Health-Improvement-Plan-2014-Jan.pdf>.

COVID-19 AND THE HEALTH PLAN

The Community Health and Wellness Plan strives to address long-term health issues in the City of Trenton. The process of writing this plan has taken place over three years, significantly predating the Coronavirus Disease 2019 (COVID-19) pandemic. It is important to state that this is not an emergency response plan and not intended to address COVID-19. That being said, the devastating effect of the COVID-19 pandemic both globally and within the City of Trenton cannot be ignored. In the wake of this crisis, it will be incumbent on the City to examine how it prepares for outbreaks of communicable diseases, including both localized outbreaks and global pandemics, in the future.

FUTURE ISSUES

In order to keep the planning process manageable, issues needed to be selected as a focus for action. This does not minimize the importance of other issues that are not directly addressed by the actions in this plan. Future revisions to this plan should seek to include direct actions to address these issues. Issues that have been identified for review in future health planning processes include:

1. Asthma and other respiratory illnesses
2. Health needs of people with disabilities
3. Dental Care
4. Vision Care
5. Pediatric Immunizations
6. Communicable disease and pandemics

APPENDIX A: ACTION CHART

In order to facilitate implementation and accountability of the Community Health and Wellness Plan, the City of Trenton has identified the lead department responsible for executing each action of the plan. The chart below shows each action listed in the plan; the lead department for that action; and any other partners, including both city departments and outside organizations, that should be involved in effectuating the action.

	<u>Action</u>	<u>Lead Department</u>	<u>Partnering Organization</u>
1.1.1	Increase the number of full-service grocery stores located in the City	Housing and Economic Development	
1.1.2	Expand the number of businesses participating in the New Jersey Healthy Corner Store Initiative	Housing and Economic Development	Health and Human Services, The Food Trust, New Jersey Partnership for Healthy Kids
1.1.3	Implement pop-up food banks and pantries in low-income, underserved areas in Trenton	Health and Human Services	Trenton Health Team, Food Banks and Pantries
1.1.4	Increase the number of farmers markets operating in the City	Health and Human Services	New Jersey Partnership for Healthy Kids, Trenton Downtown Association
1.1.5	Develop a new “Healthy Food Trucks and Carts” Initiative	Health and Human Services	Housing and Economic Development
1.1.6	Encourage local restaurants to sell locally-produced foods	Housing and Economic Development	Trenton Chamber of Commerce, Trenton Downtown Association, Isles, Farmers Market Vendors
1.1.7	Improve walking, biking and transit access to healthy food outlets	Housing and Economic Development	Voorhees Transportation Center
1.1.8	Encourage local restaurants to reduce the salt and sugar content in their menus	Health and Human Services	Housing and Economic Development
1.2.1	Promote the production and distribution of locally grown food	Housing and Economic Development	Isles, Urban Mayor’s Association, City Council
1.2.2	Expand access to publicly owned vacant land for community gardening and agriculture	Health and Human Services	Isles
1.2.3	Develop an urban agriculture-based youth training program	Health and Human Services	Local schools, Mercer County Community College, Rutgers New Jersey Agricultural Experiment Station Cooperative Extension of Mercer County, community-based organizations

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1.2.4	Encourage resident businesses to plant edible landscaping	Housing and Economic Development	Mercer County Community College, Rutgers New Jersey Agricultural Experiment Station Cooperative Extension of Mercer, community-based organizations
1.3.1	Promote a culture of health in Trenton schools by supporting full implementation of the District Wellness Policy	Health and Human Services	Trenton Public School District
1.3.2	Expand the use of school gardens to improve nutrition and healthy food literacy among students	Health and Human Services	Trenton Public School District, Isles
1.3.3	Implement school-based programs designed to teach children how to prepare healthy food options	Health and Human Services	Trenton Public School District
1.4.1	Leverage efforts to expand community-based agriculture in the City with complementary programming	Health and Human Services	
1.4.2	Adopt a Healthy Food and Beverage policy	Health and Human Services	Administration, Finance
1.4.3	Expand the number of farmers market vendors that accept WIC and SNAP and the level of awareness that food assistance benefits can be used at farmers markets	Health and Human Services	
1.4.4	Increase the healthy food options in the workplace	Health and Human Services	
1.4.5	Hire a Food Access Policy Coordinator	Health and Human Services	
2.1.1	Inventory and assess pedestrian and bicycle facility conditions in the City	Public Works	Housing and Economic Development
2.1.2	Systematically improve pedestrian and bicycle facility conditions and address other barriers to walking and biking	Public Works	Housing and Economic Development, Mercer County and the NJ Department of Transportation
2.1.3	Seek grant funding to implement Safe Streets to Transit improvements	Housing and Economic Development	
2.1.4	Develop and implement a Crime Prevention through Environmental Design initiative	Housing and Economic Development	Trenton Police Department
2.2.1	Ensure that there is an equitable distribution of parks and recreational facilities in the City	Housing and Economic Development	Recreation, Natural Resources, and Culture, Public Works
2.2.2	Promote the use of shared use agreements to increase opportunities for physical activity	Health and Human Services	Trenton Public School District
2.2.3	Reconnect Trenton residents with the City's natural and environmental	Housing and Economic Development	

