Health and Transportation Partnerships: Agency Structures for Collaboration

PBIC Health + Transportation Webinar Series, Part 2

Sagar Shah  American Planning Association
Karma E. Harris  National Association of Chronic Disease Directors / Walkability Action Institute
Sarah Shaughnessy  Richmond City Health Department
Ryan Dusil  North Front Range MPO
Katie Guthrie  City of Loveland
Housekeeping

- Submit your questions
- Webinar archive: www.pedbikeinfo.org/webinars
- Live transcript: www.streamtext.net/player?event=HSRC
- Certificates and professional development hours
- Follow-up email later today
- Review previous episodes and sign up for upcoming sessions
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
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
Meet the Panel

Sagar Shah
American Planning Association

Karma E. Harris
National Association of Chronic Disease Directors, Walkability Action Institute

Sarah Shaughnessy
Richmond City Health Department

Ryan Dusil
North Front Range MPO

Katie Guthrie
City of Loveland
APA's Planning and Community Health (PCH) program provides tools, educational materials, technical support to members so they can integrate health and equity into planning practice at all levels.
DOMAINS FOR PLANNING HEALTHY COMMUNITIES

1. Active Living
   - Active transportation, Recreation, Traffic safety

2. Healthy Food System
   - Access, Production

3. Environmental Exposures
   - Air quality, Water quality, Soil contamination

4. Emergency Preparedness
   - Natural hazards, Climate change, Infectious disease

5. Social Cohesion
   - Green infrastructure, Housing and community development, Public safety
TRANSPORTATION AND HEALTH NEXUS

- Air pollution
- Traffic crashes
- Physical activity

Equity
EXAMPLE OF PROJECTS...

• A Research Roadmap for Transportation and Public Health
  • Develop 10-year strategic research roadmap

• Guide to Creating Everyday Destinations
  • Help planners, public health, and allied professions create destinations in small communities
INVOLVED IN ONGOING DISCUSSION ON PRACTICE AND RESEARCH

• Physical Activity Policy Research and Evaluation Network

• Physical Activity Alliance’s Standing committee for the Transportation, Land Use, and Community Design Sector

• National Academy of Science’s Community Support for Physical Activity Working Group

• TRB Committee on Transportation and Health
Promote Healthy Communities
Joint Call to Action


THE IMPERATIVE FOR HEALTHIER PLACES
Where we live, work, and play has a major role in shaping our health. Rates of chronic diseases attributable to the design of the built environment—including obesity, diabetes, heart disease, and asthma—are on the rise. The built environment also has direct and indirect impacts on mental health, including depression and anxiety. This is true for everyone, but is felt even more among vulnerable populations, who are less likely to have access to nutritious, affordable food and opportunities for physical activity and are more likely to be exposed to environmental pollutants and circumstances that increase stress.

Addressing growing health challenges and inequities requires new partnerships and collaboration between health professionals and public and private sector partners. To address health-related needs from the ground up, and to promote healthier communities at every stage of the project, a comprehensive and thoughtfully designed process is critical.

We, the signatory organizations, challenge our members—comprising architects, urban planners, landscape architects, developers, engineers, and professionals from public health, parks, and green building—to do the following:

1. Advocate for and adopt voluntary codes, policies, and guidelines that promote physical and mental health for people of all ages, abilities, and incomes.
2. Implement planning and development solutions that improve opportunities for physical activity, access to healthy food, healthy indoor and outdoor environments, and social connectedness.
3. Establish internal organizational policies that promote health within workforces, including workplace safety and wellness programs.
4. Work with national organizations to integrate health into certification programs and industry standards for the design and operation of buildings and communities.

