

Model Joint Use Resolution

The National Policy & Legal Analysis Network to Prevent Childhood Obesity (NPLAN) is a project of ChangeLab Solutions. ChangeLab Solutions is a nonprofit organization that provides legal information on matters relating to public health. The legal information in this document does not constitute legal advice or legal representation. For legal advice, readers should consult a lawyer in their state.

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Ordinances and Resolutions

Local legislative bodies generally act by adopting ordinances or resolutions.¹ Ordinances are binding legislative acts that have the same force of law as a statute passed by a state legislature. Local governments enact ordinances when required to do so by state law or charter or when they want to impose laws that are binding on their citizens.

Resolutions, by contrast, are typically less formal statements of law or policy. While practices may vary by municipality, local legislative bodies often use resolutions to set official government policy, approve contracts, issue commendations, direct internal government operations, or establish a task force to study an issue. Resolutions are procedurally easier to adopt than ordinances and can be an effective step for public agencies to study and implement policies such as joint use.²

NPLAN's Model Joint Use Resolution

The purpose of NPLAN's Model Joint Use Resolution is to assist local governments in laying the foundation for establishing more formal joint use policies and agreements. Adopting the model resolution, or a version of it, is a first step in encouraging collaborative relationships among public agencies and/or community organizations to expand access to recreation facilities and related programs. Affirming an agency's commitment to joint use through adoption of the model resolution will set the stage for more robust actions, such as negotiating and executing joint use agreements.

The model resolution offers several policy options. In some instances, alternate language is offered (e.g., [*black / white*]) or blanks have been left (e.g., [____]) for a community to customize the language to fit its needs. In other instances, the options are mentioned in annotations ("comments"). In considering which options to choose, drafters should balance public health benefits against practical political considerations in their particular jurisdiction. One purpose of including a variety of options is to stimulate broad thinking about the types of provisions a community might wish to explore, even beyond those described in the model.

NPLAN is interested in novel provisions communities are considering. The best way to contact us is through our website: www.nplan.org.

MODEL JOINT USE RESOLUTION

Resolution No. _____ Promoting Joint Use

**RESOLUTION OF THE [CITY/COUNTY/DISTRICT] OF _____ PROMOTING
JOINT USE AS A MEANS OF ENHANCING AND INCREASING ACCESS TO
[CITY/COUNTY/DISTRICT] FACILITIES AND RELATED PROGRAMS**

WHEREAS, in 2010, one in every three Americans was obese and 60 percent were either overweight or obese;³

WHEREAS, it is estimated that 50 percent of the U.S. population will be obese by 2030;⁴

WHEREAS, since 1980, obesity prevalence among children and adolescents has almost tripled;⁵

WHEREAS, only 33 percent of school-age children attended daily physical education classes in 2009;⁶

WHEREAS, a significant number of Americans fail to meet the Centers for Disease Control and Prevention's recommendations for daily physical activity,⁷ including 65 percent of all adolescents;⁸⁻⁹

WHEREAS, access to nearby recreational facilities leads to increased rates of physical activity;¹⁰

WHEREAS, inadequate access to recreation facilities has played a significant role in rising obesity rates;¹¹

WHEREAS, children and adults who are overweight and obese are at a greater risk of adverse health effects, including type 2 diabetes, heart disease, high blood pressure, high cholesterol, certain cancers, asthma, low self-esteem, depression, and other debilitating diseases;¹²

WHEREAS, nationally, the annual cost of treating obesity-related diseases is approximately \$147 billion;¹³

WHEREAS, the annual cost of treating obesity-related diseases in

[City/County/District/State] is approximately [_____];

COMMENT: Many segments of the population experience disparities in overweight and obesity prevalence, based on race and ethnicity, gender, age, and socioeconomic status.¹⁴ In addition, children from lower-income families and children of color in urban America face limited access to parks, open spaces, and other opportunities for physical activity.¹⁵ A national study of 20,000 young people in the United States found that resources for physical activity – including public parks and recreation facilities, as well as private facilities – were distributed inequitably, with non-white and lower-income neighborhoods twice as likely as higher-income white neighborhoods to lack even a single facility for physical activity.¹⁶ Likewise, research shows that communities with higher poverty rates and higher percentages of African-American residents have significantly fewer parks and green spaces.¹⁷

WHEREAS, there is growing consensus among public agencies and community organizations that joint use of facilities and related programs can improve public health and preserve public funds, particularly during economic downturns;¹⁸

WHEREAS, identifying joint use opportunities among public agencies and community organizations can help in the long-term planning for and development of capital facilities and related programs;

COMMENT: Individual agencies should tailor the above recitals to reflect local needs. For example, if obesity prevention is less of a priority than efficient use of limited public resources, an agency may choose to include additional clauses concerning budget constraints and limit the number of clauses that focus on obesity prevention.

WHEREAS, the [City/County/District] of _____ (“City”/”County”/”District”) is the owner of real property and capital facilities located at _____ (“Sites”);

WHEREAS, [City/County/District]’s governing body finds that the Sites can be used more efficiently to maximize use and promote [recreational/educational] activities for youth and other community residents; and

WHEREAS, [City/County/District] desires to promote joint use as a means of enhancing and increasing access to facilities and related programs with the ultimate goal of improving the public health of community residents and preserving public funds.

NOW, THEREFORE, BE IT RESOLVED by the governing body of [City/County/District] that the above recitations are true and correct.

COMMENT: By affirming the above statements, the public agency is providing the justification for expending resources (both monetary and non-monetary) to promote joint use of its facilities and related programs.

BE IT FURTHER RESOLVED that the governing body of [City/County/District] hereby promotes joint use as a means of enhancing and increasing access to [City/County/District] facilities and related programs;

BE IT FURTHER RESOLVED that a Joint Use Task Force (“Task Force”) is hereby created for the purpose of working with [City/County/District/Organization] to develop a long-term plan for the joint use of [facility/programs].

