WHEREAS, cities depend on the health and vitality of their inhabitants, reliable access to sufficient quantities of wholesome food and clean water, clean air, and the ecosystem services that support them; and

WHEREAS, government plays an important role in coordinating efforts to preserve and maintain those resources; and

WHEREAS, policymakers are challenged to make sense of complex interrelationships among human health, animal health, and ecological health, and pressed to conform with decision-making models that often isolate those critical connections and shorten planning horizons; and

WHEREAS, cities' economic, social, and environmental well-being—the triple bottom line—whereon environmental stewardship, economic prosperity, and social responsibility intersect—depends on our ability to integrate diverse interests through unified long-range planning, and to engage and inform policymakers and practitioners about critical interdependent needs; and

WHEREAS, the One Health Initiative is the collaborative objective of multiple disciplines, including the American Medical Association (AMA), U.S. Centers for Disease Control and Prevention (CDC), American Veterinary Medical Association (AVMA), their international counterparts, and environmental organizations, working locally, nationally, and globally to disseminate information about human health, animal health, and environmental health; and

WHEREAS, leaders in local government are ideally suited as partners in that responsibility; and

WHEREAS, successful adoption and implementation of the One Health Initiative will be predicated on the leadership, communication skills, and cooperation of its advocates; and

WHEREAS, One Health topics that pertain to local government include the costs and organizational structure of public health services; pandemic preparedness; health education; adaptation to climate change; animal control and vaccination requirements; transportation and land use planning affecting public wellness; water quality protection; waste management; energy choices; food safety and regional food systems; ecological protection, restoration, and monitoring; homeland security and bioterrorism; measures of economic trends and workforce preparedness relative to sustainable practices; health, healthcare costs, and absenteeism of personnel; and

WHEREAS, facilitating communication among increasingly specialized experts will improve health outcomes for communities through increased awareness of connections between climate variability, food production, and infectious diseases; cross-species contagion (zoonoses), and human and animal health conditions; and demands on municipal infrastructure and services; and

WHEREAS, climate change will affect energy costs, the frequency and severity of floods, fires, wind events, heat waves, and other extreme weather conditions; coastal development and building standards; incidence vector-borne illnesses; crop production; habitat loss; endangerment and extinction of species; and human illness; and
**WHEREAS**, cities can only thrive if they remain attractive and livable, with sufficient quantities of clean water, clean air, efficient, affordable buildings, healthful food choices, healthy food animals, and leaders who are committed to cooperative long-range planning for a sustainable future.

**NOW, THEREFORE, BE IT RESOLVED** that the National League of Cities supports integrated decision-making in the context of the *One Health Initiative*, and calls on the federal government to adopt legislation and practices that address human health, animal health, and ecological health in an integrated fashion and support local efforts to advance sustainability goals.