ULI Rose Center presents

Planning & Public Health

creating healthier communities through integrative practice
• **Welcome**

• ULI Rose Center
  – Who we are/what we do

• Webinar instructions

• Webinar
Mission:

“...to encourage and support excellence in land use decision making. By providing public officials with access to information, best practices, peer networks and other resources, the Rose Center seeks to foster creative, efficient, practical, and sustainable land use policies.”
How this webinar works:

• Webinar audio information:
  • Dial-in #: 866.404.3683
  • Conference code: 1496305939
  • All callers are muted during the presentation
    • To prevent any audio disruption, please mute your individual line by pressing *6. You can un-mute your line by pressing #6.

• To ask a question-
  • During the presentation, type your question into the Question or Chat box, the moderator will review and present your questions to the panelists.
  • There will be time for questions at the end of the presentation.
Promoting Health through Design

www.centerforactive design.org
What is Active Design?

Active Design = Designing our communities to make the healthy choice the easy choice
History of health and the built environment

100+ years ago, urban conditions in NYC were a breeding ground for disease epidemics

Over-crowding:
By 1910, the average density in lower Manhattan was 114,000 people/ sq. mi; two wards reached densities > 400,000. (Today’s density: 67,000/ sq. mi.)

Inadequate systems for garbage, water, and sewer, leading to pervasive filth and polluted water supplies.

Major epidemics:
Air/droplet-borne diseases:
TB

Water-borne diseases:
Cholera

Vector-borne diseases:
Yellow-fever
The design response

1842  New York’s water system established – an aqueduct brings fresh water from Westchester.

1857  NYC creates Central Park, hailed as “ventilation for the working man’s lungs”, continuing construction through the height of the Civil War

1881  Dept. of Street-sweeping created, which eventually becomes the Department of Sanitation

1901  New York State Tenement House Act banned the construction of dark, airless tenement buildings

1904  First section of Subway opens, allowing population to expand into Northern Manhattan and the Bronx

1916  Zoning Ordinance requires stepped building setbacks to allow light and air into the streets
The results: Infectious disease rates plummeted

Today, **chronic disease** accounts for 7 out of 10 deaths across the US.

In 2005, 133 million Americans – **almost 1 out of every 2 adults** – had at least one chronic illness.
Can design help address today’s health epidemics?

**THE 19th CENTURY:**
- Infectious disease
- 19th Century codes, planning and infrastructure as weapons in the battle against contagious disease
- These strategies were built into the city fabric, and they were effective

**THE 21st CENTURY:**
- Chronic Diseases, many of which are “Diseases of Energy”
- The emerging design solutions for health parallel sustainable design solutions
- Effective designs will have to be an invisible, pervasive, and inevitable part of life
Obesity Trends* Among U.S. Adults
BRFSS, 1985

(“BMI ≥30, or ~ 30 lbs overweight for 5’ 4” woman)

Source: U.S. Centers for Disease Control and Prevention
Obesity Trends* Among U.S. Adults
BRFSS, 1990

(“BMI ≥30, or ~ 30 lbs overweight for 5’ 4” woman)

Source: U.S. Centers for Disease Control and Prevention
Obesity Trends* Among U.S. Adults
BRFSS, 1995

("BMI ≥30, or ~ 30 lbs overweight for 5’ 4” woman)

Source: U.S. Centers for Disease Control and Prevention
Obesity Trends* Among U.S. Adults
BRFSS, 2000

(*BMI ≥30, or ~ 30 lbs overweight for 5’ 4” woman)

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Obesity Trends* Among U.S. Adults
BRFSS, 2005

(*BMI ≥30, or ~ 30 lbs overweight for 5’ 4” woman)

Source: U.S. Centers for Disease Control and Prevention
Obesity Trends* Among U.S. Adults
BRFSS, 2010

(“BMI ≥30, or ~30 lbs overweight for 5’ 4” woman)

Source: U.S. Centers for Disease Control and Prevention
People haven’t changed – but our environment has
If you go with the flow, you can become overweight or obese
Benefits of Physical Activity

Better Cognitive Function
Reduced Depression
Improved Self Esteem
Lowered Cardiovascular Risk Factors
Decreased Risk of Colon And Breast Cancers
Strengthened Bones

Academic Achievement
Stress Management
Prevention of Weight Gain
Weight Loss When Combined with Diet
Lowered Risk of Type-2 Diabetes
Lowered Risk of Falls by Improved Balance
Design and physical activity

Encouraging stair use & active transportation

- Just **2 minutes** (about 6 floors) of **stair climbing a day** burns enough calories to prevent average U.S. adult annual weight gain.

- Men climbing 20-34 flights of stairs per week have a **29% lower risk of stroke**.

- Just **15 minutes of cycling** (2.5 miles) twice a day burns the equivalent of 10 lbs per year.

