JOINT USE AGREEMENTS

JOINT USE (OR SHARED USE) AGREEMENTS CAN INCREASE RESIDENTS’ ACCESS TO SAFE PHYSICAL ACTIVITY RESOURCES BY ALLOWING RESIDENTS TO USE EXISTING COMMUNITY FACILITIES (E.G., PLAYGROUNDS, GYMS, POOLS).

MAKE THE CASE:

Why Is This A Health Equity Issue?
The issues below highlight the need for joint use agreements that advance health equity:

- **Differential Access to Physical Activity Resources**: Access to physical activity resources (e.g., parks, bike paths, playgrounds) may differ by community, socioeconomic status, and race.\(^{176,181,182}\) For example, lower-income neighborhoods and communities of color generally have fewer such facilities.\(^{176}\)

- **Additional Challenges to Using Physical Activity Resources**: Even when physical activity resources are geographically close and appear accessible, some residents may encounter barriers which may limit the use of these resources. Barriers may include neighborhood safety concerns, lack of transportation, lack of time, or expenses related to the facility.\(^{183}\) Additionally, existing social and community norms or a lack of universally accessible facilities for older adults and those with mobility issues can be barriers.

- **Fewer Joint Use Agreements in Underserved Communities**: After-hours access to facilities such as schools may differ depending on communities’ socioeconomic and racial/ethnic composition. For example, certain communities may experience or perceive more barriers to implementation of joint use agreements. These barriers may include concerns about crime and vandalism, as well as costs related to liability, maintenance, or operations.\(^{181,184-186}\)
Design and Implement with Health Equity in Mind

To maximize health impact and advance health equity, consider these factors and others when designing, implementing, and evaluating joint use agreements:

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<th>KEY FACTORS</th>
<th>BARRIERS OR UNINTENDED CONSEQUENCES</th>
<th>OPPORTUNITIES TO MAXIMIZE IMPACT</th>
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| SAFETY      | Concerns about neighborhood safety and vandalism can keep physical activity resources locked or underutilized after-hours, particularly in areas where physical activity resources are needed most. | • Engage violence prevention partners during planning to address safety concerns.  
• If possible, implement joint use agreements near or in facilities where residents already feel safe.  
• Use environmental design strategies (e.g., improving lighting, limiting or maintaining shrubbery) to enhance safety. |
| LIABILITY CONCERNS | Under-resourced communities may have heightened liability concerns due to factors such as older facilities and higher crime rates. Such concerns may hinder facilities from implementing joint use agreements. | • Identify and address barriers and concerns of community partners who may be resistant to joint use agreements.  
• Assess existing coverage status of joint use partners, as many schools and recreation partners may already be sufficiently covered. |
| FUNDING LIMITATIONS | Under-resourced communities may have concerns regarding funding, personnel, and maintenance to keep facilities open outside of normal business hours. | • Combine resources from multiple partners to create stable funding for initial implementation, as well as ongoing operations, maintenance, and programming.  
• Consider multiple funding sources to support joint use agreements (e.g., grants, state/local bonds, developer fees, tax increment financing).  
• When funds become available, direct funds to low-resource communities where physical activity opportunities are needed most. |
| COMMUNITY AWARENESS & INVOLVEMENT | Joint use agreements may not be enough to encourage the use of facilities (e.g., school gym) by communities that have gone years without access to such resources beyond normal business hours. | • Use educational initiatives, social media, and partners to increase awareness of existing facilities that are now available to the community.  
• Encourage use by involving residents in developing programs (e.g., dance classes, walking clubs) that are culturally and age appropriate.  
• Assess user activity regularly to ensure residents’ needs are met and multiple users (e.g., the elderly, people with disabilities, young girls) benefit from the resource. |
| EQUITABLE ACCESS | The physical activity opportunities created by joint use agreements may mask the need for more permanent physical activity resources (e.g., parks), particularly in underserved communities. | • Identify inequities in physical activity resources by conducting an assessment of the distribution, hours, and pricing of such resources.  
• Understand decision-making processes for physical activity resource allocation.  
• Work with partners to examine additional strategies to increase options for physical activity in communities with the greatest need and ensure options accommodate differing levels of mobility (e.g., older adults, people in wheelchairs). |

