

SHARED SPACES & HEALTH EQUITY

LESSONS FROM A PANDEMIC

A field scan by **Smart Growth America** | May 2022



Prepared with support from the Centers for Disease Control and Prevention (CDC)
as part of the Active People, Healthy NationSM Initiative



National Complete
Streets Coalition

Who we are

Smart Growth America envisions a country where no matter where you live, or who you are, you can enjoy living in a place that is healthy, prosperous, and resilient. We empower communities through technical assistance, advocacy, and thought leadership to realize our vision of livable places, healthy people, and shared prosperity. Learn more at www.smartgrowthamerica.org.

The National Complete Streets Coalition, a program of Smart Growth America, is a non-profit, non-partisan alliance of public interest organizations and transportation professionals committed to the development and implementation of Complete Streets policies and practices. A nationwide movement launched by the Coalition in 2004, Complete Streets is the integration of people and place in the planning, design, construction, operation, and maintenance of transportation networks. Learn more at www.completestreets.org.

Acknowledgments

The primary authors of this report were Anushka Thakkar, Thriving Communities Program Associate; and Martina Guglielmono, Economic Development Program Manager. Stephen Lee Davis, AVP for Transportation Strategy, Rayla Bellis, Director of Thriving Communities, Jeri Mintzer, AVP for Economic Development, Eric Cova, Director of Communications, and Helen Hope, Communications Manager, provided edits. Martina Guglielmono did the report layout.

Smart Growth America would like to thank our key informants for their time, insights, and contributions as we developed this field scan – Bill Nesper, Executive Director, League of American Bicyclists, Dara Baldwin, Director of National Policy, Center for Disability Rights, Michelle

Lieberman, Consulting and Program Support Director, Safe Routes Partnership, Mike McGinn, Executive Director, America Walks. They were instrumental in helping scope and identify key priorities for the field scan as well as providing valuable feedback on the draft report.

This field scan was supported by the Centers for Disease Control and Prevention under cooperative agreement OT18-1802 supporting the Active People, Healthy NationSM Initiative. Active People, Healthy NationSM is a national initiative led by the CDC to help 27 million Americans become more physically active by 2027. Learn more: <https://www.cdc.gov/physicalactivity/activepeoplehealthynation/index.html>”.



Slow street in Harsenville, NY | Picture by NACTO

Share The Road
Do Not Enter
Except Local Traffic
5MPH

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EXECUTIVE SUMMARY

COVID-19 catalyzed new approaches to active transportation and public space

In early 2020, we faced a nearly unprecedented global pandemic following the outbreak of COVID-19. To prevent the spread of the virus, municipal and state governments put in place new guidelines and restrictions that partially or fully closed businesses, restaurants, public facilities, parks, trails, and other gathering spaces. A large portion of the population adjusted their lifestyle to do most everyday activities from home (including working, learning, shopping, and socializing), though millions of essential workers or employees whose jobs did not permit the same flexibility kept riding on pared-back transit service or tried to find other ways to get around.

With residents clamoring for more open space—whether to get around, exercise, or simply enjoy the day—many cities began to experiment with reallocating street space and other shared outdoor spaces to accommodate the growing waves of people trying to walk, bike, use micro-mobility services, or move with an assistive device like wheelchairs or crutches.¹ Their approaches ranged from policy creation and regulatory modifications to tailored changes and investments in programs and infrastructure.

Activity-friendly public spaces and more diversified transportation networks became critical components of community life during the COVID-19 crisis, not only to access essential goods and services like groceries, healthcare, and jobs, but also as a mechanism to protect physical and mental health in face of an unceasing and uncertain global crisis.

“The proliferation of street-space reprogramming to accommodate retail, outdoor dining, and physical activity; temporary transit lanes and other demonstration projects; and pop-up testing and vaccination sites in response to the COVID-19 pandemic are just a few examples that demonstrate local governments’ ability to deliver low-cost, quick-implementation strategies to support the community’s ever-evolving needs.”

Anushka Thakkar, *Thriving Communities Associate, Smart Growth America*

1. Refer to *Glossary* section for definition of “shared spaces”

Although the strategies cities used varied from place to place in terms of implementation, the vast majority of local-level interventions focused on the design and use of streets sought to prioritize the pedestrian experience. For example, many cities opted to close certain streets to all motor vehicles in efforts to provide more and safer space for walkers, bikers, and other active travelers. Another common goal was to create or enhance open spaces for people to socialize and spend time outdoors while safely social-distancing; some cities closed down parking lanes—and even entire traffic lanes—to widen sidewalks and add space for outdoor dining. A survey of 130 American mayors conducted by Boston University’s Initiative on Cities found that 92 percent of cities established some kind of pedestrian-focused outdoor-dining program by summer 2020—only a few months after most of the country shut down.² Although New York City is a one-of-a-kind example in virtually every way, its accomplishment of increasing cycling rates by over 50 percent within the first few months of the pandemic by expanding the city’s bike lane network is still worth highlighting.³



Shared street in Toronto, Ontario | Picture by NACTO

2. Boston University Initiative on Cities. (2020). Menino Survey Of Mayors: Urban Parks And The Public Realm: Equity & Access In Post-Covid Cities.

3. Reckley, W. (2020, April 7). Active Transportation in the Era of COVID-19. National Center for Mobility Management. Retrieved February 23, 2022, from <https://nationalcenterformobilitymanagement.org/blog/active-transportation-during-covid-19/>

The need for more equitable solutions

Choices about transportation play an important role in building and maintaining healthy communities. Our health is determined by a number of factors including where we are born, grow up, and live, as well as our work, age, and how we get from one place to another. The Centers for Disease Control and Prevention’s (CDC) Active People, Healthy NationSM initiative is rooted in the premise that building active and walkable communities can support more active lifestyles, reducing the risk of chronic diseases and creating more cohesive communities. Improving the design of communities by increasing access to what the CDC calls “activity-friendly routes to everyday destinations” involves connecting routes such as sidewalks, trails, bicycle lanes, and public transit to important daily destinations like grocery stores, schools, worksites, libraries, parks, or health care facilities.

The COVID-19 pandemic laid bare pre-existing inequities in our systems, from healthcare, to transportation, to food access, to quality public spaces, and much more. Many threats that were prevalent before this health crisis were also exacerbated, like overwhelming energy and housing cost burdens, unsafe streets, a lack of adequate transportation options, and worse access to fresh food in communities with high concentrations of lower-income and racial-minority households. A 2021 analysis of 14 states’ public health monitoring systems by the University of Utah found that COVID-19-associated hospitalization rates in the United States were highest in high-poverty census tracts, but rates among Black and Hispanic persons were high *regardless of poverty level*.⁴

In this document, the second part of Section I: Community Design and Public Health (see page 9) covers common barriers that emerged during experiments with street and public space, particularly around inequitable outcomes. The actions and lessons learned in Section II are the product of a field scan conducted through a mix of academic and open data sources, local news and publications, conversations with peer thought leaders, and guidance from community advocacy organizations over a three-month period (March-June 2021), specifically meant to illustrate approaches to these barriers in Section I.⁵

“These improvements can help reduce the risk of at least 20 chronic diseases and conditions and provide effective treatment for many of these conditions ... Building active and walkable communities can help support local economies, result in less air pollution, and create more cohesive communities.”