SHARE EXPERTISE:
COMMUNICATE THE IMPORTANCE OF HEALTH

- Share stories about successful health-promotion efforts and emphasize health as part of project marketing campaigns.
- Articulate opportunities to improve health and social equity as it relates to your profession when engaging with colleagues, clients, and the public.
- Participate in and collaborate on public awareness and education campaigns to promote healthy communities, including campaigns related to sustainability and community resilience.
- Join local advisory boards and nonprofit organizations to support efforts to build or establish health-promoting civic investments, including those in parks, schools, and libraries.
American Planning Association
Making Great Communities Happen

Sagar Shah, PhD, AICP
sshah@planning.org
NACDD’s Walkability Action Institute

Karma E. Harris, MSPH
October 15, 2020

UNC Highway Safety Research Center
Health and Transportation Partnerships: Agency Collaboration/HiAP Approaches
Greetings from NACDD!

Karma E. Harris, MSPH
→ Public Health Consultant
→ Walkability Lead
→ Inclusive Healthy Communities Lead
→ Triathlete
→ If communities are made for all of us, then none of us are left out
<table>
<thead>
<tr>
<th>State Health Departments</th>
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<tr>
<td>(7,000+ members)</td>
</tr>
<tr>
<td>Disease Specific and Addressing Risk Factors</td>
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<tr>
<td>Staff Headquarters in Decatur, GA</td>
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<td>SME Consultants Remotely Located</td>
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<table>
<thead>
<tr>
<th>All Things Chronic Disease Prevention</th>
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<tr>
<td>Regions and Local Communities</td>
</tr>
<tr>
<td>(120 since 2008)</td>
</tr>
<tr>
<td>Walkability and Healthy Communities</td>
</tr>
<tr>
<td>42!!!</td>
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Walkability Action Institute

With funding support and partnership with the CDC Division of Nutrition, Physical Activity, and Obesity (DNPAO)
STEP IT UP!

Everyone can help make our communities more walkable.

**Media:**
Spread the word about walking and creating safe and easy places to walk.

**Worksites:**
Implement workplace policies and programs to promote walking.

**Parks and Recreational and Fitness Facilities:**
Provide access to green spaces and recreation areas.

**Individuals:**

STEP IT UP!

Surgeon General's Call to Action to Promote Walking and Walkable Communities

**Health Care Professionals:**
Talk to patients about physical activity.

**Volunteer & Nonprofit Organizations:**
Offer free or low-cost community walking programs.

Step it up! Help make your community more walkable. Learn how by visiting www.SurgeonGeneral.gov
What are Built Environment Intervention Approaches?

Built environment intervention approaches to increase physical activity create or modify environmental characteristics in a community to make physical activity easier or more accessible. Intervention approaches must be designed to enhance opportunities for active transportation, leisure-time physical activity, or both. The CPSTF recommends intervention approaches that include one or more components from each of the boxes below.

### Built Environment Approaches in Combination by Intervention Type

<table>
<thead>
<tr>
<th>Pedestrian and Bicycle Transportation System Intervention Component</th>
<th>Land Use and Environment Design Intervention Component</th>
</tr>
</thead>
<tbody>
<tr>
<td>o Street pattern design and connectivity</td>
<td>o Mixed land use</td>
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<tr>
<td>o Pedestrian infrastructure</td>
<td>o Increasing residential density</td>
</tr>
<tr>
<td>o Bicycle infrastructure</td>
<td>o Proximity to community or neighborhood destinations</td>
</tr>
<tr>
<td>o Public transit infrastructure and access</td>
<td>o Parks and recreational facility access</td>
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</table>
ACTIVE PEOPLE, HEALTHY NATION SM
CREATING AN ACTIVE AMERICA, TOGETHER
ALL communities and states should be designed to support physical activity and active transportation for ALL people.
What We Already Know

• Easy and affordable for most
• **Walkability = Moveability**
• Active = Accessible and inclusive for all
• Healthier, happier, vibrant
• We get the why, but what about the HOW?

**What We Already Know**
Premise of the WAI

Transition from the “WHY” of why improving walkability is important...

