Webinar Description

The purpose of this webinar is to advise awardees on how to establish and implement equitable, comprehensive healthy community design plans that incorporate best practices in land use and development, multi-modal transportation networks, and site designs, with a goal of encouraging physically active travel and access to healthy food choices. The webinar will address the value of formally planning for healthy designs as well as explore the range of planning options - from city-wide comprehensive plans to more specific efforts such as a trails and open space, Safe Routes to School, or Complete Streets implementation plans. Presenters will share how their coalitions, community leaders, municipal and regional agencies, and other stakeholders work together to implement their plans.
By the end of this Webinar, participants are expected to be able to:

• Identify at least one core principle of healthy community design.
• Determine the most useful approach in advancing healthy design in their own community.
• Provide key decision makers with at least one reason for the importance of implementing healthier community design in plans, ordinances, and routine practice.
Mark Fenton
Adjunct Associate Professor, Tufts University

Mark Fenton is a national public health, planning, and transportation consultant, an adjunct associate professor at Tufts University’s Friedman School of Nutrition Science and Policy, and former host of the “America’s Walking” series on PBS television. He’s author of numerous books including the “Complete Guide to Walking for Health, Weight Loss, and Fitness.” He currently provides technical assistance on healthy community design as an independent consultant to a range of clients, from local health and planning departments to YMCA of the USA and the Centers for Disease Control and Prevention.
Leslie Meehan is Director of Healthy Communities for the Nashville Area Metropolitan Planning Organization. She specializes in active transportation and the relationship between transportation and health. She works closely with the public health community and is a member of the American Institute of Certified Planners and the Institute of Transportation Engineers.
Laura Garrett is the Community Initiatives Lead for REACH Healthy Communities, a broad-based community collaboration with the goal of improving the health and quality of life of all residents in Bartholomew County, Indiana. Laura works collaboratively with the local government, businesses, not for profits, schools, and residents to encourage the community to build environments, policies, and programs that support a healthier, happier, and more physically active population. She graduated with a Bachelor of Landscape Architecture from Clemson University and obtained a Master in Public Affairs with a concentration in Sustainable Communities and a Master in Environmental Science with a concentration in Applied Ecology from Indiana University.
This webinar is supported in part by Contract No. GS-23F-9777H (200-2011-F-42017). The findings and conclusions in this webinar are those of the authors and do not necessarily represent the views or official position of the U.S. Department of Health and Human Services or the Centers for Disease Control and Prevention (CDC). In accordance with U.S. law, no federal funds provided by CDC were permitted to be used by community grantees for lobbying or to influence, directly or indirectly, specific pieces of pending or proposed legislation at the federal, state, or local levels. Links to non-federal organizations found in this presentation are provided solely as a service. These links do not constitute an endorsement of these organizations or their programs by CDC or the federal government, and none should be inferred. CDC is not responsible for the content of the individual organization web pages found at these links.
Planning for Healthy Communities

DCH TACTIC Webinar

June 17, 2015
CDC Disclaimer

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Our flow:

• Elements of healthy community design.
• Types of plans that guide design.
• Examples . . .
  – Nashville TN
  – Columbus IN
• Questions
Social Ecology Model

Determinants of behavior change

- Public Policy - laws, ordinances, permitting practices & procedures
- Community - networks, facilities
- Institutional - school, work, health care & service providers
- Interpersonal - family, friends, colleagues
- Individual - motivation, skills

Sallis & Owen, Physical Activity & Behavioral Medicine.
A physician’s take on the socio-ecological approach.

Frieden, AJPH, 100(4), 2010.
Four Elements of Healthy Community Design:

- Ped, bike, & transit network
- Mix of land uses
- Safety & access
- Site design
Types of plans:

- **State.** E.g. pedestrian & bicycle plans.
- **Regional** (Metropolitan Planning Organization county). E.g.:
  - Long Range Transportation Plan (LRTP)
  - Transportation Improvement Plan (TIP)
- **Local/Community.** E.g.
  - Comprehensive, Master, Growth plans
  - Active Transportation, SRTS, Trails/Open Space
  - Complete Streets
1. State Plans

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Responsibilities, and Staffing/Resource Memorandum
Exception is proposed to the Policy for Integrating Bicycle and Pedestrian Accommodations

1. Environmental or social impacts outweigh need
   - YES: Alternative enhancements practical
   - NO: District Administrator approves exception

2. Safety compromised
   - YES: Project is on a facility designated in an adopted bike/ped plan
   - NO: Chief Engineer approves exception

3. Cost disproportionate to need
   - YES: No bike/ped accommodation
   - NO: Provide accommodation

4. Project purpose & scope does not facilitate provision of accommodation
   - YES: Bike/Ped travel prohibited by law
   - NO: Provide accommodation

*District Administrator should seek request to Chief Engineer to approve exception and retain documentation.