From CDC’s *Active People, Healthy Nation*SM initiative

4. Wortham, J. M., Meador, S. A., Hadler, J. L., Yousey-Hindes, K., See, I., Whitaker, M., ... & Kim, L. (2021). Census tract socioeconomic indicators and COVID-19-associated hospitalization rates—COVID-NET surveillance areas in 14 states, March 1–April 30, 2020. *PLoS one*, 16(9), e0257622.

5. For more details see *About the Project and Methodology* section

Although these barriers may be addressed separately at times, they are interconnected. Each finding should be looked at through an intersectional lens as most of the limitations in municipal actions and their resulting inequitable impacts involve the interaction of a multitude of systemic forces that have historically prevented certain groups from prospering and exercising ownership over their communities.

This field scan does not track what happened generally in cities across the country during the COVID-19 crisis. Rather, it captures a diverse range of experiences related to public space and mobility interventions during the pandemic, considers various emerging equitable approaches to mobility and active transportation, and provides insight on the lessons we learned.

What did cities learn and what should others do tomorrow?

Here in early 2022, the pandemic is still not over. The level of demand for these spaces is still unmet. While Americans drove less in 2020, traffic safety got significantly worse during the same year. NHTSA's estimates for 2020 showed the largest projected number of fatalities since 2007—an increase of about 7.2 percent compared to 2019. Because driving decreased initially during the pandemic, the rates also reached historic highs for both people walking and in vehicles on a per-miles driven basis.⁴

The lessons below (unpacked in Section II, see page 24)—findings of the research and review conducted by the authors of this report—are intended to help places of all types and sizes address existing inequities and take proactive actions today and tomorrow, while also better preparing for any future emergencies. These lessons were compiled by analyzing hundreds of local-level policies and actions and interviews with key-informants from partner organizations. (More details are in the methodology section which follows.)

LESSONS LEARNED

Lesson 1

Recognize your discipline's limitations to measurably improve health equity—the challenges are interdisciplinary and your efforts must be as well.

Lesson 2

Deploy tactical urbanism and demonstration projects (light/quick/cheap) to test ideas, engage the community, and build trust.

Lesson 3

Commit significant resources to ongoing community engagement in ways that build trust in the community's key audiences.

Lesson 4

Consider how different groups of people use and relate to streets and public spaces and then embed that awareness deeply into your plans and processes.

Lesson 5

Institutionalize more flexibility into regulations and policies governing public spaces to accommodate evolving community needs and priorities.

Lesson 6

Provide access to a diverse range of transportation options in rural areas and small towns, not just more urban areas.

ABOUT THE PROJECT & METHODOLOGY

This **Shared Spaces and Health Equity** field scan was developed with funding from the Centers for Disease Control and Prevention's Division of Nutrition, Physical Activity, and Obesity (Cooperative Agreement CDC-RFA-OT18-1802). The views presented in this product do not necessarily reflect the views and/or positions of CDC. These efforts are part of the Active People, Healthy NationSM Initiative that is working to help 27 million Americans become more physically active by 2027. The field scan was the primary outcome of a seven-month project (March-September 2021). The actions and lessons learned here are the product of a field scan of active transportation policies and projects conducted by Smart Growth America through a mix of academic and open data sources, local news and publications, conversations with peer thought leaders, and guidance from community advocacy organizations specifically meant to illustrate approaches to these barriers. The six main components of this field scan approach included:

- A comprehensive literature review of the intersection between transportation decisions and health outcomes;
- A scoping session with key informants from partner organizations (more information below);
- Qualitative assessment of over 400 local-level policies and projects identified through a snowball sampling method originating from the National League of Cities' (NLC) COVID-19 Local Action Tracker and the COVID Mobility Works platform;
- Iterative narrative development process with support from the CDC; and
- Key informant interviews with thought leaders from four partner organizations.



Shared streets in New York City | Picture by Martina Guglielmo

6. National Highway Traffic Safety Administration. (2021, June 3). 2020 Fatality Data Show Increased Traffic Fatalities During Pandemic. Retrieved February 23, 2022, from <https://www.nhtsa.gov/press-releases/2020-fatality-data-show-increased-traffic-fatalities-during-pandemic>.

To frame early findings and identify the priorities for this research project, we invited a group of four recognized experts (“key informants”) from organizations listed below to participate in a scoping session and share valuable insights from their experiences in the field.

Center for Disability Rights

The Center for Disability Rights, Inc. (CDR) is a not-for-profit, community-based advocacy and service organization for people with all types of disabilities. CDR uses a peer model where people with disabilities show other people with disabilities how to live independently and advocate for themselves. CDR continues to be a unique fusion of advocacy and supportive services.

Safe Routes Partnership

The Safe Routes Partnership is a nonprofit organization working to advance safe walking and rolling to and from schools and in everyday life, improving the health and well-being of people of all races, income levels, and abilities, and building healthy, thriving communities for everyone.

America Walks

America Walks is a leading national organization devoted exclusively to prioritizing walkable, equitable, connected and accessible places in every community across the U.S. At the regional, statewide, and neighborhood levels, America Walks provides critical strategic support, training, and technical assistance to partner organizations and individuals.

League of American Bicyclists

For generations past and to come, the League represents bicyclists in the movement to create safer roads, stronger communities, and a Bicycle Friendly America. Through education, advocacy and promotion, we work to celebrate and preserve the freedom cycling brings to our members everywhere.



GLOSSARY

Access

For the purposes of this report, access refers to the ability to reach desired goods, services, activities and destinations. For example, a stepladder provides access to a high shelf, a store provides access to goods, and a library or telecommunications device provides access to information. Walking, cycling, ridesharing and public transit provide access to jobs, services and other activities. Access is the ultimate goal of most transportation, except in instances where the purpose is simply recreation or physical exercise (e.g., cruising, historic train rides, horseback riding, jogging). Note: in this report, we use “access” to refer to this concept here, and try to use “accessibility” to refer to access for people with disabilities, like with the ADA term below.

Active travel/transportation

Active travel simply means making journeys in physically active ways, like walking, wheeling (using a wheelchair or mobility aid), cycling, or scooting.⁷

Americans with Disabilities Act (ADA)

The legislation defining the responsibilities of and requirements for transportation providers to make transportation accessible to individuals with disabilities.

BIPOC

It is a term used to refer to Black, Indigenous, and People of Color (BIPOC).

Built environment

The physical space designed and built by people, ranging in scale from cities to buildings, homes, streets, and other uses of space that have an impact on quality of life and public health.

Complete Streets⁸

Streets designed and operated to enable safe use and support mobility for all users. The concept of Complete Streets encompasses many approaches to planning, designing, and operating roadways and rights of way with all users in mind to make the transportation network safer and more efficient. Complete Street policies are set at the state, regional, and local levels and are frequently supported by roadway design guidelines.