Walkability Action Institute

...to the “HOW” of how to put walkability changes into motion...
Making states and communities more healthy, walkable/moveable, and active is NOT just a public health problem. It involves our friends in transportation, planning, and other diverse groups.
Interdisciplinary Approach

Public Health

Transportation

Planning

Elected Officials

Public Transit and Housing

Parks and Recreation

Economic/Community Development

Others???
(Advocacy, education, etc.)

Walkability
Interdisciplinary Approach

- Public Health
- Transportation Planning
- Elected Officials
- Economic/Community Development
- Parks and Recreation
- Public Transit and Housing
- Others???
  (Advocacy, education, etc.)

Walkability

SPAN Dept. of Health “State Expert Advisor”

State DOT “Co-State Expert Advisor”

Elected Officials

Planning
Year 1: State/Intra-State Regional Teams

Year 2: MPO Regional Teams

Year 3: MPO Regional Teams

Year 4: MPO Regional Teams

Year 5: MPO Regional Teams

Year 6: MPO Regional Teams
WAI Project Deliverables

Interdisciplinary Team
- Five-to-eight member teams
- RFA process for travel stipend
- Orientation Call
- “Team Lead”

Pre-Course Webinar
- Course Overview and Expectations

Walkability Action Institute
- 4 days
- Applied learning
- Team action planning

Post-Course Webinar
- Action Plans Due
- CoP
- Progress Reporting
Learning Methods

- Traditional PPT lecture
- "Speed Dating" topic-specific roundtable discussions
- Discipline roundtable discussions
- Expert panels
- Team action planning time
- Applied outdoor learning (walk audits, scavenger hunts)
- Paired team discussions
- Pre- and post-course activities (bike tours, happy hours, walks, drawing sessions, etc.)
Course Content

- Walkability/Moveability
- Built design
- Interdisciplinary approaches and roles
- Arterials
- Road diets
- Traffic calming
- Beautification
- Functionality
- Place-based approaches
- Gentrification
- Disenfranchisement
- Social and environmental justice
- Equality vs equity
- Private sector interests
- Real estate
- Development
- Mixed Use
- Land Use

- Safe streets
- Complete Streets
- Safe routes to school
- Active transportation
- Universal design
- ADA transition
- Retrofitting sprawl
- Urban design
- Public transit
- Transit oriented development
- Tactical urbanism and pop-up demonstration projects
- Crime prevention through environmental design
- Changing the transportation planning and engineering paradigm
- Age friendly communities
- Active community environments
- Case studies
- COVID-19
- Racism
Equity Overlap

• Walkability/Moveability
• Built design
• Interdisciplinary approaches and roles
• Arterials
• Road diets
• Traffic calming
• Beautification
• Functionality
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• Case studies
• COVID-19
• Racism
Meet the Team …

(DREAM TEAM Course Faculty)

Phil Bors, MPH
Charles Brown, MPA
Cathy Costakis, MS
Karin Korb, MS, CCF
Melissa Kraemer-Badtke
Ian Lockwood, PE
Hugh Morris, AICP, LEED, MA
Mark Fenton, MS
Our Goals

1) **Know more** when you leave than when you arrived
2) **Have fun** ☺
3) **Best. Course. Ever.**
WAI Outcomes
WAI Successes:
Unofficial Updated Data

- 81 New Policies/Plans
- 48 New Systems Changes
- 195 New Environmental Changes
- 346 New PSE Outcomes
- 7 New Tools
- 11 New Resources

- 688 New TOTAL OUTCOMES
- 87 Additional Outcomes in Progress
- $267,257,236!!!
- $1,350,000 CDC Funds
- 198:1 Project ROI
- 46,966,581 TOTAL REACH
Success Spotlights
Virginia and Colorado
VIRGINIA State Example

- **Two** Policy/Plan Changes ...
  - Facilitated bike/ped/AT policy adoption in two local locations
- **20** Non-PSE Outcomes ...
  - Developed and **SUSTAINED** statewide WAI model
- **591,015** Virginians
- **Current Focus:**
  - 3rd WAI cohort underway
  - Statewide Active Transportation Policy/Plan Scan with DOH/DOT
- Leveraged **$294,861** ...
  - (we gave them $0)
VIRGINIA State Example

