



**Pedestrian and Bicycle  
Information Center**

# Bringing Public Health to the Transportation Policy Table

**PBIC Health + Transportation Webinar Series, Part 5**

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**Roy Gothie** Pennsylvania Department of Transportation

**Megan Wier** City of Oakland Department of Transportation

**Wendy Landman** WalkBoston

**Caron Whitaker** League of American Bicyclists

**Renee Autumn Ray** Conduent Transportation

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# Housekeeping

- ⇒ **Submit your questions**
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- ⇒ **Follow-up email later today**
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Pedestrian and Bicycle Information Center

Webinar Series

## Health and Transportation

Oct. 13: Confronting Power and Privilege for Equity

Oct. 15: Agency Structures for Collaboration

Oct. 22: Integrating Health Data

Oct. 27: Planning and Prioritizing Projects

Oct. 28: Bringing Health to Transportation Policy

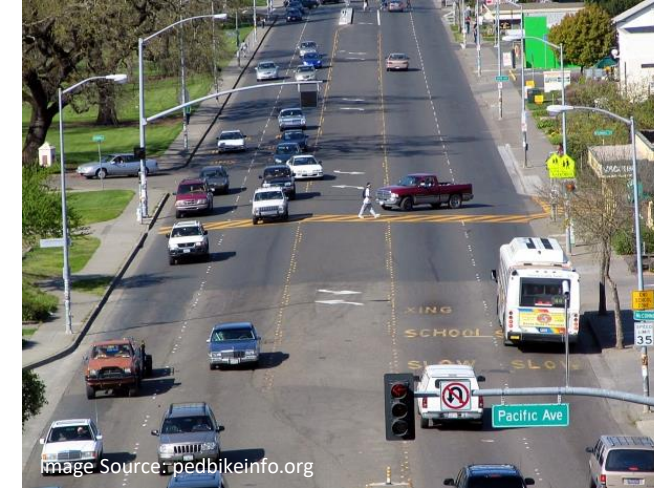
**#PBICWebinar**

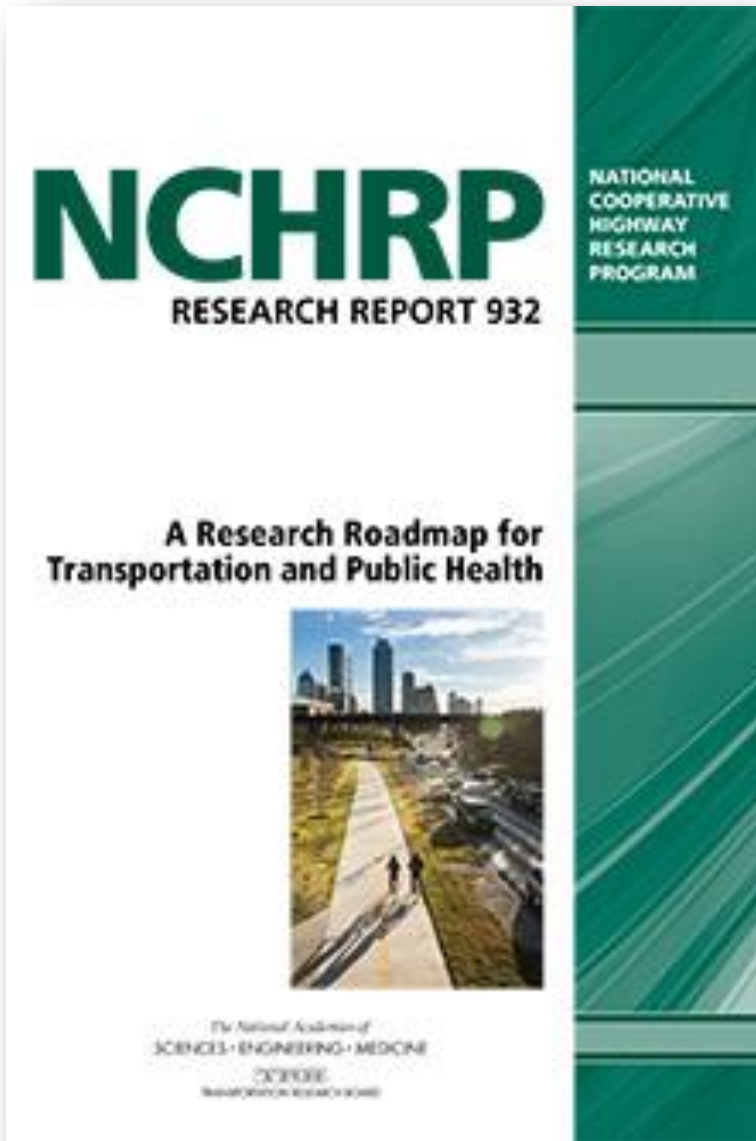


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# Transportation and health intersect in many ways





## Series Motivation

- ⇒ How are health and equity defined within the transportation community?
- ⇒ How can transportation practices impact health?
- ⇒ In what ways are transportation agencies considering health in current practices?
- ⇒ What partnerships, research, and other resources are needed to improve practice?