COMMENT: It is important to designate a body with accountability, whether it is a formal subcommittee or a task force or informal citizens’ group; otherwise the intent and purpose of this resolution may never come to fruition.

BE IT FURTHER RESOLVED that the [City/County/District] Manager, or his/her designee, is hereby assigned Chair of the Task Force;

COMMENT: It is equally important to assign a leader of the committee/task force/group to ensure that an individual is accountable to the governing body and responsible for promoting joint use.

BE IT FURTHER RESOLVED that as Chair of the Task Force, the [City/County/District] Manager, or his/her designee, is hereby authorized to take any and all actions necessary to achieve the purposes of this Resolution, including without limitation, appointing members to the Task Force, surveying existing [City/County/District] facilities and related programs to determine opportunities for joint use; meeting with key stakeholders to promote joint use, drafting a formal joint use policy, negotiating joint use agreements with partner [agencies/organizations], and educating [City/County/District] staff and community members about the importance of joint use.

COMMENT: This list is not meant to be exhaustive; it is intended to outline some of the tasks/actions the leader can undertake to ensure a robust and successful joint use program.

BE IT FURTHER RESOLVED that the [City/County/District] Manager is hereby authorized to expend up to and including _____ Dollars (\$_____) to accomplish the intent and purpose of this Resolution.

COMMENT: By including a monetary figure in the resolution, a public agency can demonstrate its commitment to executing a successful joint use program.

BE IT FURTHER RESOLVED that as Chair of the Task Force, the [City/County/District] Manager, or his/her designee, shall report back to this governing body on a [monthly/quarterly/semi-annual/annual] basis to update the body and the community on joint use accomplishments and progress.

COMMENT: Requiring the leader to report back to the governing body ensures accountability and increases the likelihood of a successful joint use program.

DULY ADOPTED this ____ day of _____, 2012.

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- 1 5 McQuillin Mun. Corp. § 15.3 (3rd ed.).
 - 2 *Id.* at §§ 15.17, 16.27, 16.39 & 16.46.
 - 3 National Public Radio. *Obesity In America, By The Numbers*. 2011. Available at: www.npr.org/2011/05/19/135601363/living-large-obesity-in-america.
 - 4 *Id.*
 - 5 Ogden CL and Carroll MD, Division of Health and Nutrition Examination Surveys. *Prevalence of Obesity Among Children and Adolescents: United States, Trends 1963-1965 through 2007-2008*. National Center for Health Statistics E-Stat, June 2010. Available at: www.cdc.gov/nchs/data/hestat/obesity_child_07_08/obesity_child_07_08.pdf.
 - 6 Youth Risk Behavior Surveillance System. 3. 2009 National YRBS Overview. Available at: www.cdc.gov/HealthyYouth/yrbs/pdf/us_physical_trend_yrbs.pdf.
 - 7 Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. *Chronic Diseases: The Power to Prevent, The Call to Control*. 2009. Available at: www.cdc.gov/chronicdisease/resources/publications/AAG/chronic.htm.
 - 8 US Department of Health and Human Services. *2008 Physical Activity Guidelines for Americans*. Washington DC: 2008. Available at www.cdc.gov/healthyyouth/yrbs/pdf/us_obesity_trend_yrbs.pdf.
 - 9 Centers for Disease Control and Prevention (CDC). *Preventing Chronic Diseases: Investing Wisely in Health*. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2008. Available at: www.cdc.gov/nccdphp/publications/factsheets/prevention/pdf/obesity.pdf.
 - 10 Active Living Research. *Designing for Active Living Among Adults*. San Diego: Robert Wood Johnson Foundation, 2008. Available at: www.activelivingresearch.org/files/Active_Adults.pdf.
 - 11 Council on Sports Medicine and Fitness and Council on School Health. "Active Healthy Living: Prevention of Childhood Obesity Through Increased Physical Activity." *Pediatrics*, 117: 1834-1842, 2006 (Reaffirmed February 2010). Available at: <http://aappolicy.aappublications.org/cgi/content/full/pediatrics;125/2/e444>.
 - 12 US Department of Health and Human Services, Office of the Surgeon General. *The Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity*. 2001. Available at: www.surgeongeneral.gov/topics/obesity/calltoaction/fact_adolescents.html.
 - 13 Finklestein E, Trogon J, Cohen J, and Dietz W. "Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates." *Health Affairs* 28(5): w822-w831, 2009. Available at: <http://content.healthaffairs.org/content/28/5/w822.abstract> (Free abstract and full text available to subscribers or for purchase).
 - 14 Powell LM, Slater S and Chaloupka FJ. "The Relationship Between Community Physical Activity Settings and Race, Ethnicity, and Socioeconomic Status." *Evidence-Based Preventative Medicine*, 1(2): 135-144, 2004. Available at: www.impacteen.org/journal_pub/pub_PDFs/EBPM-1-2-Powell%20et%20al1.pdf.
 - 15 Gordon-Larsen P, Nelson M, Page P, et al. "Inequality in the Built Environment Underlies Key Health Disparities in Physical Activity and Obesity." *Pediatrics* 117(2): 417-424, 2006. Available at: www.msstate.edu/pdfs/Inequality_in_the_Built_Environment.pdf.
 - 16 *Id.*
 - 17 *Id.*
 - 18 Vincent, JM. *Partnerships for Joint Use: Expanding the Use of Public School Infrastructure to Benefit Students and Communities*. Berkeley: Center for Cities and Schools, University of California, Berkeley, 2010. Available at: http://media.cefpi.org/CCS_Partnerships.pdf.