Richmond, VA

- **Sarah Shaughnessy, Team Lead**
- Year 4 Cohort – 2018
- Complete Streets work:
  - Coalition in place
  - Vision Zero score card
  - Complete Streets recommendations and eventual development of regional toolkit
- Bike/Ped Master Planning
COLORADO State Example

• **FIVE** Policy/Plan Changes ...
  – Statewide policy directives on Complete Streets and Ped/Bike accommodations on all state highways (n=2)
  – SRTS strategic plan
  – Executive order for access and equity to parks
  – MOU among six state agencies working together, including DOH

• **Two** Systems Changes ...
  – Integrating active transportation within two state DOH divisions (Injury and Violence Prevention; Tobacco)

• **Eight** Non-PSE Outcomes ...
  – Economic impacts study
  – ”Main Street” workshops
  – Rural walkability workshops

• **One new developed resources ...**
  – State guidebook on designing streets – *Colorado Downtown Streets*
    • won Congress for New Urbanism award on regulation reform

• **Three Additional Outcomes Still in Progress...**

• **5,800,000** Coloradoans

• Leveraged **$34,085,000** ...
  – We gave them $6,770
  – 5,035:1 project ROI
COLORADO State Example

Larimer/Weld Counties, CO

• **Ryan Dusil (Team Lead) and Katie Guthrie**
• Year 5 Cohort – 2019
• Walk Audits and Walk Audit Program:
  – Engagement, prioritization, and recommendations for bike/ped built environment changes
• Equity recommendations for project prioritization
  – Creating bike/ped “set aside” $’s for future projects
• Built Environment Leadership Team
Thank You!!!

Karma Harris, MSPH
Walkability and Healthy Communities Lead,
NACDD
kedwards_ic@chronicdisease.org
904–608–8315
Getting Health in All Policies

Sarah Shaughnessy,
Richmond City Health Dept.
October 2020
What is Health in All Policies?

"Health in All Policies is an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts, in order to improve population health and health equity."

- WHO
HiAP requires an understanding of

Trends
How have outcomes changed over time in specific geographic locations?

Root causes
What are the drivers of poor health outcomes? What are the root causes of those outcomes?

Interventions
In what ways can we intervene to address the causes of poor health outcomes as they related to the social determinants of health?

Collaboration
Given its complexity and interrelatedness, what partnerships are needed to be effective in this work?
Traditional Approach

Vulnerable populations
Single factor/social problem
Focus on lifestyle
Risky behavior
Risk assessment
Find a cure
Intervention/treatment

HiAP Approach

Oppressed populations
Systems focus
Social responsibility
Cases of risky conditions
Alternatives assessment
Find a cause
Systemic change
Richmond: A Tale of 2 Cities
Diabetes Prevalence
No Vehicle Access
Urban Heat Vulnerability
Crash Risk & Health Opportunity
Historic Redlining
# Social Determinants of Health

## ECONOMIC STABILITY
- Employment
- Income
- Expenses
- Debt
- Medical Bills
- Support

## NEIGHBORHOOD AND PHYSICAL ENVIRONMENT
- Housing
- Transportation
- Safety
- Parks
- Playgrounds
- Walkability

## EDUCATION
- Literacy
- Language
- Early Childhood Education
- Vocational Training
- Higher Education

## FOOD
- Hunger
- Access to Healthy Options

## COMMUNITY AND SOCIAL CONTEXT
- Social Integration
- Support Systems
- Community Engagement
- Discrimination

## HEALTHCARE SYSTEM
- Health Provider Availability
- Provider Linguistic and Cultural Competency
- Quality of Care

## HEALTHY OUTCOMES
- Mortality
- Morbidity
- Life Expectancy
- Health Care Expenditures
- Health Status
- Functional Limitations