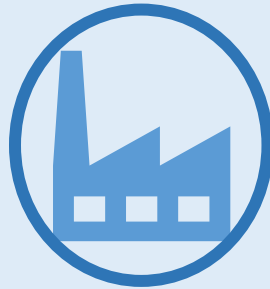
# Pathways to Health



**Improving  
access to  
opportunities  
and services**



**Providing  
opportunities  
for physical  
activity**



**Mitigating  
human  
exposure to  
environmental  
risks (air and  
noise  
pollution)**



**Preventing  
injuries and  
improving  
safety**



**Supporting  
resiliency to  
disaster and  
extreme  
weather  
events**



**Promoting  
community  
connectedness  
and vitality**



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Renee Autumn Ray  
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Photo by Leonard Bonarek

# Pennsylvania's Active Transportation Plan

- **Roy Gothie**
- Statewide Bicycle and Pedestrian Coordinator
- [rgothie@pa.gov](mailto:rgothie@pa.gov)

Active Transportation Plan - <http://www.dot.state.pa.us/public/PubsForms/Publications/PUB%20787.pdf>

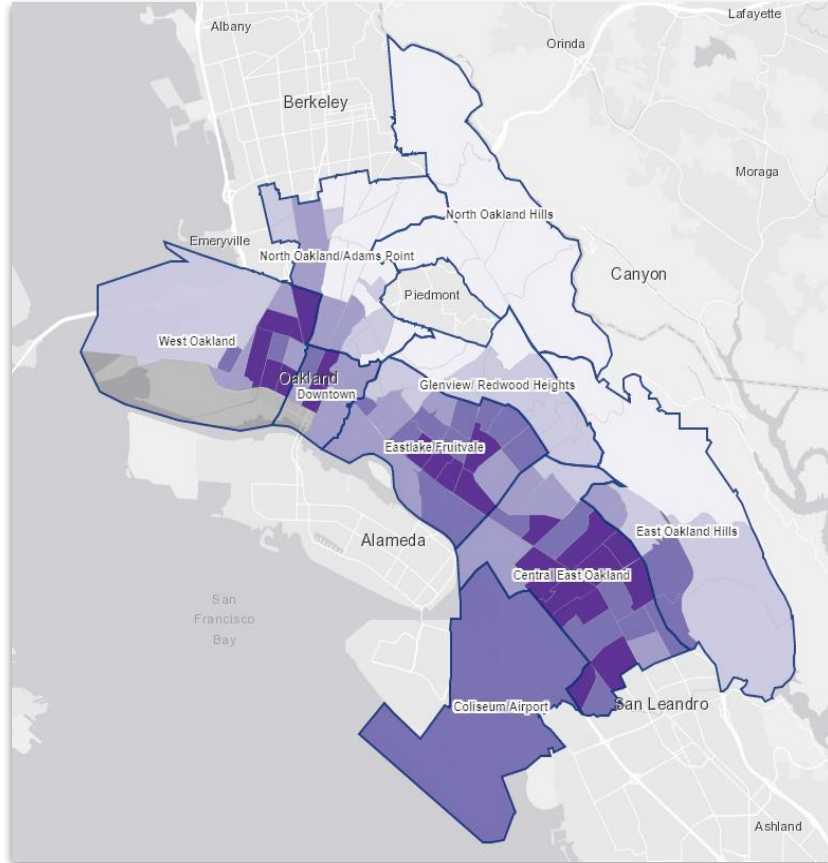
# Oakland's Slow Streets Corridors and Essential Places



**Slow Streets Corridors** are soft street closures to repurpose local streets for more space for physically-distant walking, biking, and other physical activity and alleviate crowding on sidewalks. The Department of Transportation implemented the Slow Streets program to create space for physical activity for physical and mental health benefits for residents during the pandemic.

**Slow Streets Essential Places** are temporary traffic safety improvements at pedestrian crossings to enable safer access for residents to the essential services including grocery stores, food distribution sites in public facilities, and COVID-19 test sites that overlay with the City's High Injury Network and the highest-priority neighborhoods according to equity indicators such as race and income. The Slow Streets: Essential Places program was implemented after hearing feedback from East Oakland community leaders to meet the needs of more communities.