Numbers in decision boxes refer to conditions/criteria list. See list for greater detail regarding appropriate exception criteria.

Note: This Decision Tree is meant to serve as a tool for deciding if an exception to the Policy is warranted. It is not intended to be used for determining whether an accommodation is necessary and will be provided.
2. Regional, MPO plans

- TIP - Transportation Improvement Plan
- LRTP - Long Range Transportation Plan
- Supposed to bring land use and transportation considerations into the same process.
- Responsibility, often without much authority!
3a. Comprehensive, Master, General, Growth Plans

Typical chapters:
• Land use
• Transportation
• Open space, trails, recreation
• Economic development
• Infrastructure, utilities
• Others: sustainability, historic preservation, health
Often preceded by or complements a visioning document. E.g. NW Michigan:

1. Multi-modal transportation
2. Local economies
3. Protect open space
4. Local farms
5. Varied housing
6. Sustainable energy

www.markfenton.com
Maui General Plan process

Land Use Policy Map
Maui Island

Legend

- Urban Growth Boundary
- Resort Areas
- Developed
- Sensitive Lands
Maui, HI – Where can we grow food?
3b. Specific implementation plans.

For example . . .

- Pedestrian, Bicycle, or Active Transportation
- Trails, Open Space
- Safe Routes to School
- Complete Streets
- Transportation Demand Management
- Wayfinding, information
Pedestrian, Bicycle, or Active Transport Plan:
• Sets a vision
• Focuses on specific project & infrastructure priorities
• Recommends land use & development goals

Columbus, IN passed Bicycle & Pedestrian Plan as a unique element. Then voted into Comprehensive Plan.
Seattle Pedestrian Plan

Vibrancy: 40%
Destinations, transit.

Equity: 35%
Inactivity, obesity, income, car ownership, disability.

Corridor function: 25%
Functional links.

< High Priority Areas
E.g. Trails & Open Space plan.

Set priorities:

- **Connect** to other elements of transportation network.
- Focus on **destinations** (schools, shopping, parks, senior housing, etc.)
- Build into the **fabric of the community**.
- Promote for **transportation** (not just recreation).
- Identify **key links**.
E.g. Safe Routes to School (SRTS) Plan
Columbia, MO

- **Evaluate**: Show of hands counts, parent surveys.
- **Educate, Encourage**: Walking buses, bike trains.
- **Engineer**: Clean walking trail through park; safer crosswalks. Bike parking.
- **Enforce**: Restrict pick-up areas. Remote drop/pick area in park, w/ 5 min. safety delay for cars.
E.g. Complete Streets implementation plan

- Pedestrians
- Bicyclists
- Transit
- Motor vehicles, freight

Design speed = posted speed.
Few, well-defined exceptions.
Expand the hierarchy.

www.completestreets.org
Change standard practice . . .

- Multi-modal Transportation Analysis vs. Traffic Impact Analysis (MMTA vs TIA)
- Mitigation for all four modes.

- Sidewalk, trail link; benches, trees.
- Bike lane, bike parking, sharrows.
- Transit shelter, path to entrance.
Transportation Demand Management (TDM)

London combines carrots (bike lanes & boxes, transit) & sticks (congestion charge)
Adopt guidelines, design requirements

- Don’t reinvent the wheel! National Association of City Transportation Officials have compiled the evidence-base and best practices.

(and an Urban Bikeway Design Guide) www.nacto.org
Major points . . .

• There are many levels of plans; different agency responsibilities, & frequent updates.

• Build interdisciplinary relationships early.

• Not just health benefits: economic, environmental, social.

• Be indispensible: surveillance data, community engagement, follow-up evaluation.

• Push to implementation!
Thank You

• Mark Fenton
mark.fenton@verizon.net
Active Transportation and Health: Policy, Projects, Data Collection and Monetization

Leslie Meehan, AICP
TACTIC Webinar
Implementing Comprehensive Healthy Community Design Plans
June 17, 2015
Metropolitan Planning Organizations
Nashville Area MPO

2.5 million statewide
1.3 million (52%)
in Middle Tennessee
Policy: Public Opinion

1st choice: improve and expand mass transit options

2nd choice: make communities more walkable & bike-friendly

3rd choice: build new or widen existing roadways
Policy: Public Opinion

1st choice: improve and expand mass transit options

2nd choice: make communities more walkable & bike-friendly

3rd choice: build new or widen existing roadways

#1
A Bold, New Vision for Mass Transit

#2
Support for Active Transportation & Walkable Communities

#3
Preservation & Enhancement of Strategic Roadways
A Regional Vision for Non-Motorized Modes

Bikeways

Sidewalks
What We Learned – Health Analysis

What We Learned – Health Analysis

There is a strong link between the lack of physical activity and health (e.g. heart disease, obesity, and other chronic conditions).