## Percentages
- 10% Healthcare
- 30% Genetics
- 20% Social/Env
- 30% Ind Behavior
Impacting Health Outcomes

- Counseling & Education
  - Counseling to be physically active; healthy eating education
- Clinical Interventions
  - Rx for high blood pressure, high cholesterol, diabetes
- Long-lasting Protective Interventions
  - Immunizations, brief intervention, cessation treatment, colonoscopy
- Changing the Context to Make Healthy Decisions the Default
  - Fluoridation, 0g trans fat, iodization, smoke-free laws
- Socioeconomic Factors
  - Poverty, education, housing, inequality
Mayor Stoney announces ordinance to build five new parks in Richmond's Southside

Due to disproportionate impact, Black and brown communities have high need for walkable green spaces.
Ginter Park
Elementary School
Walkabout Report Summary

A community-based Safe Routes to School infrastructure assessment and walkabout study of the school environment to identify infrastructure, safety and community barriers to students walking and biking to school - conducted on September 11th, 2017.

The Ginter Park Elementary School (GPES) walkabout included parents, students, staff from Better Housing Coalition (BHC), the GPE Community in Schools Coordinator (CISC), Sports Backers, Northside YMCA, Richmond City Health District (RCHD), Fit4Kids, Richmond Police Department (RPD), Department of Public Works (DPW) and Virginia Department of Transportation (VDOT).

198 students, or about 65% of the GPES student population, live within one mile of the school. 126 students, or about 89% of the GPES student population, live within one mile of the school. However, the majority of students take the school bus or are driven by a parent.

District Level Recommendations

Certain policy recommendations could be tested at GPES then implemented on a district-wide basis. Implementing these policies requires a concerted effort from RPS, RCHD, RPD, community members, PTA/PTO, VDO/VP, City Council, Richmond City School Board, and the SRTS Coordinator.

1. Develop a Crossing Guard program that allows both hired and volunteer crossing guards to serve schools.
2. Develop a district wide travel plan to bring SRTS to all schools and integrate pedestrian and biking safety education into curricula.
3. Lower speed limits in school zones during student travel hours to 15 mph with signage and limited enforcement.
4. Create special low-speed zones around schools that connect with other public pedestrian friendly areas.
5. Create district level SRTS Parent and Youth Councils.

6. Authorize GRTC to provide free bus passes to elementary and middle school students.

Figure 1: Modes of Transportation

RICHMOND CITY
HEALTH DISTRICT
Richmond Network

As the center of the metropolitan area, Richmond has the most developed bicycle and pedestrian network in the region.
### 2. Consider the Impact
Select the factors the project or policy may affect. A project or policy may impact many factors or just one.

<table>
<thead>
<tr>
<th>Factors that contribute to health equity</th>
<th>Check all that apply</th>
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<tbody>
<tr>
<td>Access to healthy food</td>
<td></td>
</tr>
<tr>
<td>Access to safe, affordable, housing for all people</td>
<td></td>
</tr>
<tr>
<td>Supportive neighborhoods/social support/social capital</td>
<td></td>
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<tr>
<td>Healthy indoor and outdoor places</td>
<td></td>
</tr>
<tr>
<td>Access to safe, clean, and quality indoors or outdoor spaces, such as parks, trees, and playgrounds</td>
<td></td>
</tr>
<tr>
<td>Early childhood development services and community supports</td>
<td></td>
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<tr>
<td>Education that provides high quality and culturally appropriate education for each student</td>
<td></td>
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<tr>
<td>Job training and jobs that provide all residents a livable income</td>
<td></td>
</tr>
<tr>
<td>Community economic development that supports local homes, businesses, buildings and land</td>
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</tbody>
</table>
Social policy is health policy

Address the cause, not the symptoms

Work for health in *each* policy to achieve health in *all* policies
Thank you!