# OakDOT's Geographic Equity Toolbox



## Priority Factors:

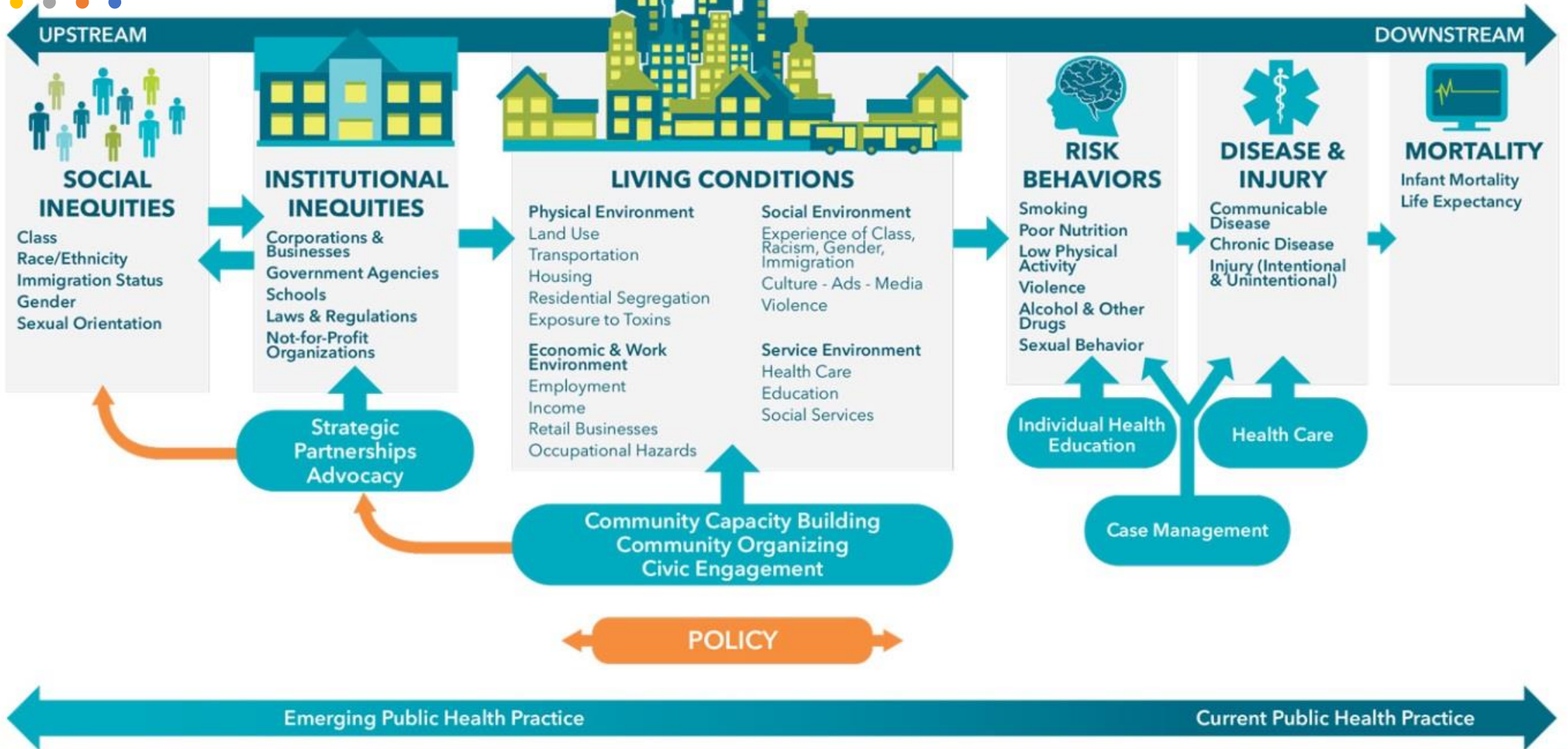
- People of Color
- Low Income
- Severely Rent Burdened Households
- Population with a Disability
- Low Educational Attainment
- Seniors 65 +
- Single Parent Households

## Other Layers:

- Urban Displacement Project
- CalEnviroScreen
- Low English Proficiency

<http://oakgis.maps.arcgis.com/apps/MapSeries/index.html?appid=fd47784582294d7b87cfb3ee1b047ea8>

**A PUBLIC HEALTH FRAMEWORK FOR REDUCING HEALTH INEQUITIES**  
**BAY AREA REGIONAL HEALTH INEQUITIES INITIATIVE**



# Health in All Policies (HiAP)



HiAP is a collaborative approach to improving the health of all people by incorporating health considerations into decision-making across sectors and policy areas.\*



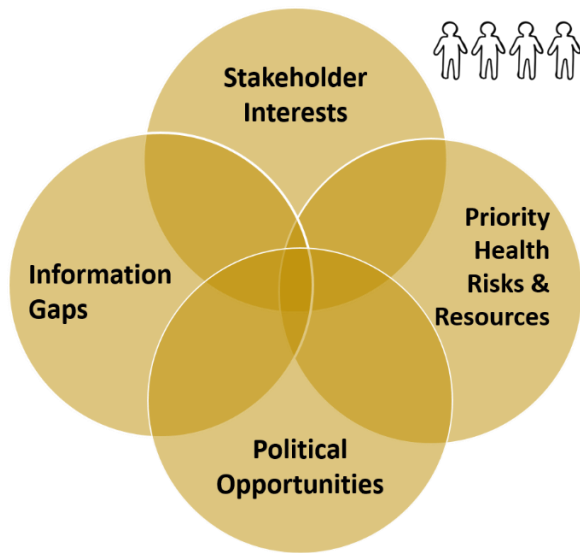
\*Rudolph, L., Caplan, J., Ben-Moshe, K., & Dillon, L. (2013). *Health in All Policies: A Guide for State and Local Governments*. American Public Health Association. Retrieved from <http://www.phi.org/resources/?resource=hiapguide>



# Health Impact Assessment (HIA)?

HIA is defined as a combination of **procedures, methods and tools** that systematically **assesses** the potential, and sometimes unintended, **effects of a policy, plan, program or project on the health of a population** and the distribution of those effects within a population. HIAs make **recommendations** with the aim of **maximizing positive health effects and minimizing negative health effects**.