Research has also shown certain population groups have a higher disparity. These groups include:

- Low Income
- Minority
- Older Adults (over 65)
MPO’s Health Investment Strategy

Roadway Funding:

- 70% - Roadway projects that improve health
- 15% - Sidewalks, bicycle lanes, greenways, transit stops, and education
- 10% - Transit
- 5% - Intelligent Transportation Systems
Projects: Complete Streets

2035 Plan: 70% of adopted roadway projects include sidewalks, bicycle lanes, or shared-use lanes (up from 2%)

70% roadway $ to projects that improve health
MPO’s Urban STP Investment Strategy

- 70% - Roadway projects that improve health
- 15% minimum investment in Active Transportation & Walkable Communities
  - Sidewalks, bicycle lanes, greenways, transit stops, and education
- 10% minimum flexed to Transit
  - Combined with Federal Transit Administration funds to help implement regional vision for mass transit
- 5% Intelligent Transportation Systems
  - Using technology to manage traffic
Data Collection: Middle Tennessee Transportation and Health Study

Transportation, Physical Activity and Health Data Collection and Analysis

www.middletnstudy.com
Prioritization: Health Priority Areas

Health Priority Areas
3 out of 4:
- Poverty
- Unemployment
- Carless Household
- Aging (over age 65)
ITHIM is a comprehensive health impact model

- Health benefits of physical activity
- Health benefits of reduced air pollution
- Health risks of bike/ped vs auto accidents

- Age/Sex effects
# Diseases and Exposures

<table>
<thead>
<tr>
<th>Physical Activity</th>
<th>Air Pollution</th>
<th>Collisions</th>
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</thead>
<tbody>
<tr>
<td>Ischemic Heart Disease</td>
<td>Respiratory Infections</td>
<td>Auto</td>
</tr>
<tr>
<td>Depression</td>
<td>Cardiovascular Disease</td>
<td>Bicycle</td>
</tr>
<tr>
<td>Dementia</td>
<td>Hypertensive Heart Disease</td>
<td>Pedestrian</td>
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<tr>
<td>Diabetes</td>
<td>Inflammatory Heart Disease</td>
<td>Bus</td>
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<tr>
<td>Colon Cancer</td>
<td>Lung Cancer</td>
<td>Truck</td>
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<tr>
<td>Breast Cancer</td>
<td>Respiratory Disease (kids)</td>
<td>Highway</td>
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<td>All-Cause Mortality</td>
<td>Stroke</td>
<td>Arterial</td>
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<tr>
<td></td>
<td></td>
<td>Local</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Fatal</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Non-Fatal</td>
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</tbody>
</table>

**MODE**

<table>
<thead>
<tr>
<th>ROAD TYPE</th>
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<tbody>
<tr>
<td>Local</td>
</tr>
<tr>
<td>Fatal</td>
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<tr>
<td>Non-Fatal</td>
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</table>

<table>
<thead>
<tr>
<th>SEVERITY</th>
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<tbody>
<tr>
<td>Local</td>
</tr>
<tr>
<td>Fatal</td>
</tr>
<tr>
<td>Non-Fatal</td>
</tr>
</tbody>
</table>
Happening Now: Integrated Transport and Health Impact (ITHIM)

Active Travel By Scenario

- AT time
- Walk mi/wk
- Bike mi/wk

Miles per Week

Minutes per Week

Baseline | Conservative | Moderate | Aggressive
## Monetization: Impacts of Physical Activity via Transportation on Health

<table>
<thead>
<tr>
<th>Moderate Scenario</th>
<th>Change in disease burden</th>
<th>Change in DALYs per year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiovascular Diseases</td>
<td>10.4%</td>
<td>1442</td>
</tr>
<tr>
<td>Diabetes</td>
<td>11.2%</td>
<td>1252</td>
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<tr>
<td>Depression</td>
<td>2.7%</td>
<td>460</td>
</tr>
<tr>
<td>Dementia</td>
<td>3.9%</td>
<td>879</td>
</tr>
<tr>
<td>Breast cancer</td>
<td>2.8%</td>
<td>124</td>
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<tr>
<td>Colon Cancer</td>
<td>2.6%</td>
<td>94</td>
</tr>
<tr>
<td>Collisions</td>
<td>13.8%</td>
<td>1240</td>
</tr>
</tbody>
</table>

Savings: $200 Million per year in healthcare costs
Partners:
Getting Involved

Making the Case
Providing Data
Involved in Policy
Benchmarking and Performance Measures

Leslie A. Meehan, AICP
Director of Healthy Communities
Nashville Area MPO
meehan@nashvillempo.org
615-862-7211
Implementing Comprehensive Healthy Community Design Plans