Connectivity

Connectivity refers to the density of connections in path or road networks, and the directness of links. A well-connected network has many short links, numerous intersections, and minimal dead-ends (cul-de-sacs). As connectivity increases, travel distances decrease and route options increase, allowing more direct travel between destinations, creating a more

accessible and resilient system that reflects Complete Streets principles. Connectivity can apply both internally (streets within that area) and externally (connections with larger arterial roads and other neighborhoods).⁹

Demonstration projects

Temporary improvements that test changes to the built environment. Also known as ‘tactical urbanism’ or ‘quick builds,’ they are effective, engaging tools for communities and transportation departments to test out new ideas, gather feedback, and show the flexibility of the built environment. They also provide elected officials a low-risk method to see how their community reacts before committing to a permanent solution or policy change.

Disenfranchised communities

Populations that have systematically been deprived of rights and privileges over time, impacting their access to jobs and essential services and their ability to accumulate wealth.

7. About Active Travel. (n.d.). Paths for All. Retrieved February 23, 2022, from <https://www.pathsforall.org.uk/about-active-travel>

8. National Complete Streets Coalition, Smart Growth America. Retrieved from <https://smartgrowthamerica.org/program/national-complete-streets-coalition/>

9. Victoria Transport Policy Institute. (2017, January 2). Roadway Connectivity Creating More Connected Roadway and Pathway Networks. TDM Encyclopedia. <https://www.vtpi.org/tdm/tdm116.htm>

Health equity

A fair and just opportunity for everyone to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to quality education and housing, safe environments, good jobs with fair pay, and health care. To achieve health equity is to reduce and ultimately eliminate disparities in health and its determinants that adversely affect excluded or marginalized groups.

Mobility

The movement of people and goods.

Multimodal transportation

A transportation network that accommodates multiple modes of travel including, but not limited to, walking, rolling, bicycling, using public transit, and driving.

Smart growth

Land-use development practices that create more resource efficient and livable communities, with more accessible land use patterns. An alternative to sprawl.

Sprawl

Dispersed, low-density, single-use, automobile dependent land use patterns.

Streetscaping

Streetscape refers to urban roadway design and conditions as they impact street users and nearby residents. Streetscaping recognizes that streets are places where people engage in various activities, including but not limited to motor vehicle travel.¹⁰

Shared spaces

Refers to specific reallocations of public roadway space typically reserved for motor vehicles for the purpose of creating space for active uses – a phenomenon which was extensively seen as a COVID-19 response measure. These could be to provide spaces for other modes such as walking, biking or rolling through sidewalk expansion, pop-up bike lanes, street closures etc. These could also be to support commercial activities and local businesses such as for outdoor dining, pop-up market streets, etc.¹¹

Placemaking

Placemaking means creating places and focuses on transforming public spaces to strengthen the connections between people and these places. Placemaking is a process centered on people and their needs, aspirations, desires, and visions, which relies strongly on community participation.¹²

Rolling

In the context of mobility, “rolling” refers to any method for moving around that uses wheels, like a wheelchair, roller skates, or a mobility scooter.

Transportation network

The infrastructure that allows us to move from one location to another throughout a given community

Vehicle miles traveled (VMT)

This is a measure of how much driving is happening during a certain period. It can be given in real terms or per capita, which involves dividing total miles by population. Decreasing annual VMT per capita can directly improve air quality and the overall health of a population.¹³

10. Victoria Transport Policy Institute & Ritter, J. (2018, August 28). Streetscape Improvements Enhancing Urban Roadway Design. Online TDM Encyclopedia. <https://www.vtpi.org/tdm/tdm122.htm>

11. Pedestrian and Bicycle Information Center. (n.d.). “Shifting Streets” Glossary. Ped Bike Info. https://www.pedbikeinfo.org/resources/resources_details.cfm?id=5345

12. Moreira, S. (2021, May 27). What Is Placemaking? ArchDaily. <https://www.archdaily.com/961333/what-is-placemaking>

13. US Department of Transportation. (2015, August 24). VMT Per Capita. <https://www.transportation.gov/mission/health/vmt-capita#>

I. COMMUNITY DESIGN & PUBLIC HEALTH

Making room for healthy places in the midst of a global pandemic

During the second half of the 20th century, propelled by a range of government subsidies and policies, real estate development started favoring what we now call “drivable suburban” communities. Cars quickly became the primary means of transportation in most American households as new suburban, car-only-oriented suburbs expanded across vast swaths of underdeveloped or undeveloped land. Thousands of miles of new roads had to be constructed to connect these new booming suburbs to nearby economic and social centers and accommodate the new motorized lifestyle. In addition to the hefty cost of construction and maintenance of all this infrastructure, this new pattern of development also **discouraged people from choosing active modes of transportation like walking, biking, or rolling by making the roads and streets around them difficult to navigate and a potential threat to their health and safety.**¹⁴

Car-centric sprawling development can also come at the expense of our health in several ways such as by reducing the supply of public spaces that are safe, convenient, and attractive for physical activity—whether for recreation, exercise, or transportation. Our transportation decision-making paradigm for decades has been prioritizing efficiency in car travel over nearly every other criteria, meaning that travel speed has been prioritized over safety, health, and impacts on the environment.

“The compactness of land uses and the organization of the transportation system determines, to a large extent, how much individuals drive. The more sprawling and disconnected houses are from workplaces and shops, the more miles and hours individuals must travel to get from one place to another. If there are no reasonably convenient or affordable alternatives to driving then all of those hours traveling will be spent in a personal vehicle.”¹⁵

From CDC’s *Active People, Healthy Nation*SM initiative

14. Smart Growth America. (2021). *Dangerous By Design*. <https://smartgrowthamerica.org/dangerous-by-design/>

15. Ewing, R., & Kreutzer, R. (2006). *Understanding the Relationship between Public Health and the Built Environment*. <https://www.usgbc.org/sites/default/files/public-health-built-environment.pdf>

When streets are routinely designed to be inhospitable by encouraging high vehicle speeds and lacking accessible and continuous sidewalks, signalized crosswalks, appropriate lighting and shading, the results tend to favor more driving and less active travel. This imposes an enormous burden on the community's health and healthcare costs, household finances, and productivity.

“Besides the widely-acknowledged health impacts associated with road traffic injuries and premature mortality due to motor vehicle crashes, there is a whole range of health impacts, including premature mortality and numerous morbidity outcomes, related to urban transport exposures and practices. Adverse health impacts occur through motor vehicles air pollution and noise, local urban heat exposures, lack of green space and biodiversity loss, climate change effects, social exclusion, community severance and physical inactivity from sedentary behavior and an over reliance on motorized travel.”¹⁶

From CDC's *Active People, Healthy Nation*SM initiative

16. Khreis, H, May, AD and Nieuwenhuijsen, MJ (2017) Health impacts of urban transport policy measures: A guidance note for practice. *Journal of Transport & Health*, 6. C. pp. 209-227. ISSN 2214-1413

17. Iyengar, M. (2016). An economic approach towards estimating health impacts of major transport investments and transport policies: A case study of transport emission abatement policy (Doctoral dissertation, Queensland University of Technology).