## What is the Value of HIA?

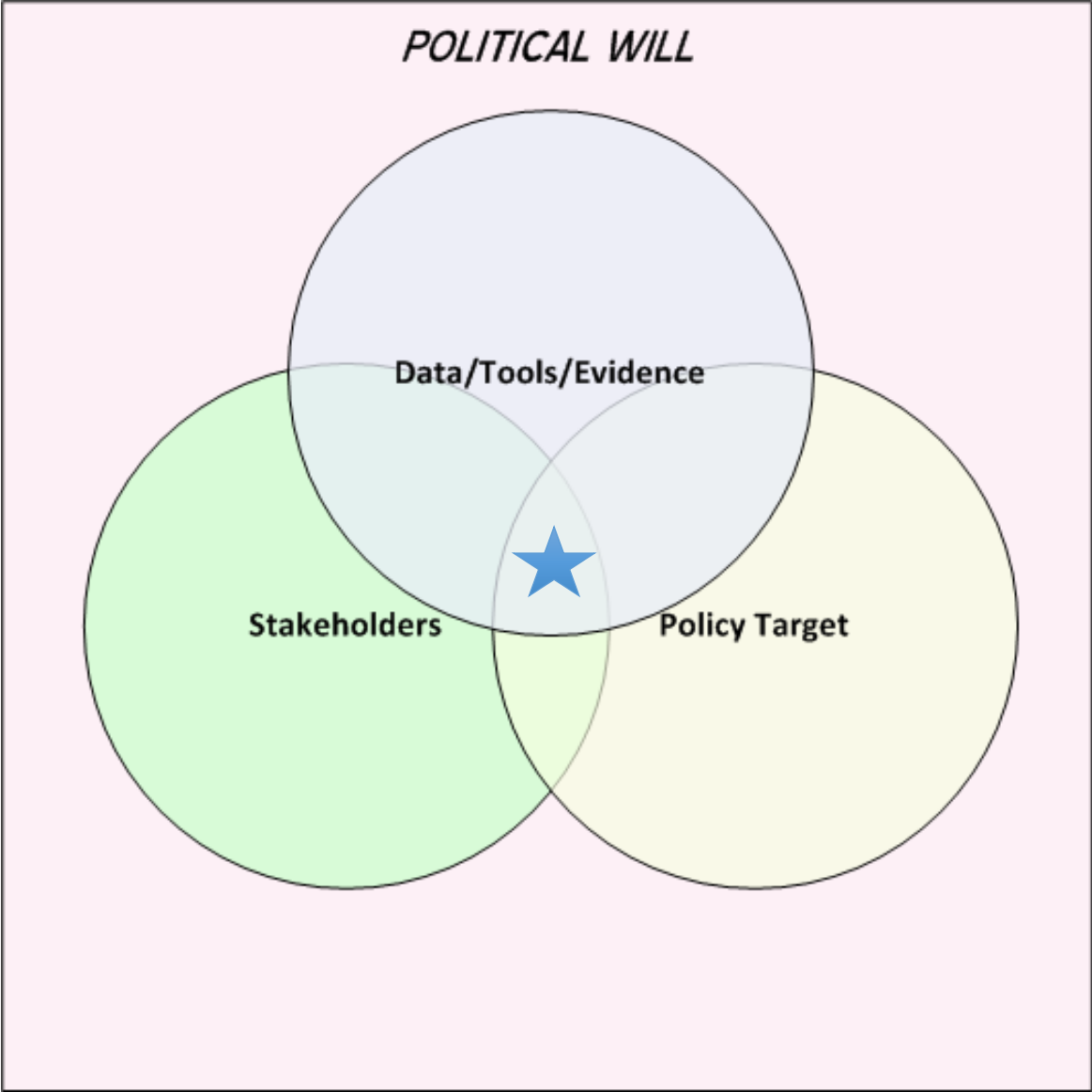


## What are the steps in an HIA?

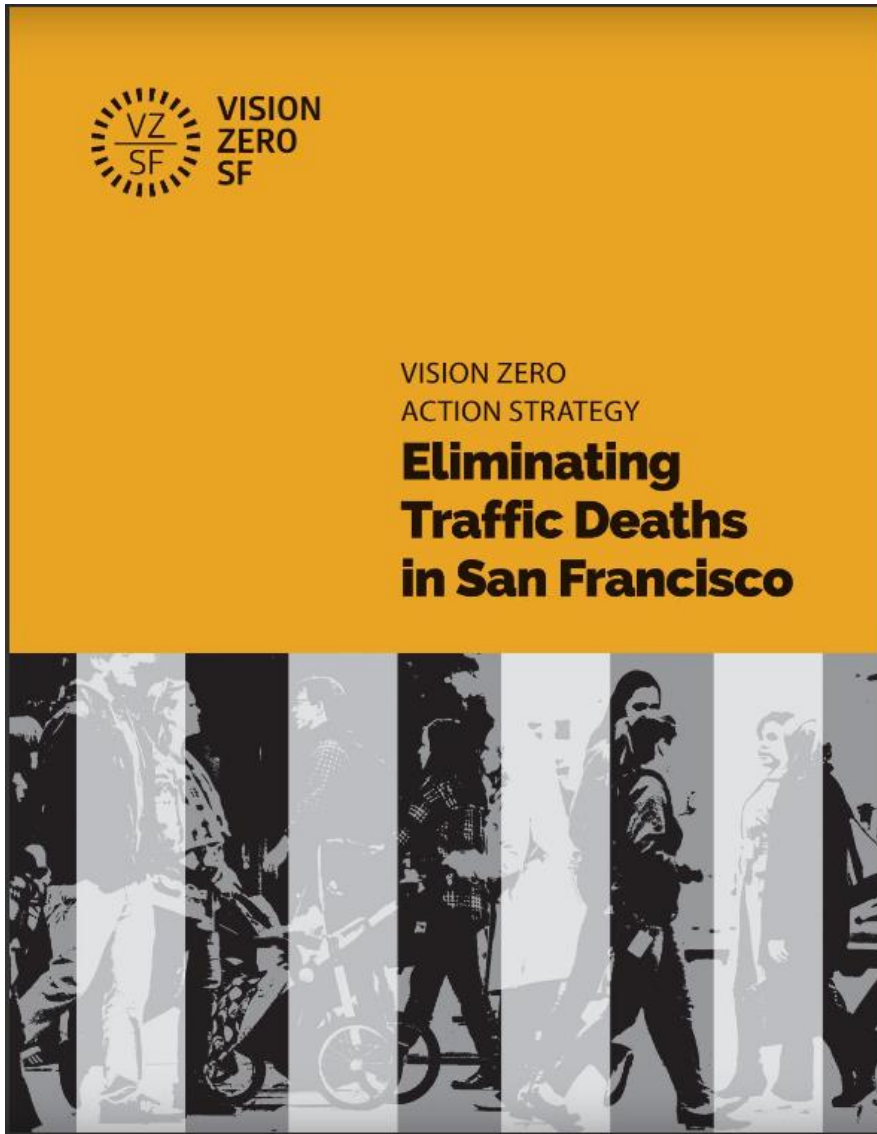


<https://www.pewtrusts.org/en/projects/health-impact-project/health-impact-assessment>