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	assets		
2.2.4	Coordinate with outside agencies to tap into a regional network of parks, open space and recreational facilities	Housing and Economic Development	
2.3.1	Support and expand existing Safe Routes to School efforts in the City	Public Works	Trenton Public Schools, Partnership for Healthy Kids-Trenton, Greater Mercer TMA
2.3.2	Work with the Trenton Public School District to Develop and implement a Comprehensive School Physical Activity Program	Health and Human Services	Trenton Public School District and the Trenton Health Team
2.4.1	Adopt an employee wellness policy/program that highlights physical activity and healthy lifestyle choices and encourage other employers in the City to do the same	Health and Human Services	
2.4.2	Reestablish a prominent role in City government for the Recreation Department	Recreation, Natural Resources, and Culture	
2.4.3	Strengthen inter-agency and community collaborations that have the potential to encourage physical activity	Recreation, Natural Resources, and Culture	
2.4.4	Develop a community-wide awareness campaign about the importance of being physically active	Recreation, Natural Resources, and Culture	Health and Human Services, Trenton Health Team
2.4.5	Appoint a Physical Activity Coordinator and Coordination Team	Recreation, Natural Resources, and Culture	Health and Human Services, Housing and Economic Development, Public Works
3.1.1	Assist existing primary care providers to increase their capacity	Housing and Economic Development	
3.1.2	Increase access to outpatient treatment in the City	Administration	Trenton Health Team
3.1.3	Increase the supply of physicians, nurse practitioners, and physician assistants in the community	Health and Human Services	Trenton Health Team, NJ Department of Health Office of Primary Care/Rural Health
3.1.4	Develop a Wellness Center that Includes birthing facilities in the City of Trenton	Health and Human Services	Trenton Health Team
3.1.5	Improve coordination among healthcare providers	Health and Human Services	Trenton Health Team
3.2.1	Expand access to high-quality primary health care services for children and adolescents	Health and Human Services	Trenton Health Team
3.3.1	Promote culturally sensitive mental health care delivery services	Health and Human Services	Trenton Health Team, Oaks Integrated Care, Catholic Charities, Mercer County Division of Mental Health, Mental Health Association

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3.3.2	Conduct a study on alcohol licenses	Administration	Finance
3.3.3	Improve Substance Abuse Programming	Health and Human Services	Trenton Municipal Alliance Committee
3.3.4	Address the Impacts of Adverse-Childhood Experiences	Health and Human Services	
3.4.1	Investigate the merits of a healthcare transit loop	Housing and Economic Development	Health and Human Services, Trenton Health Team, the City's hospitals, Greater Mercer TMA, Mercer County TRADE, NJ Transit
3.4.2	Work with partner agencies to ensure that Trenton's healthcare transportation needs are fully addressed in regional human services transportation planning efforts	Housing and Economic Development	Mercer County TRADE, Greater Mercer TMA, Delaware Valley Regional Planning Commission
3.5.1	Re-examine routing/utilization of mobile health units	Health and Human Services	Robert Wood Johnson Foundation
3.5.2	Consider using/expanding community health workers and promotoras	Health and Human Services	Trenton Health Team
3.5.3	Expand healthcare services being offered by retail pharmacies	Health and Human Services	Trenton Health Team
3.5.4	Ensure health services provided are culturally and linguistically appropriate	Health and Human Services	
3.6.1	Launch/market a multilingual graphic-friendly health access website	Health and Human Services	
3.6.2	Implement a diverse health literacy outreach and education campaign	Health and Human Services	
3.6.3	Implement an outreach and education program to increase flu and other vaccination acceptance, asthma prevention and care, and fire prevention awareness.	Health and Human Services	Isles
3.6.4	Distribute health literacy toolkits to residents and others	Health and Human Services	
3.6.5	Develop a Culture of Health ordinance	Health and Human Services	
4.1.1	Adopt the New Jersey Green Building Manual Standards	Housing and Economic Development	
4.1.2	Enforce the noise control ordinance	Trenton Police Department	
4.1.3	Incorporate deep energy conservation strategies in new and rehabilitated housing projects	Housing and Economic Development	Inspections
4.1.4	Incorporate strategies for enhancing safety and security in building-level common or open spaces	Housing and Economic Development	

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4.1.5	Adopt and enforce guidelines for healthy, sustainable construction site management	Inspections	Housing and Economic Development
4.1.6	Provide a non-emergency call center and an application or website interface for reporting problems	Administration	
4.2.1	Require substantial repair and rehabilitation projects to incorporate affordable, green, high-performance materials and systems, and construction guidelines	Inspections	
4.2.2	Prioritize the use of affordable housing funds to support the healthy rehabilitation of housing units	Housing and Economic Development	
4.2.3	Integrate a Healthy Homes checklist into all housing construction and rehabilitation activities	Inspections	Housing and Economic Development
4.2.4	Institute strategic code enforcement or certificate of occupancy procedures that provide households with an initial screening for lead-based paint and asbestos exposure	Inspections	
4.2.5	Develop temporary housing to facilitate the lead abatement and other short-term health improvement housing needs	Health and Human Services	Housing and Economic Development
4.2.6	Institute a Landlord Security Deposit program	Housing and Economic Development	Inspections
4.3.1	Repurpose publicly-owned vacant lots for healthy and safe activities	Housing and Economic Development	Public Works, Isles
4.3.2	Vigorously enforce the City's property maintenance and vacant property ordinances	Inspections	