Laura Garrett
Community Initiatives Lead
lgarrett@crh.org
(812) 375.3994

June 17, 2015
Columbus, IN

- Centrally located between Indianapolis, IN, Louisville, KY & Cincinnati, OH
- Population of 46,000
- Home to the world headquarters of Cummins Inc.
Reach Healthy Communities

- Focused on improving **health and quality of life** by working upstream to promote health and prevent illness
- Formed in **1993** with **Columbus Regional Health** as our founding partner.
- CPPW recipient 2010-2012
- Plan4Health recipient 2015

---

**Our Initiatives**

- **Access to health care for all**
  - Medication Assistance
  - Proyecto Salud
  - Volunteers in Medicine

- **Promote healthy lifestyles**
  - Breastfeeding Coalition
  - Healthy Lifestyles
  - Tobacco Awareness

- **Promote healthy relationships**
  - Caring Parents
  - Domestic Violence
Our Journey

1. **Mid 1980s – People Trail System Begins**
2. **2006 – Urban Area Designation**
3. **2006 – Bike and Pedestrian Plan Committee Forms**
4. **May 2010 – Columbus Indiana Bicycle and Pedestrian Plan**
5. **November 2010 – Thoroughfare Plan Meets Complete Streets**
6. **2011 – Safe Routes to School Comprehensive Plan**
7. **2012 – Park Foundation People Trail Network Funding Campaign**
8. **2012 – Bike Friendly Community**
Our Journey

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8. 2012 – Bike Friendly Community
2006 – The Conversation Shift

- No longer only about trails, how do we create a network?
- Bike and Pedestrian Plan Committee Forms:
  - Engineering Department
  - Planning Department
  - CAMPO – Columbus Area Metropolitan Planning Organization
  - Parks and Recreation Department
  - Community Development
  - Police Department
  - City Garage – Public Works Department
  - Key Leadership Figures
  - School corporation (SRTS)
  - Columbus Regional Hospital – Healthy Communities
  - Community Members
Our Journey

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City’s First Bike & Pedestrian Plan Implemented

- Collective passion and input
- No cost
- Created new partnerships
- A balanced plan
- Included as an element of the City of Columbus Comprehensive Plan by the Columbus City Council
Thoroughfare Plan Update

• Increased emphasis on:
  – Community sustainability
  – Energy efficiency
  – Fiscal responsibility
• A balanced approach to meet the needs of all street users
• Complete Streets Plan
2010 Changes for New Development

- Created a unified, adopted & recognized plan for future trails, bicycle lanes, etc. (Bike/Ped. Plan)

- Mandated bicycle lanes on new or improved (developer built) collector and arterial streets. (Subdivision Control Ordinance)

- Established new standards for streets (developer built) that included narrower street pavements, wider sidewalks, wider tree lawns, and street trees. (Subdivision Control Ordinance)

- Reinforced the importance of sidewalk requirements for new development. (Bike/Ped. Plan & Subdivision Control Ordinance)

- The Plan Commission expressed concern about the more narrow streets, but approved the changes.
Safe Routes to School Comprehensive Plan

- Helped create energy and momentum
- Used an intern to compile much of the data
- On the ground results
Our Journey

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8. **2012 – Bike Friendly Community**
9. **2012 – Shift in Community Priorities**
The Park Foundation Trail Education Campaign

- Expanded the idea of People Trails to include the Network
- Tied the Fundraising Campaign directly to the Bike and Pedestrian Plan
- Raised over $1 million in less than a year!
- Private Funding is easier to spend
- 18 projects selected from the Bike and Pedestrian Plan
  - $5 million estimated cost
Bicycle Friendly Communities

Indiana Communities

Gold:
• Bloomington

Bronze:
• Columbus
• Indianapolis
• Carmel
• Goshen
• South Bend
• Ft. Wayne
• Warsaw & Town of Winona Lake

- Understand and Celebrate Accomplished Work
- Review process created a roadmap for the future

http://bikeleague.org/bfa/awards#community
Shift in Community Priorities

- Less happening with plan development and implementation
- Turn a perceived set back into an OPPORTUNITY!
- Work to build support network through encouragement and education
Plan4Health in Columbus

To increase daily physical activity by bridging the gap between existing policy and implementation as it relates to the built environment.
Key Learnings from our Journey

1. Get a project on the ground that builds excitement
2. Have the right partners at the table
3. Ensure the plans are implemented as policy
4. Nourish public awareness and support
5. Re-evaluate and revise
6. Celebrate successes and don’t give up!
Resources from Presentation

- Reach Healthy Communities
- Columbus, Indiana Bicycle and Pedestrian Plan
- Columbus, Indiana Thoroughfare Plan
- BCSC Safe Routes to School Comprehensive Plan
- Columbus Park Foundation People Trail Project
Contact Information

Laura Garrett
Community Initiatives Lead
lgarrett@crh.org
(812) 375.3994

June 17, 2015