<https://hiasociety.org/>



# Core Principles of Vision Zero align with Public Health



**Saving Lives**



**Prevention**



**Equity**



**Speed**

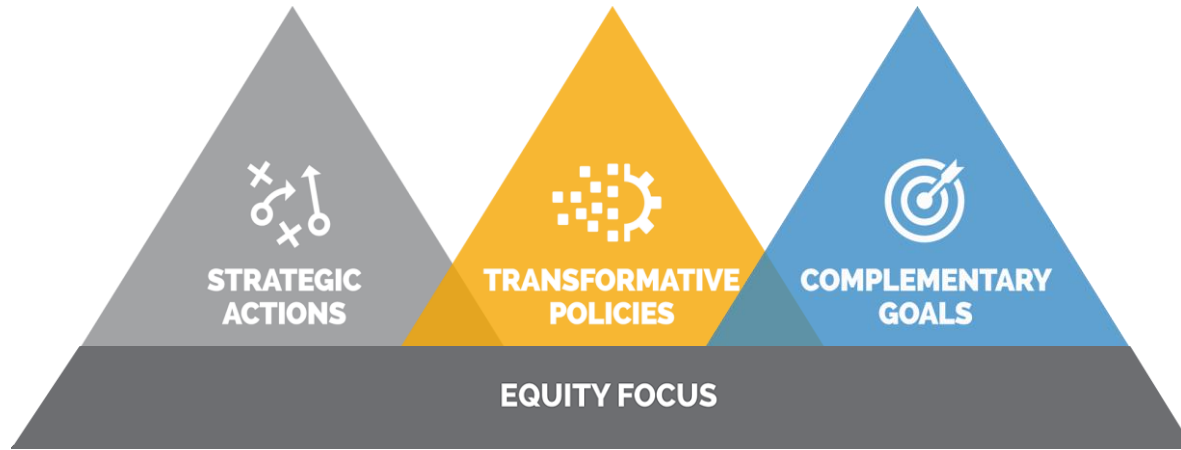


**Safe Streets**



**Safe People and  
Safe Vehicles**

# *Transformative Policies* are required to reach Vision Zero Goals



- ***SLOWING VEHICLE SPEEDS***
- ***REDUCING VEHICLE MILES TRAVELLED***



**Urban Speed  
Limit Setting**



**Automated  
Enforcement**



**Pricing and  
Reducing Vehicle  
Miles Travelled**



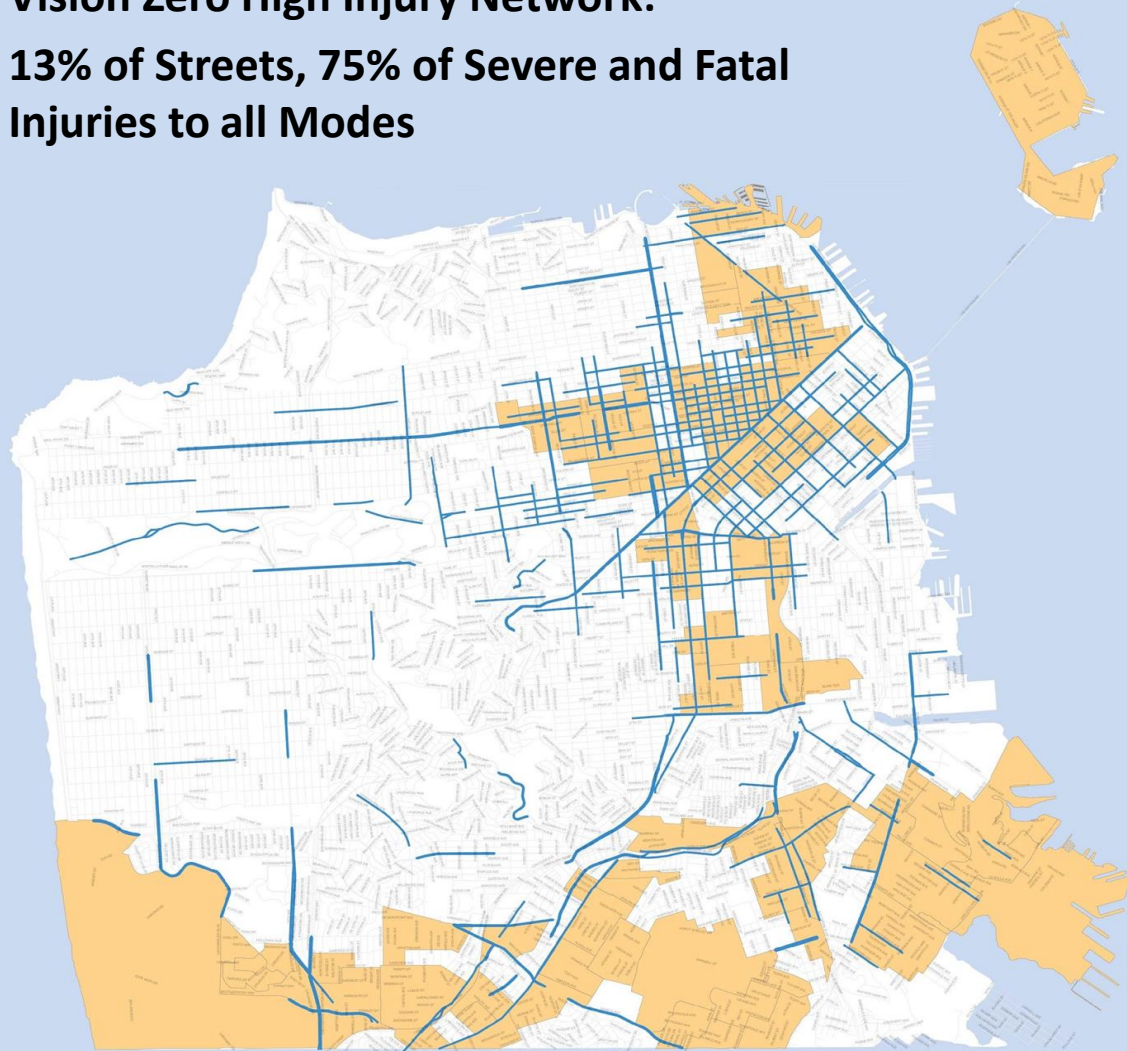
**Local Regulation  
Of Transportation  
Network Companies**