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Build the Team: Partnership for Success

Successful efforts to implement joint use agreements depend on bringing a diverse set of partners to the table early, consistently, and authentically. These partners may include the following:

- Area Agencies on Aging
- Community-based organizations such as Boys and Girls Club, sports associations, YMCA, Boy Scouts, Girl Scouts
- Community members (of diverse abilities, ages, cultures, gender, income levels, race/ethnicity, and sexual orientation)
- Custodians
- Faith-based organizations
- Health care systems, hospitals, community clinics, and health care providers
- Law enforcement
- Land trusts or conservancies
- Organizations serving populations experiencing health inequities
- Public agencies, including public health, parks and recreation, housing authority, libraries
- School districts, universities, and community colleges
- Union leaders

HEALTH EQUITY IN ACTION

Beyond Conventional Joint Use: Farmers’ Market and Trails in Public Housing Communities

San Antonio, TX

The San Antonio Metropolitan Health District (SAMHD) was not afraid to “be bold, and try new things.” It teamed up with the San Antonio Housing Authority (SAHA)—the landlord for 70 different public housing communities—to think creatively about using existing resources to create opportunities for low-income children, adults, elderly residents, and those with disabilities to be healthy. The results of a community health assessment revealed that SAHA residents were already well aware that a healthier diet and more physical activity would improve their health, but they did not have access to fresh produce or a safe place to be active.

Moving beyond the conventional idea of a joint use agreement, SAHA took advantage of its unique position to provide the space and infrastructure that could nurture ideas for improving health. In response to residents’ identified needs, the partnership initiated an effort to develop walking trails on five SAHA sites. This project benefits not only residents living in public housing, but the neighboring community as well. To address concerns about the availability of healthy foods, the partnership collaborated with the San Antonio Food Bank to successfully establish a farmers’ market in one of the public housing communities. SAHA residents felt strongly that it should be easily accessible and located where they live. This much-needed farmers’ market now provides access to affordable, healthy fruits and vegetables in a neighborhood that lacks a grocery store.

Through this joint use partnership with the housing authority, SAMHD was able to directly reach residents who were most in need. These efforts were supported by CDC’s Communities Putting Prevention to Work program.
HEALTH EQUITY IN ACTION

Using a School Playground as a Community Resource

Santa Ana, CA

Santa Ana is a community with a predominantly Latino, low-income population that faces high rates of chronic disease, including diabetes. The city has only one acre of parks per 1,000 Santa Ana residents, leaving little open space for much-needed recreation. Many of the few existing parks are small, not within walking distance of residential neighborhoods, and perceived as places that attract crime.

Working with residents and with support from the California Endowment, Latino Health Access (LHA) pursued a community access agreement at the neighborhood Roosevelt Elementary School, which was accessible and familiar to residents. Joint use agreements allowed community residents to use school grounds outside of school hours. However, existing agreements did not provide free access to recreational spaces to the community at large. They primarily accommodated sports leagues, most of which required a fee. For most residents living below the poverty line, these programs were not a viable option. LHA and residents were able to establish a community access agreement at Roosevelt in partnership with the Santa Ana Unified School District so that everyone in the community, not just those who could pay, gained free access to recreational space. As LHA staff member Nancy Mejia put it, “We are creating a more equitable environment by providing physical activity access for the whole community.”

Community engagement was central to this success. LHA led parent focus groups to identify programming needs, resulting in ideas such as martial arts classes and art workshops. Parent feedback underscored the importance of opening the school on weekends to ensure a majority of residents could use the space. A community resident board led the project, bringing awareness to the new space and actively engaging other community members in activities, such as a walking audit around the school, skill building, and a driver safety educational initiative. The success of the project motivated the city and the school district to jointly apply for state funding that could provide a community center at Roosevelt Elementary. The City was awarded $5 million from California Prop 84 funds for the construction of a 10,000 square-foot community center at Roosevelt Elementary. The site serves as a best-practice model that could open other schoolyards in Santa Ana—providing even more physical activity opportunities for everyone in the community.