18. & 19. Roberts W. Air pollution and skin disorders. *Int J Womens Dermatol*. 2020 Nov 25;7(1):91-97. doi: 10.1016/j.ijwd.2020.11.001. PMID: 33537398; PMCID: PMC7838324.

20. Active Transportation: Relationship to public health. (2015). <https://www.transportation.gov/mission/health/active-transportation>

Increased focus on the connection between transportation, land use, and health outcomes largely triggered by the COVID-19 pandemic has resurfaced a substantial body of research demonstrating the health impacts and costs of different approaches to transportation policy. Some key findings include:

- Transportation systems and neighborhood design together determine the out-of-pocket cost, convenience, and comfort of different travel options.
- Car-centered development has resulted in transportation becoming the largest end-use sector consuming energy and producing the highest rates of CO₂ emissions.
- The U.S. Census Bureau reported in 2021 that the daily average American commute time between 2006 and 2019 hit a new high of 55.2 minutes, assuming one round trip. The time expense involved in commuting—which can be relatively higher for lower-income households—contributes to almost one in four adults in the United States reporting that they do not engage in any physical activity outside of their jobs.
- The CDC reports that the US obesity prevalence in adults was 42 percent in 2018—due in part to sedentary lifestyles and the lack of opportunity for everyday physical activity.
- The transportation decisions that make streets so dangerous in historically underserved neighborhoods have also resulted in a disproportionate exposure to food insecurity, which means that our most under-resourced community members need to travel farther to reach basic necessities like healthy foods with little or no options other than a car.

Read more in *Appendix B. Literature review* (page 44).

The COVID-19 pandemic has made it abundantly evident that people across the country are increasingly prioritizing the ability to move around freely and safely in their community. Interventions that created new space for exercise or active transportation were quickly filled up. Many spaces once filled with vehicles were quickly filled with people, whether walking around their neighborhood to decompress after a long work day (with or without assistive devices), heading out for a jog or another form of exercise, riding their bike to the local park or to visit their neighbors after school rolling wheelchairs or baby strollers through downtown, or simply enjoying the surroundings on their way to nearby destinations.

To meet this demand, local leaders from coast to coast turned to a wide range of innovative approaches to address the new demand for open, shared spaces. Many cities opted to close certain streets to all motor vehicles in efforts to provide more and safer space for walkers, bikers, and other active travelers to social distance. A study published in the journal *Transport Policy* in April 2021 analyzing a series of street-focused responses to the COVID-19 pandemic from the 55 largest cities in the US revealed that “open street” or “slow street” applications were one of the most common responses.²¹ While large, wealthy cities like Oakland, San Francisco, New York, Portland, and Seattle were the expected “innovators” leading these early on, 30 of the 55 cities in the study used a similar approach. Another common goal was to create or enhance open spaces for people to socialize and spend time outdoors while safely social-distancing. Some cities closed down parking lanes—and even entire traffic lanes—to widen sidewalks for active travelers and add space for outdoor dining.²²

There were surely numerous benefits of allowing more people room to be outside safely during a pandemic. Scientific studies back up what many already feel is true: our mental and physical health is inextricably linked to the connections between ourselves and the natural world, as well as social connections between individuals.²³ This happens much more often when urban space is designed (and designed well) to prioritize people over vehicles.

Active transportation can be catalytic for economic recovery and long-term resilience

It is well documented that providing people with a wide range of options to move around safely, whether for transportation, recreation, or exercise, can help communities of all types, sizes, and geographic locations to thrive. Smart Growth America’s 2015 study of 37 Complete Streets projects across the U.S. shows that creating places that are safe, comfortable, and attractive to walk, bike, and roll in can result in additional sales in local businesses, talent attraction and retention, and increased values of commercial and residential real estate across the broader region.

Projects that enable and encourage active mobility and provide casual, outdoor opportunities for exercise and recreation have been proven to be catalytic interventions contributing to economic recovery and long-term resilience for a wide variety of communities. Guiding recovery planning with these principles most often contributes to the enhancement of other community conditions including public health, safety, and economic prosperity. In face of the COVID-19 pandemic, communities can turn to diversifying transportation networks and prioritizing safety as a means to revitalize the local economy.

21 & 22. Glaser, M., & Krizek, K. J. (2021). Can street-focused emergency response measures trigger a transition to new transport systems? Exploring evidence and lessons from 55 US cities. *Transport policy*, 103, 146-155.

23. Wen, L. (2021, February 11). The Mental and Physical Benefits of Our Plazas, Parks, and Sidewalks. Gensler. <https://www.gensler.com/blog/mental-and-physical-benefits-of-plazas-parks-sidewalks>

Inequitable approaches, inequitable outcomes

Cities faced a number of challenges in their efforts to ensure that these changes benefited everyone, especially groups with particular needs and priorities. The pandemic also highlighted pre-existing inequalities in access to green and natural space. People with physical disabilities, workers with unconventional schedules, and households with lower incomes are just some examples of communities that did not experience the benefits of these interventions to promote physical activity to the same extent as other populations, because cities' default decision-making frameworks tend to cater to able-bodied, wealthier, "9 to 5" workers. As mentioned above, the most common place-based responses to the pandemic served more recreational purposes through street closures and outdoor dining—and were disproportionately concentrated in affluent neighborhoods. **Although local leaders and planners' pursuit of "blanket solutions," or approaches attempting to cover or encompass everything, is not uncommon, these often result in the further social, political, and economic exclusion of minority groups.**

While the larger intent of these projects across the country was to retrofit our built and living environments to serve the changing collective needs and "new normals" generated by the pandemic, people's experiences navigating their community varied widely among different groups. As months passed, residents and advocates raised questions regarding the prioritization, location, engagement and accessibility of these street projects **such as:**



Slow street in San Francisco, CA | Picture by NACTO

- Who were the primary partners making the decisions?
- Where were these projects located? Were they concentrated in certain areas of the city?
- Were these prioritized for communities that already had poor access to parks and other public spaces?
- How much attention was paid to ensuring that essential travel was convenient?
- What were the goals? Did these projects focus on connectivity to everyday destinations or were they purely for recreational purposes?

24. COVID and the Curb (report), Transportation for America, 2020. https://t4america.org/wp-content/uploads/2021/01/COVID_and_the_Curb_final.pdf

1. Limited community engagement

Limited community engagement posed a significant challenge during the COVID-19 pandemic and is a common thread across all the other barriers discussed in this section. A lot can be addressed and resolved if key partners and community members have the opportunity to raise their needs and concerns and cities are responsive.