# Complementary Goals for Safe, Healthy, Equitable Cities



# The Inequities in our Transportation System Must Be Addressed to Achieve Health:Transportation Goals

**Vision Zero High Injury Network:  
13% of Streets, 75% of Severe and Fatal  
Injuries to all Modes**



**50% of the High Injury Network is in  
Communities of Concern – which include 31%  
of City Streets**

- *Low income communities*
- *Communities of color*
- *Seniors*
- *People with disabilities*
- *People reliant on walking, public transit*



# Thank You

Megan Wier, MPH  
Safe Streets Division Manager  
City of Oakland  
Department of Transportation  
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# WalkBoston – Making Massachusetts more walkable

WalkBoston makes walking safer and easier in Massachusetts to encourage better health, a cleaner environment and more vibrant communities.



making streets safe

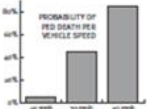


## Speed Kills: Small-scale fixes go a long way to slow traffic

The human costs and economic consequences of speed-related crashes are immense. In 2007, about 31 percent of all fatal crashes were speeding-related, resulting in 13,430 fatalities. In Massachusetts, 15 to 20 percent of all road fatality victims are pedestrians. Nationwide, the economic cost to society of speeding-related crashes is estimated to be \$40.4 billion per year, according to the National Highway Traffic Safety Administration.

But it doesn't need to be this way.

Safety can be increased — for all road users — with modifications and designs that slow down vehicles, increase the visibility of pedestrians and bicyclists, and deter cut-through traffic and speeders — the bane of livability for urban neighborhoods and commercial areas.



Traffic calming utilizes design strategies proven to reduce traffic speeds and consequently reduce the number of pedestrian deaths.

The tools can be small in scale, relatively inexpensive, and are easily tested and evaluated. Streets can be made safer by putting them on a "road diet," reducing speeds and enhancing pedestrian safety. Techniques include signage, pavement devices and paint. Physically or visually narrowing a standard width lane by 1 foot slows cars by 7 miles per hour.

Ideas often start with neighbors and neighborhoods where protection from fast-moving vehicles is acutely needed. Gain support by getting together to talk and think of possible improvements. Look for data on speeding and pedestrian crashes. Then begin working with your municipal agencies.

Ask whether your town is willing to adopt overall guidelines and make small-scale expenditures. Signs and pavement paint are relatively inexpensive. Physical street changes may require larger expenditures. Ask for temporary traffic arrangements to test new ideas for your streets prior to large investments.

Proposals may seem simple, but change can take time. These extremely worthwhile investments may involve multiple decisions for municipalities. Be persistent — it may save a life.



walk your way to health



## 'Walking is the closest thing to a magic bullet for health'

Regular activity, like walking, is hard to beat when it comes to keeping yourself healthy. It lowers the risk of cancer, heart disease, diabetes, stroke, arthritis and osteoporosis, helps keep weight in check and boosts your mood.

Physical activity is especially important in the prevention of chronic disease. Almost 1 out of every 2 adults (133 million Americans) had at least one chronic illness in 2005. To create a healthier, wealthier and happier population, we need to reduce chronic diseases and find ways to alleviate their symptoms. The United Nations' World Health Organization and the U.S. Centers for Disease Control and Prevention agree that chronic diseases can be prevented or delayed by being active and walking. There is a linear relation: increases in physical activity and fitness lead to improved health. [Canada Medical Journal, 2006]

Walking helps alleviate the symptoms of chronic disease. Recuperation can be boosted and maintained by regular walking. This may mean a major change in lifestyle, but it's worth it! Patients can reap substantial benefits and increase their capacity to participate in normal everyday activities.

