



Comprehensive Plan Update

January 20, 2016

To: Community Advisory Committee

From: Jessica Berry, Transportation Planner

Re: Health Policy Changes from January 6, 2016 CAC meeting

I. OVERVIEW

This memo presents changes to the Health Policy that the Community Advisory Committee recommended at the January 6, 2016 meeting.

Text changes are highlighted with former text being deleted as strikeouts and new text being added as underlined.

A. HEALTH

Issue Summary:

Existing transportation systems in the US have been shaped by multiple policy inputs and decisions provided by planners, funding agencies and others at local, state, and national levels that have focused largely on building a system designed to move people and goods efficiently. An increasingly large body of research now shows that transportation decisions also directly and indirectly impact human health in multiple ways by influencing a wide range of "health determinants". Health determinants—also referred to as "social determinants of health" or "risk factors"—are features of the built, social, and natural environment that are known to impact an individual's risk of experiencing negative health outcomes (injury or illness). According to the American Public Health Association, "fifty percent of the leading causes of death and illness in the United States—traffic injuries, heart disease, cancer, diabetes, and respiratory illness—are preventable" because "these diseases have several risk factors that can be mitigated by transportation policies." The Baseline Report that was prepared for the Comprehensive Plan update contains existing conditions information about planning related health determinants and outcomes in different parts of Multnomah County.

Much of this research has also highlighted the fact that the benefits and burdens of transportation decisions has fallen unequally on different sub-groups within a community. In particular, the negative health impacts stemming from transportation systems have disproportionately fallen on low income and minority groups, as well as others who lack access to cars or the resources to choose where they live. As a result, many transportation decisions to date have often inadvertently supported or exacerbated health inequities. Health inequities are unfair and avoidable differences between socio-economic groups in the presence of disease,

¹ American Public Health Association. (2009). *At the Intersection Of Public Health And Transportation*. Washington, DC: American Public Health Association.

injury, or other health outcomes. For the public health sector, addressing equity means prioritizing the elimination of health inequities by addressing the root causes of inequity and related health outcomes. From a transportation planning perspective, this means ensuring that the benefits and burdens of the transportation system are equitably distributed, and prioritizing investments that address historical inequities and ensure that the transportation system provides all members of a community with the ability to safely and conveniently move about to meet their daily wants and needs.

As a result of the increasing awareness of the connections between transportation systems, health, and equity, more and more planners and policy-makers recognize that transportation plans provide an opportunity not just to improve mobility, but also to address historical inequities and improve the health and well-being of all the members of the communities they are designed to serve. An increasing number of state, regional, and local transportation plans are acknowledging these connections by including goals and metrics that mention both health and equity. Locally, this trend is evident in the inclusion of health and equity policies and goals in Metro's Regional Transportation Plan and in Clackamas County's recently updated TSP. In Multnomah County, the cities of Portland and Gresham are working on including similar policies and goals into their Comprehensive Plan and TSP updates.

While these policies are important in achieving County and community goals for health and equity, they must be balanced with a variety of other policies in the TSP and with the rural character and conditions in the non-urban portions of the County.

Policy: Ensure that the transportation system is designed to minimize negative health impacts and promote healthy behaviors and environments by:

A. Improving safety for all modes

- Strategies include:
 - 1. Lowering traffic speeds through speed limits, enforcement, and roadway design.
 - 2. Minimizing modal conflict by planning and building bicycle and pedestrian. networks that encourage travel on low-traffic streets or off-street trails.
 - 3. Identifying and addressing real and perceived high crash corridors or hot spots with high crash rates.
 - 4. Incorporating safety-related features and best practices when designing new facilities or renovating existing facilities.
 - 5. Ensuring that vulnerable groups such as youth, elderly, <u>low-income</u> and disabled are engaged in planning and design efforts.
 - 6. Supporting Safe Routes to School and other education and encouragement programs that teach people how to safely use the transportation system
 - 7. Developing a transportation safety action plan.
 - 8. Coordinating with land use planning for safe traffic control and parking at events and other peak use generators.
 - 9. Coordinating with other agencies such as ODOT when appropriate.

B. Increasing opportunities for physical activity by promoting active transportation modes (walking, bicycling, transit, and equestrian) and multimodal access to parks, trails, open space, and other recreational facilities.

- Strategies include:
 - 1. Building out multimodal transportation networks.
 - 2. Ensuring safe, convenient, multimodal access to parks, trails, open space and other recreational facilities and employment centers.

- 3. Supporting Safe Routes to School and other education and encouragement programs that teach and encourage people to safely use active transportation modes.
- 4. Partnering with the Multnomah County Health Department on health promotion and chronic disease prevention programs and initiatives that focus on increasing physical activity.

C. Ensuring multimodal access to health supportive resources such as healthy food retail, employment, affordable housing, and parks and recreation facilities

- Strategies include:
 - 1. Coordinating land use planning to ensure that such resources are easily accessible by multiple modes.
 - 2. Working with transit providers to ensure that service plans are coordinated with development.
 - 3. Working with transit providers to ensure that bicycle and pedestrian improvements support transit use.
 - 4. Ensuring site design guidelines and requirements provide and promote multimodal site access and circulation, and <u>appropriate</u> connections to surrounding lots and streets.

D. Reducing exposure to air, light, and noise pollutants

- Strategies include:
 - 1. Encouraging programs that reduce dependence on single occupant vehicle miles travelled and increasing use of electric and low emission vehicles.
 - 2. Encouraging bicyclists and pedestrians to use parallel low traffic streets where possible instead of high traffic roadways.
 - 3. Coordinating transportation and land use planning to avoid locating sensitive land uses near high traffic roadways. Sensitive land uses include schools, parks and playfields, community and senior centers, affordable housing, and other places where vulnerable groups such as youth, seniors, and people with low incomes spend significant amounts of time.
 - 4. Establishing vegetative buffers (trees and shrubs) along roadways to filter and reduce the air and light pollutants.
 - 5. Implementing anti-idling campaigns around schools, road construction zones, and other places where drivers tend to idle.
 - 6. <u>Using paving materials that are designed to minimize the production of road</u> noise.

E. Reducing exposure to noise pollution

- Strategies include:
 - 1. Encouraging bicyclists and pedestrians to use parallel low traffic streets where possible instead of high traffic roadways.
 - 2. Coordinating transportation and land use planning to avoid locating sensitive land uses near high traffic roadways. Sensitive land uses include schools, parks and playfields, community and senior centers, affordable housing, and other places where vulnerable groups such as youth, seniors, and people with low incomes spend significant amounts of time.
 - 3. Using paving materials that are designed to minimize the production of road noise.

F E. Working with Multnomah County Health Department staff to ensure that the TSP and related planning documents incorporate the findings and recommendations from the most recent versions of their Community Health Assessment and Community Health Improvement Plan.

- Strategies include:
 - 1. Having relevant health department staff serve on planning related technical and advisory committees.
 - 2. Having relevant planning staff participate in the development of the community health assessments and community health improvement plans.