Barriers posed by community engagement are not new—some transportation agencies and elected officials see community engagement as a box to check, resulting in these processes being insufficiently funded—but the pandemic exacerbated many of these challenges. In the face of potentially devastating budget cuts and uncertainty, almost no opportunity for in-person engagement, and the focus on delivering rapid responses, many cities' community engagement efforts fell far short of providing a clear, accurate picture of what the community's needs and priorities were. Repeated lack of engagement or cursory engagement that did not have any meaningful impact on outcomes has affected many communities' level of distrust in the government, especially historically disenfranchised communities.

A lack of community engagement also meant that some cities' responses to the COVID-19 pandemic to improve access to shared spaces and active transportation were inequitable, benefiting people who needed these changes the least while exacerbating disinvestment and negative outcomes to COVID-19 in the communities that would have benefited the most. In places where community engagement was prioritized, it helped community leaders and decision makers better respond or re-evaluate their decisions to improve their responses and revisit their implementation processes to prioritize communities with the most pressing needs.

In a time of crisis such as at the beginning of the pandemic, it is understandable that most agencies were prioritizing easy and rapid

responses. What made this method of implementation a significant barrier in some cities was the limited engagement efforts even later in the timeline and the absence of feedback mechanisms in general. Most rapid response measures such as open streets, pop-up bike lanes or outdoor dining spaces can be easily shifted around and retrofitted to serve the needs of various community members after being implemented—an opportunity often missed due to limited community engagement built into the processes.

KEY INFORMANT

“The biggest barrier comes back to who has the ear, and who the decision-makers are really representing. But an even bigger barrier is, overall, that community engagement is the first thing that gets cut out of the budget whenever there is a constraint.”

Michelle Lieberman, Consulting and Program Support Director, Safe Routes Partnership

At Smart Growth America, we believe that the community is always the expert. In other words, people often know more about what their needs are, how their public spaces work—or don't work—and what ideas might do well in those spaces. An effective placemaking process engages these experts at the very beginning to set the priorities and vision for the project, and keeps them involved throughout implementation and beyond. The voices at the table and feedback collected for a large portion of the projects examined for the purposes of this field scan were not representative of the community's demographics, unsurprisingly excluding the voices of the most vulnerable and underserved segments of the population like racial minorities, people with disabilities, and families with lower incomes.



Slow street in Oakland, CA | Picture by Jean Walsh via NACTO

CASE EXAMPLE

Lack of community input for Oakland's Slow Streets Program

The City of Oakland was amongst the first set of cities to launch an extensive Slow Streets program early on in the pandemic, aiming to close down over 70 miles of its city streets to through traffic, almost 10 percent of city's street network. The program faced a barrage of criticism over lack of community input, with Black and low-income residents expressing far less enthusiasm for the traffic restrictions. City staff quickly realized during the evaluation process that their feedback and community engagement was not representative of its population; with 60 percent of respondents being White, while White residents make up only 24 percent of the population. Further, 40 percent of respondents had annual household incomes of \$150,000 or more, whereas the median annual household income in Oakland is \$76,000.²⁵ But actively listening to Black and brown residents about over policing in their communities led Oakland planners to redesign their approach. Eventually, the city introduced the Essential Places initiative informed by residents' concerns over pedestrian safety, speeding, and the need to create safe pathways for people to get to grocery stores, clinics, and other needed services.

Warren Logan, Policy Director of Mobility and Interagency Relations for the City of Oakland, CA, pointed out that in wealthier neighborhoods, "all it took was a few barricades to stop drivers, but in poorer areas, they hit resistance, highlighting disparities ingrained in traffic violence. If a neighbor in a marginalized community grumbles at a program meant to enhance safety, and the response is to scrap instead of fix, something else may be at play there."²⁶ This important realization has been illuminating for decision-makers in Oakland. Logan told Bloomberg City Lab in April 2021 that the work to improve Slow Streets, which will be extended into the foreseeable future, is "a trust-building exercise" that could produce results beyond road regulations. "It could change how the city operates, especially in respect to communities of color."²⁷

25. Sharma, R. (2020, October 8). How Covid-19 Inspired Oakland to Get Real About Equitable Urban Planning. Next City. <https://nextcity.org/daily/entry/how-covid-19-inspired-oakland-to-get-real-about-equitable-urban-planning>

26 & 27. Surico, J. (2021, April 29). Can 'Open Streets' Outlast the Pandemic? Bloomberg CityLab. https://www.bloomberg.com/news/articles/2021-04-29/what-s-next-for-the-open-streets-of-the-pandemic?cmpid=BBD043021_CITYLAB&utm_medium=email&utm_source=newsletter&utm_term=210430&utm_campaign=citylabdaily

2. Lack of accessibility

With the expansion of public space into sidewalks and streets for outdoor dining, organized activities, and other recreational purposes, in many cases sidewalks no longer served their primary function as thoroughfares for pedestrians and people with assistive devices like wheelchairs or mobility scooters.²⁸ “When you block off streets like this,” shared Dara Baldwin, Director of National Policy for the Center for Disability Rights, Inc. during a key informant interview with SGA, “it messes up the pathway of travel for people with disabilities, and I don’t think a lot of municipalities and towns thought about that when they were blocking the streets during COVID.” Many instances of blocked sidewalks were reported in cities across the country, citing reasons ranging from lack of clarity on regulations and vague requirements to poor enforcement and accountability from business owners as they expanded services into the public right-of-way.^{29, 30}

29. Wilson, K. (2020, May 21). COVID-19 Outdoor Dining Already Squeezing Walkers – Streetsblog USA. Streetsblog USA. <https://usa.streetsblog.org/2020/05/21/covid-19-outdoor-dining-already-squeezing-walkers/>

30 & 31. Block, S. (2020, October 12). People with disabilities fear that permanent outdoor dining will make inaccessible cities even worse. The Counter. <https://thecounter.org/people-with-disabilities-fear-that-permanent-outdoor-dining-will-make-inaccessible-cities-even-worse/>

32. Sweitzer, M. (2021, April 29). The Case For Making Outdoor Dining Permanent in Philly. Eater Philly. <https://philly.eater.com/2021/4/29/22408167/outdoor-dining-permits-permanent-future-philly-restaurants>

33 & 34. Rushing, E. (2020, July 14). Outdoor dining in Philly creates obstacles for people with disabilities. Philadelphia Inquirer. <https://www.inquirer.com/health/coronavirus/philadelphia-outdoor-dining-sidewalks-accessibility-20200714.html>

CASE EXAMPLE

Accessibility concerns with Philadelphia’s outdoor streeteries

In June 2020, the City of Philadelphia, PA expanded permits for outdoor “streeteries,” allowing restaurants to take over spaces that were previously not available for them to use like curbside parking spots, empty lots, significantly more sidewalk space, and in some cases, entire city blocks.³² Restaurants began increasingly relying on outdoor dining opportunities to reinstate business and make up for lost profits during the city-wide quarantine mandate. While added outdoor dining spaces were appreciated by many people as an opportunity to experience some form of normalcy, they blocked sidewalks, curb cuts, and accessible parking spaces, and obstructed paths for people who rely on mobility aids like wheelchairs. Although the city had established outdoor dining guidelines that required a six-foot clearance for pedestrian traffic on sidewalks, the city received 27 complaints related to blocked sidewalks within the first month of reopening—with many more believed to have gone unreported.³³ The Philadelphia Inquirer reported that advocates believe that obstructed pathways are “exacerbating long-standing accessibility issues, making it more dangerous and difficult for them to navigate the city and intensifying feelings of exclusion and neglect.³⁴ It also highlights, they say, how people with disabilities are often left out of conversations about policies and processes ... it speaks to the larger, systemic problem of inaccessibility in the city.” Zachary Lewis, an organizer for Philly ADAPT and executive director of Disabled in Action, captured the impact of these accessibility barriers in a few words: “It shows that they don’t care about people with disabilities. They care more about their bottom line, which is the dollar.”