Consistently have a long life. Men and women age 50-71 who took a brisk walk nearly every day had a 27% reduced death rate compared to non-exercisers. Adding 20 minutes of vigorous exercise, 3 days a week resulted in a 32% reduced death rate. Combining vigorous exercise and walking each week produced a 50% reduced mortality. [Arch Internal Medicine, 2007]

Get 30 minutes of daily physical activity like walking. This time can be split into three 10-minute spurts, six 5-minute sections, or fifteen 2-minute quickies. [U.S. Centers for Disease Control 24/7, 2012]



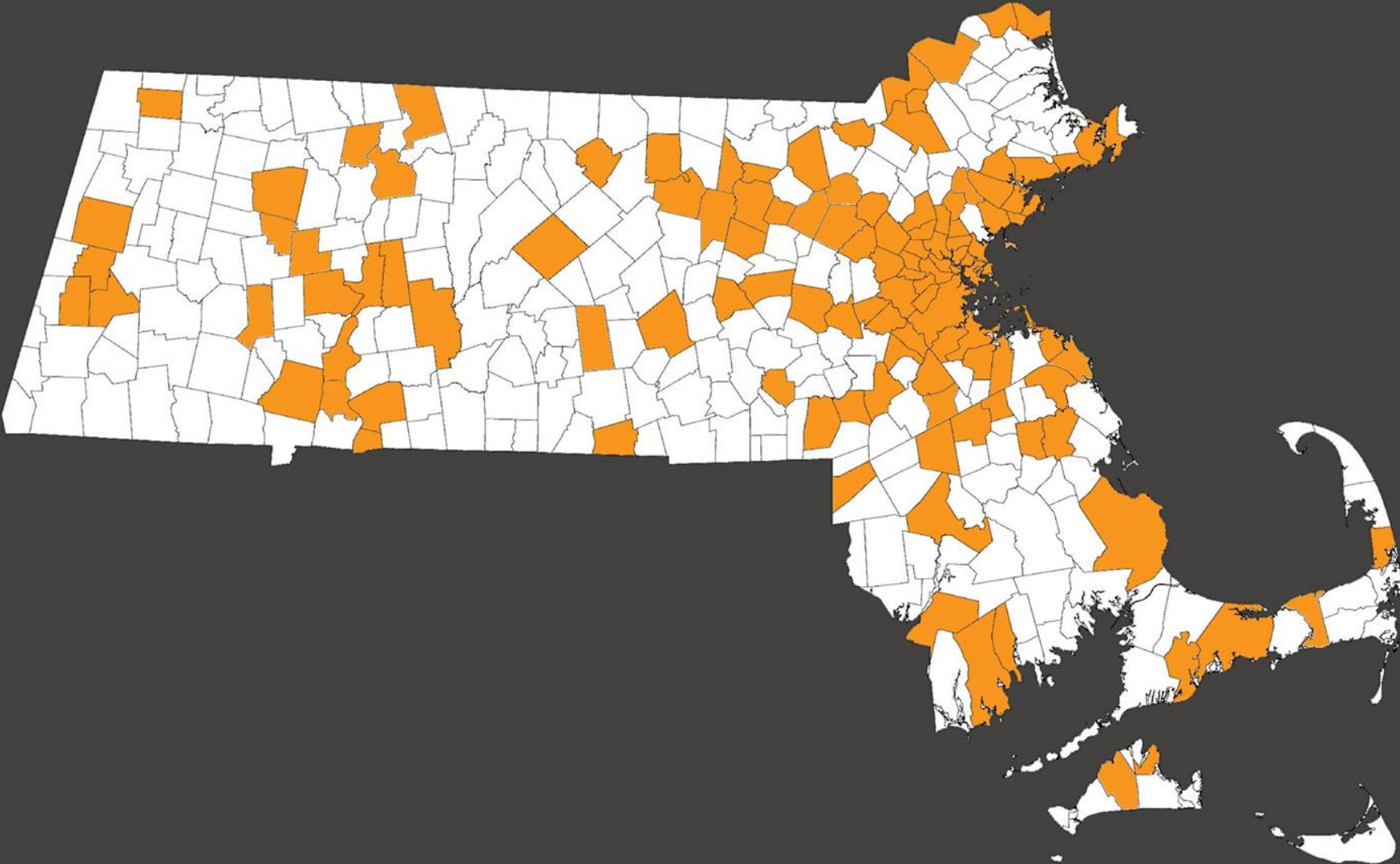
MAKING MASSACHUSETTS MORE WALKABLE



MAKING MASSACHUSETTS MORE WALKABLE



# Work with Communities Across Massachusetts



# Putting Health & Transportation together in MA

**Healthy Transportation Compact - Created under the 2009 Transportation Reform Law;** co-chaired by the Secretary of Health and Human Services and the Secretary of Transportation (MassDOT), the Compact includes the Commissioner of Public Health, MassDOT Highway Administrator, MassDOT Transit Administrator, Secretary of Energy and Environmental Affairs, and the Secretary of Housing and Economic Development.

**MA Bicycle and Pedestrian Advisory Board** - legislative mandate, advocates and state agencies, managed by MassDOT

**Mass in Motion** - healthy eating and active living, under MA DPH

**MA Healthy Aging Collaborative** - Executive Office of Elder Affairs, elder services, advocacy and foundation participants

**MassDOT Complete Streets** - “...encourages an active transportation lifestyle and is supported by the United States Centers for Disease Control and the Massachusetts Department of Public Health”

**MassDOT Shared Streets and Spaces Program** - COVID-19 quick launch/quick-build grant program to implement improvements to sidewalks, curbs, streets, on-street parking spaces and off-street parking lots in support of public health, safe mobility, and renewed commerce in their communities.