Sarah Shaughnessy, MPH, MCRP
Built Environment & Health Specialist
Richmond City Health Dept.
sarah.shaughnessy@vdh.virginia.gov
Interagency Collaboration in Northern Colorado: Health and Transportation

Katie Guthrie, AICP
Senior Transportation Planner
City of Loveland, Colorado

Ryan Dusil
Transportation Planner II
North Front Range Metropolitan Planning Organization (NFRMPO)
The Northern Colorado (NoCo) Bike & Ped Collaborative

• Began in 2008 as:
  “...an ad hoc collaborative representing jurisdictions, agencies and community organizations in Weld County that focuses on advancing and coordinating the connectivity of non-motorized trails between jurisdictions, and is an advocate voice for the education of trail use for recreation, transportation, and tourism purposes...”

• Meeting regularly since ~2014
  • Expanded in geography and disciplines represented
  • Broadened focus to the overall bicycle and pedestrian network

• No formal charter or funding mechanism
Northern Colorado (NoCo)
Representation – Disciplines and Sectors

Listserv of 107 members, average meeting size of 15-20 people

• Cities / Towns / Counties
  • Planning
  • Public Health
  • Parks and Recreation
  • Natural Areas / Open Spaces
  • Engineering / Public Works
  • Trail Authorities
  • Elected Board or Council Members
  • Citizen Advisory Board Members

• Non-Profit Organizations
  • Local and State Bicycle Advocacy
  • Land Trusts

• State Agencies
  • Colorado Department of Transportation (CDOT)
  • Colorado Parks and Wildlife (CPW)

• NFRMPO Staff

• Others
  • Colorado State University (CSU)
  • School districts
  • “Concerned Grandfathers”
  • Planning and Engineering Consultants
  • Disability Advocates
Relationship with the NFRMPO
Group Roles – and their connection to HiAP

2008

• Stewarding the vision for regional trail connectivity
• Coordinating local implementation of these trails
• Sharing experiences, best practices, and data related to bike/ped planning and implementation
• Organizing, hosting, and/or promoting conferences, workshops, trainings, and celebrations
• Guiding and implementing efforts the NFRMPO’s Non-Motorized Plan
• Scoring applications and recommending Transportation Alternatives Program (TAP) grant awards for the NFRMPO Call for Projects and permanent bike/ped counters
• Advising agencies on project scope and details
• Recommending changes to the NFRMPO Call for Projects to improve health, equity, and safety considerations

Informal

Formal

2020
Special Events / Initiatives

2014 – NoCo Leaders’ Ride (*Loveland to Fort Collins*)
2015 – NoCo Bike & Walk Conference (*UNCO in Greeley*)
2017 – Bicycle Friendly Driver and Safe Routes to School Training (*Windsor*)
2017 – Infrastructure Audit Training (*Loveland Biking, Walking, and Transit*)
2018 – NoCo Leaders’ Ride (*Fort Collins to Loveland*)
2019 – **NACDD Walkability Action Institute (Decatur, GA)**
2019 – Berthoud Walking Audit (*Berthoud*)
2020 – CDPHE Quick Win Mini Grants (*Severance, Greeley, Loveland, Berthoud*)
2020 – Virtual Walking Audit Training (*Virtual*)
2021 – Severance Walking Audit (*Severance*)
2021 – Berthoud Biking Audit (*Berthoud*)
2021 – NoCo Leaders’ Ride (*Windsor to Eaton*)
Keys to Our Success

• Open and fluid “membership”
• Continuously plugging into regional planning processes
• Interdisciplinary Leadership Team
  • Establish roles, but don’t overcommit anyone
  • Must include NFRMPO, public health, and at least one other planning or transportation representative
  • Shared administrative responsibilities
• Periodic visioning sessions
  • 2019 Walkability Action Institute – Action Plan
  • Facilitated Discussions on mission, vision, goals, objectives, and operating principles
• If it ain’t broke, don’t formalize it
  • Strive for consensus decision making
  • Develop basic operating principles
The Built Environment Leadership Team (BELT)
Built Environment Leadership Team (BELT)