While able-bodied people have seen their personal space grow to six feet in every direction, people with disabilities—nearly one million in New York City—say their footprint has shrunk.³¹

Photo by Katie Pennick via Twitter

3. Cycles of disinvestment

New construction and rehabilitation of existing buildings and public infrastructure is often a reliable way to meet the community's evolving needs, support the local economy, and create wealth, value, and jobs. But these catalytic investments do not occur in a random pattern—they are typically concentrated in neighborhoods that are most likely to realize the maximum financial return for private developers and public agencies. A similar imbalance in which neighborhoods received investment emerged during the pandemic. Many of the more popular response measures served recreational purposes through street closures and outdoor dining, often concentrated in affluent neighborhoods. However, the communities that needed COVID measures most were typically those that had faced historic disinvestment, limited access to capital, lack of infrastructure for safe active travel, and persistent economic challenges rooted in a long history of racist policies. These neighborhoods experienced the worst impacts of the pandemic but did not receive the same level of supportive measures in many cities.

Placemaking offers a unique opportunity to bring people of different backgrounds together to work collaboratively on a common goal: a shared public space. But even when cities tried to deploy interventions in neighborhoods that have faced historic disinvestment during the pandemic, many moved too quickly to do so through a community input process. When local officials, developers, or any other siloed group prescribe improvements to a place without working with the community, no matter how noble those groups' intentions may be, it often alienates locals, provokes fears of gentrification, and increases the feeling and experience of exclusion.

35. Transportation Alternatives. (2020). Open Streets Progress Report. <https://www.transalt.org/open-streets-progress-report/#summary-findings>

36. Cuba, J. (2020, May 21). Mayor's 'Open Streets' Leave Out Neighborhoods That Need It Most. Streetsblog. <https://nyc.streetsblog.org/2020/05/21/mayors-open-streets-leave-out-neighborhoods-that-need-it-most/>

37. NYC Health. (n.d.). COVID-19: Latest Data. <https://www1.nyc.gov/site/doh/covid/covid-19-data.page>

38. Transportation Alternatives. (2020, May). Open Streets Could Save New York An Open Letter to Mayor Bill de Blasio. <https://transalt.medium.com/open-streets-could-save-new-york-46811670ea6>

CASE EXAMPLE

Poor project prioritization of New York's Open Streets program

New York City's Open Street Program was one of the largest and earliest projects in the pandemic to trigger community backlash related to cycles of municipal disinvestment. An evaluation of the program in August 2020, four months after it was initially launched, found that the 100 miles of road newly designated as "open streets" by the city's Open Street Program were scattered throughout the city without following a set of criteria based on *need*.³⁵ Advocates pointed out that the city's plan to ultimately open 100 miles of streets for socially distant recreation and safe cycling during the COVID-19 crisis had left out areas hard-hit by the deadly virus, instead catering to already-wealthy neighborhoods rich in resources and open space.³⁶ The initial rollout of the program left out Staten Island although it has one of the highest concentrations of immigrant households in the city. It also excluded the Hispanic-majority community of Port Richmond which at the time reported the highest rates of infection in the city.³⁷ In an open letter to the Mayor of New York City, TransAlt, a local advocacy organization, stated that "Open Streets should also be an equity tool where health outcomes are most disparate and public space needs are most apparent."³⁸ The city hadn't accounted for what economists call the "externalities" of a public space. Because the places we share are so intertwined with our daily lives and with our broader urban systems, altering them can impose unforeseen costs and benefits on the community that often mirror or even exacerbate existing inequalities. This is why the involvement of all residents is vital for creating great places.

4. Loss of public transit service

While millions of people stopped their daily commutes overnight, many continued to travel throughout the COVID-19 crisis. This includes essential workers, defined as anyone making “essential travel”—not just front-line workers but anyone who had no choice but to commute despite the lockdowns; either by walking, biking, rolling, taking transit, or driving. This includes but isn't limited to people working as delivery staff and transit operators, or at grocery stores, banks, and other essential services that remained open throughout 2020.³⁹ These frontline and essential workers made up a disproportionate share of transit riders before the crisis—for example, accounting for 38 percent of transit commuters in New York City, 33 percent in Seattle, and 36 percent in Miami.⁴⁰

As budgets were being realigned due to significant revenue losses during the initial phase of the pandemic, municipalities significantly pulled back investments from public transportation. Paired with lower ridership, this led to an unprecedented transit funding crisis resulting in service cuts impacting both bigger city transit agencies⁴¹ and mid-sized and rural agencies,⁴² which experienced debilitating financial losses to a point where permanent shut down of services seemed likely. A TransitCenter analysis of 150 largest transit agencies in the country found that many struggled with labor shortages during the pandemic and one in six agencies were providing less than 75 percent service of their pre-pandemic hours by December 2020.⁴³ Advocacy groups in many municipalities like Bike Durham in North Carolina, Greater Greater Washington in Washington DC, Pittsburghers for Public Transit in Pittsburgh, and others, gathered stories through membership surveys early on during the pandemic to bring attention to the importance of maintaining an efficient, safe, and reliable transit system during the crisis and after.⁴⁴ For example, Washington, DC, has proposed eliminating weekend Metrorail service, closing 19 Metrorail stations, and eliminating 2,400 jobs for fiscal year 2022. While some services may be bouncing back to pre-pandemic levels, these cutbacks during the pandemic disproportionately burdened our frontline essential workers who needed it the most at a time when the community needed them the most.

KEY INFORMANT

“We kept saying some people are essential, but we did not support their ability to get to and from where they were going. That’s not a way to run a city. If we believe that low wage workers are essential, then their means of getting around the city should be robust regardless of the amount of usage.”