# WalkBoston's Greatest Hits for Age-Friendly Walking

*Practical steps municipalities can take to help older adults age in community*

## INFRASTRUCTURE



Make street crossings safer with longer WALK times, raised crossings, bump outs, signals, and many other options



Provide large type/well-lit street signs and wayfinding



Identify and mark publicly accessible toilets



Improve night lighting



Make bus and transit stops fully accessible



Provide lots of benches



Plant lots of shade trees



Make sure that parks are age-friendly (e.g. benches, shade, smooth walking paths)

# What is still needed to put Health & Transportation together in MA

**Taking the big steps necessary to reduce GHG emissions from transportation, the largest contributor to GHG in Massachusetts** - COVID-19 has further revealed how significant the health impacts of GHG and particulates are on public health and how substantially we need to change our transportation investments to reduce emissions

**Investing in transit to ensure transportation is provided for essential workers** - The more we learn about how critical transit is to serve the needs of essential workers and low-income people, the clearer the connection is between transportation and population health.

**Ensuring that communities are walkable year-round** - In addition to investing in sidewalks and safe crosswalks, we need to add shade in summer, snow clearance in winter, fully accessible networks, and long-term continuous maintenance of this critical component of a healthy transportation system



# TRANSPORTATION ALTERNATIVES COALITION

**What:** Coalition of mostly health organizations (some equity, enviro, etc.)

**Leads:** American Heart Association, League of American Bicyclists, Safe Routes Partnership

**Support:**

- Increase funding and improve policy for the Transportation Alternatives Program
- Active transportation issues in federal transportation reauthorization

**Activities:** Lobby days, action alerts, group letters,

**Lessons learned:** Meet them where they are

- Be strategic in how you deploy them
- Learn and use their language
- Make it as simple as possible



# ACTIVE PEOPLE, HEALTHY NATION COALITION

**What:** Coalition of organizations promoting physical activity

**Leads:** YMCA, others?

## **Support:**

- Increased funding for CDC program's to state Depts of Health, High Obesity Counties, communities of color/ low income communities to promote access to physical activity and nutrition
- *Activity-friendly routes to everyday destinations*

**Activities:** Lobby days, action alerts, group letters,

## **Lessons learned:**

- Health community is like transportation, multiple facets.
- No clear lead on physical activity, need help from our community.

**[data.bikeleague.org](http://data.bikeleague.org)**





# ACTIVE PEOPLE, HEALTHY NATION

## State Physical Activity and Nutrition (SPAN) grants-

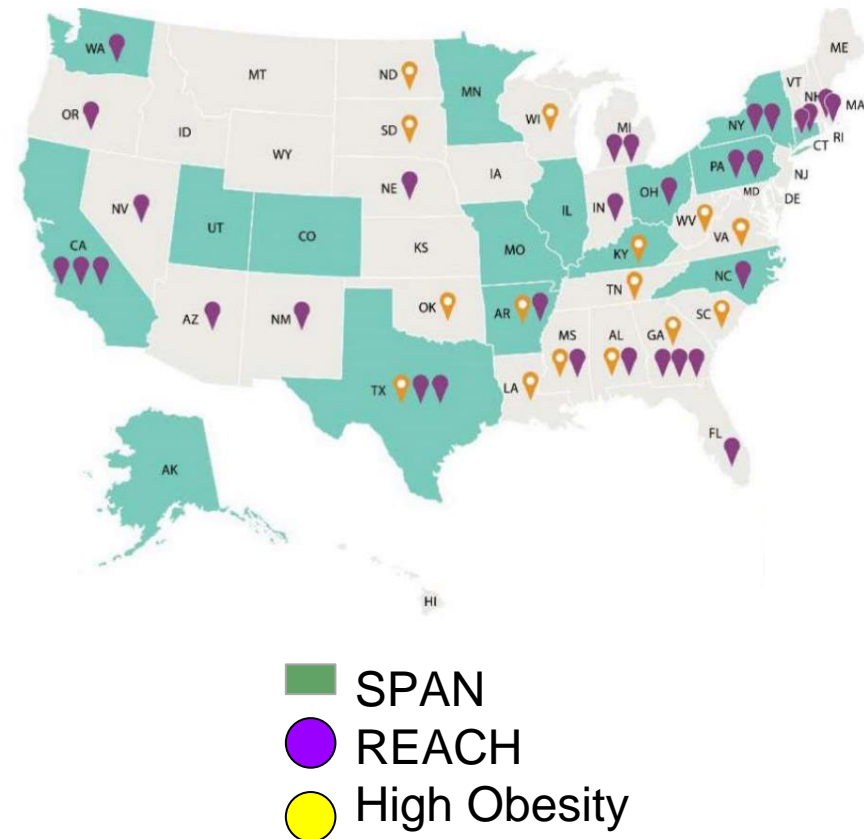
- State Department of Health

## High Obesity Program

- To work in counties that have more than 40% adults with obesity

## Racial and Ethnic Approaches to Community Health (REACH)

- To reduce health disparities among racial and ethnic populations with the highest burden of chronic disease



# Discussion

⇒ **Send us your questions**

⇒ **Follow up with us:**

⇒ **Roy Gothie [rgothie@pa.gov](mailto:rgothie@pa.gov)**

⇒ **Megan Wier [mwier@oaklandca.gov](mailto:mwier@oaklandca.gov)**

⇒ **Wendy Landman [wlandman@walkboston.org](mailto:wlandman@walkboston.org)**

⇒ **Caron Whitaker [caron@bikeleague.org](mailto:caron@bikeleague.org)**

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⇒ **General Inquiries [pbic@pedbikeinfo.org](mailto:pbic@pedbikeinfo.org)**

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# Take Action

- ⇒ **State DOTs and AASHTO members:** advance transportation health and equity research and evaluation through your state research program or AASHTO committee
- ⇒ **Planners, engineers, and others:** Join the ITE or TRB committees on Health and Transportation
  - <https://www.ite.org/technical-resources/topics/transportation-and-health/>
  - <https://sites.google.com/site/trbhealthandtransport/>