- **Each hour spent in a car contributes a 6% risk in obesity** and chronic disease while each km walked contributes a 5% decrease in risk.
Design and physical activity

• Creating or improving access to places for physical activity can result in a **25% increase in number of people who exercise at least 3 times per week**
• Creating a more enticing and walkable public realm can result in a **161% increase in physical activity** (e.g. walking and biking)
Co-benefits: Environmental sustainability

Transportation

Play

Vertical circulation
Co-benefits: Universal accessibility

- Creating safer places to walk & for wheelchair travel
- Making elevators more available for those who need them
Co-benefits: Economic resiliency and social engagement

• Creating a more vibrant public realm supports economic and social health of communities, mental health of individuals
The Active Design Guidelines

- Origins at annual Fit City conferences
- Collaborators included City agencies, professional associations, private sector, academics
- The Centers for Disease Control and Prevention funded initial outreach efforts
- The Center for Active Design is now leading efforts to disseminate information about active design
  www.centerforactivedesign.org
Key concepts

Active Transportation

Active Recreation

Active Buildings

Healthy Food Access
Active Transportation

- Land use mix + development patterns
- Pedestrian environment
- Bicycle infrastructure
- Transit access
Active Recreation

- Parks, playgrounds, plazas
- On-site recreation
- Street closures
Healthy Food Access

- Supermarkets
- Farmers markets and produce stands
- Gardening opportunities
- Tap water access
Active Buildings

- Designed to encourage stair use
- Support the pedestrian realm
- On-site recreation and gardening
Active Buildings

- Designed to encourage stair use
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- On-site recreation and gardening
LEED Pilot Credit

New Construction | v2009
Design for active occupants
EQpc78 | Possible 1 point

Intent

This is a pilot credit. To use any pilot credit on your LEED project, be sure to register here. Documentation requirements and additional questions are listed below.

Improve the health of building users through physical activity while reducing environmental impacts.

Requirements

All projects: Meet the following requirement:
Buildings must have at least one main stair that enables occupants to travel between the building entrance floor(s), occupant's own destination floor and common use floors. Access to floors may be restricted by use of security devices, such as card keys, codes or other access devices.

AND

Include seven or more of the following features:

For staircase(s)*:

1. Classify all regularly occupied floors for re-entry, allowing all building users to have access to and from these floors. Service floors do not need access for all users.
2. Make accessible staircases visible from the corridor by either:
Case Study: Arbor House

LEED Platinum-Subject of Mt. Sinai Study about the Effects of Active Design on Obesity
Case Study: Arbor House

- Shift in the ground floor plan to make stairs more visible
Case Study: Arbor House

- Shift in the ground floor plan to make stairs more visible
Case Study: Arbor House

- Art and signage to promote stair use
Case Study: Arbor House

- Indoor and outdoor recreation spaces
Case Study: Arbor House

- Rooftop hydroponic farm – community supported agriculture
- Secure indoor bicycle storage
Thank you!

• Visit www.centerforactivedesign.org to download Active Design Guidelines for free, as well as other resources

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Active Living Hennepin County

- Partnership of cities, businesses, nonprofits, parks, MnDOT, Metropolitan Council and other organizations
- Convened by Hennepin County starting in 2006
  - most recent meeting was Monday – panel on bike parking to incentivize mode shift from cars
  - Vision, mission and guiding principles adopted in October, 2007
  - Active Living policies adopted in June, 2009
Active Living workshops

Workshops have helped make active living tangible for our partners and communities.

- Walking Workshop in St. Louis Park, March ‘09
- Biking Workshop in Robbinsdale, October ‘09
Active Living to Complete Streets

Complete Streets (CS) workshop held – Dec 2008
CS Resolution of Support – Feb 2009
CS policy development – Spring 2009
CS policy unanimously approved – July 2009
CS Task Force created – November 2010
Pedestrian and Bicycle Planning

Began in 2012 under CDC Community Transformation Grant
Drafted first ever county pedestrian plan – out for comments
Funding eight municipal bicycle and pedestrian plans
Kicking off update of county bicycle plan this month
New bicycle and pedestrian coordinator position
Health Impact Assessment: Bottineau Transitway

HIA: used to consider potential health effects that a proposed policy or project could have and how effects are distributed. We used the following methods on Bottineau:

• HIA Advisory Committee, interviews, focus groups, data, analysis from earlier Bottineau reports, literature review

• Bottineau HIA assessed six factors related to the transitway’s development that research has shown to impact health:
  – Physical activity
  – Housing+Transportation Costs
  – Employment
  – Education
  – Traffic Safety
  – Access to Healthy Foods
Key HIA Recommendations

• Conduct analysis to identify low-income and transit-dependent populations beyond ½ mile radius that could benefit from access to the line
• Continue to engage populations living in the corridor during future phases of light rail project
• Target growth in the station areas and implement zoning, parking requirements and building codes that encourage higher density, mixed-use development
• Incorporate bike and pedestrian infrastructure improvements into station area plans
• Preserve existing affordable housing and support the development of affordable and mixed-income housing
How HIA Findings Will Be Used