Mike McGinn, Executive Director, America Walks

39. Rudick, R. (2020, December 17). Understanding Transit Needs of Essential Workers – Streetsblog San Francisco. Streetsblog SF. <https://sf.streetsblog.org/2020/12/17/understanding-transit-needs-of-essential-workers/>

40. Mangan, E. (2020, March 27). 2.8 million essential workers use transit to get to their jobs - Transportation For America. Transportation For America. <https://t4america.org/2020/03/27/2-8-million-essential-workers-use-transit-to-get-to-their-jobs/>

41. Bellis, R. (2020, December 1). What service cuts are transit agencies facing around the country? - Transportation For America. Transportation For America. <https://t4america.org/2020/12/01/what-service-cuts-are-transit-agencies-facing-around-the-country/>

42. Fortunati, J. (2020, September 29). Video: Rural transit agencies warn of devastating service cuts - Transportation For America. Transportation For America. <https://t4america.org/2020/09/29/video-rural-transit-agencies-warn-of-devastating-service-cuts/>

43. Transit Center. (2021, February 25). How Much Service Are Transit Agencies Running During the Pandemic? <https://transitcenter.org/how-much-service-are-transit-agencies-running-during-the-pandemic/>

44. Transit Center. (2020, April 7). How Transit Advocates Are Mobilizing for Riders and Workers in Response to COVID-19. <https://transitcenter.org/how-transit-advocates-are-mobilizing-for-riders-and-workers-in-response-to-covid-19/>

CASE EXAMPLE

Transit alternatives for essential trips in New York and San Francisco

Essential workers make up approximately 25 percent of the New York City workforce, of which 60 percent are women and 75 percent are people of color.⁴⁵ While many neighborhoods, mostly in the outskirts of the city with high concentrations of essential workers, had minimal to no subway access, those with subway access saw lower drops in ridership in comparison to other areas, according to the Office of the Comptroller of New York City, illustrating a continued demand for transit services.⁴⁶ The city's Metropolitan Transportation Authority (MTA) established an Essential Connector Service, providing for-hire vehicles at no cost, in late April 2020. This was in response to nightly subway services being shut down to provide transportation options to essential workers for those who were either too far from a bus stop (more than a half-mile), or whose bus trip would take more than 80 minutes or would require more than two transfers. The service proved extremely popular, providing 18,870 total trips in May 2020 but was discontinued on August 31 due to financial constraints and lack of additional relief from Congress until that point, as reported by the agency.⁴⁷

Similarly, in San Francisco, while necessary reductions were being made from public transit services, San Francisco Metropolitan Transit Authority (SFMTA) recognized the burden it would create for many people with disabilities and seniors i.e. either walking farther to an alternate bus or the need to pay for other transportation which may not be possible for people. Essential Trip Card (ETC) was a discount program launched by the SFMTA to help seniors and people with disabilities make essential trips in taxis during this crisis. The ETC committed to subsidize about two to three round trips by taxi per month for older adults (persons 65 and older) and people with disabilities, with eligible participants contribution of 20% to the cost of the cab rides.⁴⁸

KEY INFORMANT

“As active transportation advocates, our framing about transit is often a competitive viewpoint to driving, as opposed to recognizing it more as an essential utility. We need to reinforce that regardless of how many people are using transit, you need a basic level of service for functionality of our transportation system and our economy.”

Mike McGinn, *Executive Director, America Walks*

These programs were set up in response to the shortcomings of public transit systems which rolled back services due to financial constraints during the crisis. While they were set up with the intent of serving populations who continued to commute or needed support to access essential services, the fact that roll-out of car-centric service was the next best option during a pandemic shows the one mode of transportation our systems are centered around. In the case of New York, the city also found this to be a very expensive alternative eventually resulting in shutting down of the service due to financial constraints. The importance of building funding models that help mitigate future deficits, or in response to lower ridership is important for a community's resilience as these disinvestments also hurt daily commuters, as we resume regular travel.

45 & 46. NYU Rudin Center for Transportation & Sam Schwartz Engineering. (2020, July). Transportation During Coronavirus In New York City

47. New York MTA launches new 'Essential Connector' app to move essential workers during overnight subway closure. (2020, May 19). Mass Transit. (Access article here)

48. SFMTA. (2020). Essential Trip Card. <https://www.sfmta.com/getting-around/accessibility/paratransit/essential-trip-card>



Economic burden of car ownership and origin-destination (OD) data

The continued focus on car-centric transportation networks poses an undue burden for many—often involving serious real and opportunity costs. Reliance on a private car for transportation magnifies people’s challenges to access and secure employment, health care, nutritious foods, and education opportunities because the financial implications of car ownership—which cost almost \$9,000 a year to own and maintain—can be overwhelming or prohibitive for lower-income people and families. By using origin-destination (OD) data, municipalities and cross-sector partners can identify common routes that community members navigate to get to work and other key destinations. **This information is critical for mapping strategic locations for investments that support active mobility and transit for the essential workers that took on the frontlines during the pandemic, as well as relief for low-income populations experiencing disproportionate economic burdens from car ownership.**

You can learn more about origin-destination analysis in the U.S. Bureau of Transportation Statistics’ Origin and Destination Survey quarterly reports.

5. Rigid regulations for use of public spaces and business operations

During the pandemic, many communities' public spaces became completely empty and new urban landscapes substituted the previous ones. Many businesses expanded private boundaries to the public realm for various purposes such as to provide outdoor vending or dining across small towns to big cities. These transitions called for flexibility in use of public spaces but significantly conflicted with the conventional regulations controlling the uses of the public realm with minimal room to deviate from the codes. To manage public spaces in an ever shifting 'new normal,' cities needed flexible strategies to prioritize interventions that could have the most impact. Public spaces needed to operate under social distancing guidelines and safety regulations, and information campaigns promoting physical distancing norms could only go so far in impacting behavior. Hence, it was especially important for decision-makers, urban designers, and planners to make it easy for everyone to be physically distant and support safe operations of local businesses.⁴⁹

Relaxing existing regulations also became crucial to support the economic viability of home-based businesses—particularly those which could utilize the public realm to sell products—which saw an uptick during the pandemic with so many people out of work. Americans filed more than 4.3 million new business applications in 2020, an increase of nearly 25 percent from the year before, according to the U.S. Census Bureau. That surge has been particularly pronounced among small, sole-proprietor operations. Federal statistics show that such businesses are more likely to be helmed by women or people of color—the populations that have faced the worst economic fallout from COVID-19.⁵⁰ **“We have a lot of neighbors who are struggling to afford to live, and a lot of areas where the rent for small businesses has gotten very expensive, so we needed pragmatic, sensitive legislation to help address that,”** said Jeff Syracuse from nonpartisan Metropolitan Council in Nashville, Tennessee.⁵¹

CASE EXAMPLE

Zoning restrictions for at-home businesses in Seattle

Last year, a resident of Seattle saw a business opportunity as the Safe Streets program rolled out, closing her street to all through traffic, and resulting in more people walking down her residential-zoned street than were walking down commercial-zoned Greenwood Avenue, a block away.⁵² She was able to secure permissions from the Health Department and the Liquor and Cannabis board to sell cider out of her garage, to-go only. Despite an overwhelming response, the business had to be shut down due to a zoning violation complaint by a neighbor. This incident prompted the Seattle City Council to reconsider its zoning laws to allow more flexibility, at least temporarily, for people to run at-home businesses. In March 2021, the city council passed a land use bill easing certain restrictions for such businesses to run, currently instated for a year-long pilot program with 100 permits and the potential to make it more long-term.⁵³