History

• Previous local effort: 2006-2016 Healthy Eating Active Living (HEAL) work done by CanDo through UCHealth and LiveWell Colorado

• Current effort: BELT since October 2016

• BELT is facilitated by Larimer County Department of Health and Environment, Built Environment Program (BELT is 1 of 3 programs)

• BELT is funded by Colorado DPHE through a CCPD grant (until June 30, 2021)

• Initial BELT membership quickly developed as a result of existing momentum, awareness and support created by 10 yrs. of CanDo
Built Environment Leadership Team (BELT) Membership

- BELT has multidisciplinary representation from across Larimer County
- Twelve members currently
  - Cities of Fort Collins and Loveland
  - Larimer County (3 different departments)
  - North Front Range Metropolitan Planning Organization
  - Community-based organizations (housing, health care, higher education)
  - Advocacy Organizations (bicycle, non-profit)
- Some transition over the past 4 years in terms of representation, but overall a continuous team
- A comprehensive recruitment strategy was developed and has been executed successfully when needed
Built Environment Leadership Team (BELT) Statement of Purpose

• BELT collaboratively works to educate, influence & promote health and equity in policy and planning throughout Larimer County by:
  • Serving as a regional connector, collaborator, and strategic partner to implement health and built environment initiatives in Larimer County
  • Leveraging expertise to create a coordinated response to support the inclusion of health and built environment language into proposed plans and policies in Larimer County
  • Creating a sustainability plan that allows this collaborative effort to live beyond the scope of the Cancer, Cardiovascular and Pulmonary Disease (CCPD) grant.
Built Environment Leadership Team (BELT) Role in the County

• BELT is a coordinating voice that builds understanding and awareness around health and the built environment
  • Advisory Role as plans and policies are being updated
  • Educator Role to explain interrelatedness of health, planning, transportation
  • Convener Role to support regional learning through workshops & webinars
  • Technician Role to assistance with implementing best practices

• Letters of Support for plans and policies that incorporate specific language related to health and the build environment
  • Four letters in 2020 with more pending
County Built Environment Program (BEP) Action Items towards HiAP

• **Strategic Plan for BEP** (six long-term objectives)
  • Develop a shared vision for a healthy Larimer County
  • Engage and inform more policy makers and organizational leaders
  • Develop public awareness campaign about BEP and BELT
  • Continue to build trust with the community through action
  • Continue to support BELT’s sustainability plan
  • Seek/expand sustainable funding for BEP
Built Environment Leadership Team (BELT) Action Items towards HiAP

- **Sustainability Plan for BELT** (six near-term objectives)
  - Formalize enduring membership
  - Maintain/expand membership diversity
  - Facilitate 10 Leadership Team meetings/year
  - Increase collaboration through a shared calendar
  - Update and expand built environment communication materials as needed
  - Seek permanent funding
Interagency Collaboration in Northern Colorado

**NoCo Bike & Ped Collaborative**
- Fluid membership
- 107 member listserv
- 15-20 at meetings
- Established in 2008
- No formal funding

**Built Environment Leadership Team**
- Formal membership
- 12 Members
- Established in 2016
- Funded by CCPD grant

**Diverse backgrounds and multidisciplinary professionals**

**Plans and Policies related to Active Transportation**

**Health Outcomes in Northern Colorado**
Discussion

⇒ Send us your questions

⇒ Follow up with us:

  ⇒ Sagar Shah  sshah@planning.org
  ⇒ Karma E. Harris  kedwards_ic@chronicdisease.org
  ⇒ Sarah Shaughnessy  sarah.shaughnessy@vdh.virginia.gov
  ⇒ Ryan Dusil  rdusil@nfrmpo.org
  ⇒ Katie Guthrie  katie.guthrie@cityofloveland.org
  ⇒ General Inquiries  pbic@pedbikeinfo.org

⇒ Archive at  www.pedbikeinfo.org/webinars
Health and Transportation

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#PBICWebinar
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/