- “Deep” community engagement with vulnerable populations (new BCBS MN funding)
- Station-area planning (11 station areas)
- Transitway Development
- Help residents understand how the transitway and land use changes could impact them
- Alignment of health benefits and FTA New Starts criteria
A Word About Funding

- Funding may come from many sources, depending on how you imagine your work coming together
- Our funding sources have included: BCBS MN, MN Dept of Health, CDC, NACCHO, The Pew Charitable Trusts
- We’ve turned funding around to others in the form of mini-grants, bike racks, and other incentives
Final thoughts on Healthy Community Planning

- Work closely with elected officials and communities
- Write leadership into resolutions and policies
- Engage **multidisciplinary** staff and advocates
- Be creative to bring ideas and people together
For more information

- http://hennepin.us/activeliving
- http://www.hennepin.us/completestreets
- http://hennepin.us/pedestrianplan
- hennepin.us/bottineauhia
Incorporating Health in Regional Transportation Planning

Mary Beth Ikard, APR | Communications Director
Planning & Public Health: Creating Healthier Communities through Integrative Practice
June 20, 2013
Metropolitan Planning Organizations
How MPOs Work

- Conduit for Federal Transportation Dollars in Urban Areas
- Provide funding for roads, transit, greenways, bikeways and sidewalks
- Work with local governments to establish regional priorities (however, bike/pedestrian trips are local)
- Impact everyone in a region
What We Accomplished

Policy
- Scoring Criteria for Inclusion of Health in Evaluation of Transportation Projects

Funding
- Restructured Existing Funding Sources so More Money is Spent on Active Transportation

Data
- Regional Data Collection Effort to Provide Baseline Evidence for Policy Benchmarking
Growing Issues to Address

- Housing Choices
- Availability of Jobs
- Increasing Costs
- Longer Travel Times & Trip Lengths
- Quality of Life
- **Worsening Personal Health / Increasing Costs**
- Education
- Affordable and Healthy Foods
Making the Case for Health
Transportation and Obesity

Obesity/Vehicle Miles Traveled in U.S.

Sources: Centers for Disease Control – National Health and Nutrition Examination Survey/
U.S. DOT – Federal Highway Administration, Annual Vehicle Distance Traveled in Miles and Related Data
Three strategies provided for improving transportation in Middle Tennessee; respondents then asked to prioritize—

- **1st choice**: improve and expand mass transit options
- **2nd choice**: make communities more walkable & bike-friendly
- **3rd choice**: build new or widen existing roadways

2010 MPO Telephone Survey of 1100 Respondents across Middle Tennessee.
#1
A Bold, New Vision for Mass Transit

#2
Support for Active Transportation & Walkable Communities

#3
Preservation & Enhancement of Strategic Roadways

nashvillempo.org
A Vision for Future Active Transportation

Bikeways

Sidewalks
Food Access and Transportation

Tennessee Food Deserts

Food deserts are a composite measure of:
1. Poverty and social distress
2. Access to transportation
3. Density of grocery and food stores
4. Density of fast food, restaurants, bars, and cafeterias

nashvillempo.org
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 Urban STP Investment Strategy

70% to Location Specific Roadway Improvements
- Quality Growth and Sustainable Development – 15%
- Multi-Modal Options – 15%
- Health & Environment – 10%
- Safety & Security – 10%
- Congestion Management – 10%
- State & Local Support/Investment – 15%
- System Preservation & Enhancement – 15%
- Freight & Goods Movement – 10%
More Complete Streets

70% of adopted roadway projects include sidewalks, bicycle lanes, or shared-use lanes (up from 2%)
MPO’s Urban STP Investment Strategy

- 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
Transportation and Health Study

Transportation, Physical Activity and Health Data Collection and Analysis

Welcome! The Middle Tennessee Transportation and Health Study is sponsored by the Nashville Metropolitan Planning Organization, the Clarksville Urbanized Area Metropolitan Planning Organization, and the Tennessee Department of Transportation. If you have received a participation letter, please Start Here to begin the survey.

Every day, thousands of people move through the middle Tennessee region—in cars, on buses, by foot, on bikes. To plan for the projects of tomorrow, we need to understand how you travel today. Your participation in this important survey will help improve the future of transportation for all of us.
Champions and Partners

Residents/Workers in Mid TN
- Elected Officials
- Partners – Housing, Transit, Chambers of Commerce
- Showcasing other cities
- Public Health:
  - Centers for Disease Control
  - Tennessee Obesity Taskforce
  (www.EatWellPlayMoreTN.org)

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Questions?
Give us your Feedback!

• Email us – rosecenter@uli.org
• Complete our survey via Survey Monkey: https://www.surveymonkey.com/s/Planning_PublicHealth

Keep informed and learn more about our programs:

• Rose Center at: www.uli.org/rosecenter
• twitter       : @ULIRoseCenter
• Facebook       : www.facebook.com/ulirosecenter