49. Akers, A. (2020, April 23). Managing Public Space in the 'New Normal' - Gehl. Gehl Architects. <https://gehlpeople.com/blog/managing-public-space-in-the-new-normal/>

50 & 51. Dewey, C. (2021, October 29). Pandemic Prompts Officials to Relax Rules on Home Businesses. The Pew Charitable Trusts. <https://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2021/10/29/pandemic-prompts-officials-to-relax-rules-on-home-businesses>

52. Gutman, D. (2021, March 14). Seattle City Council seeks to make it easier to run a business from your garage. The Seattle Times. <https://www.seattletimes.com/seattle-news/politics/seattle-city-council-seeks-to-make-it-easier-to-run-a-business-from-your-garage/>

53. Guarente, G. (2021, March 15). Seattle City Council Relaxes Rules for Micro Businesses, Such as Home Kitchens. Eater Seattle. <https://seattle.eater.com/2021/3/15/22332443/seattle-city-council-passes-bill-on-relaxed-rules-for-microbusinesses>

6. Inequitable law enforcement

As we consider the use of public space, another important question to ask is, “Who has safe access to public space?” Members of racial, ethnic, and other minorities or vulnerable groups often face harassment, arbitrary detention, and abusive treatment by the law enforcement system. According to the Bureau of Justice Statistics, traffic stops and car crashes account for at least 66 percent of contact between police and the public in the last decade, making streets the most frequent place for incidents of police brutality, particularly for low-income and minority residents.⁵⁴ This problem is not unique to driving, as enforcement has also become a major component of pedestrian and bicycle initiatives.⁵⁵ A study reported that between 2012 and 2017, black pedestrians in Jacksonville, Florida constituted 55 percent of all ticketed pedestrians despite making up only 29 percent of the population.⁵⁶ Similar patterns have been seen in other cities like Oakland, New Orleans, and Washington, DC which showed that Black cyclists carry a heightened risk of being stopped, searched, ticketed, and arrested.^{57,58}

A similar pattern emerged during the pandemic as new “shelter-in-place,” “stay-at-home,” “social distancing,” and quarantine orders added an additional layer to the rules governing the use of public spaces. Consistent with the current policing approaches, aggressive surveillance and policing tactics, steep fines, criminal charges, and harsh penalties were used as the primary approaches of enforcement.⁵⁹ In Brooklyn, New York, in just the first two months of the pandemic, 35 of 40 social distancing arrests reported were of Black residents, four were Hispanic and one was white.⁶⁰ Even in Chicago’s BIPOC communities, many people reported feeling unsafe spending time outside and using walking and biking as their modes of transportation due to issues like gun violence, over-policing, and threats of immigration crackdowns.⁶¹

KEY INFORMANT

“Any program that is punitive, which is every safety program in transportation including vision zero, is trying to change behavior through fear of punishment. But we are humans, we make mistakes, there can never be a zero. We’ve seen it for our war on drugs; it does not work.”

Dara Baldwin, *Director of National Policy, Center for Disability Rights*

54. Thompson, D. (2020, June 11). Unbundle the Police. The Atlantic. <https://www.theatlantic.com/ideas/archive/2020/06/unbundle-police/612913/>

55. The Eno Center for Transportation. (2020, June 19). Op-Ed: Transportation and the Police Part 2: The Enforcement Problem in Pedestrian and Bicycle Safety. <https://www.enotrans.org/article/transportation-and-the-police-part-2-the-enforcement-problem-in-pedestrian-and-bicycle-safety/>

56. Equal Justice Initiative. (2017, November 30). Analysis Finds Tickets Disproportionately Issued to Black Pedestrians. <https://eji.org/news/analysis-finds-tickets-disproportionately-issued-to-black-pedestrians>

57. Wisniewski, M. (2019, September 23). Bike tickets drop citywide — but most are still issued in majority black areas. Chicago Tribune. <https://www.chicagotribune.com/business/transportation/ct-biz-bike-tickets-drop-minority-neighborhoods-20190923-tpqe6wwyzyzycnncn24ko4cgtm2q-story.html>

58. Roe, D. (2020, July 27). Black Cyclists Are Stopped More Often Than Whites, Police Data Shows. Bicycling magazine. <https://www.bicycling.com/culture/a33383540/cycling-while-black-police/>

59. COVID19 Policing Project. (2020, October). Unmasked: Impacts of Pandemic Policing. <https://communityresourcehub.org/wp-content/uploads/2020/12/Unmasked.pdf>

60. Southall, A. (2020, May 8). The NYPD Arrested 40 People on Social Distancing Violations. 35 Were Black. The New York Times. <https://www.nytimes.com/2020/05/07/nyregion/nypd-social-distancing-race-coronavirus.html>

The COVID-19 Policing Project reviewed information from the first six months of the pandemic and found that BIPOC communities were 2.5 times more likely to be policed and punished for violations of COVID-19 orders than white people and Black people specifically were 4.5 times more likely. Similar patterns were seen across various states in the country with 81 percent of the 374 summons in New York being reportedly issued to Black and Latinx residents and Black residents accounting for 61 percent of the 107 people charged in Cincinnati, Ohio and 24 percent in San Diego, California.⁶² A Guardian analysis also found that Black women who disproportionately work as frontline and healthcare workers were found to be five times more likely than white women to be policed and punished for violations of COVID-19 orders.⁶³

Planners, designers, and decision-makers need to recognize that designs that require either a temporary or ongoing police presence—for example to manage turns or access to streets—are unlikely to be welcome in communities where distrust of the police is high.⁶⁴ An interview published by the Trust for Public Land showed 77 percent of mayors believed their cities' parks were safe for all users. A similar proportion believed Black residents could use parks without fear of police. Contrary to the perception, past surveys of residents of color and immigrants in Minneapolis⁶⁵ and Los Angeles⁶⁶ have found that these residents reported feeling unsafe in these public spaces. This gulf between the realities of community residents and the perception held by local leadership was one key factor resulting in inequitable decision-making processes. This was especially a problem as the “quick-build” nature of pop-up bike lanes, open streets, outdoor dining and other response measures override the public feedback step which is necessary to tailor responses to the needs of the community but also to provide engagement opportunities to build trust and support.⁶⁷

KEY INFORMANT

“The idea of Slow Streets or Open Streets is a concept embedded in the assumption that people want to spend time on the streets, without being mindful of the fact that people have varying relationships with their streets.”

Ben Stone, *Director of Arts and Culture, Smart Growth America*

61. Cobbs, C. (2020, May 20). How do we make sure that open streets are truly open for everyone? Streetsblog Chicago. <https://chi.streetsblog.org/2020/05/20/how-do-we-make-sure-that-open-streets-are-truly-open-for-everyone/>

62. COVID19 Policing Project. (2020, October). Unmasked: Impacts of Pandemic Policing. <https://communityresourcehub.org/wp-content/uploads/2020/12/Unmasked.pdf>

63. Colman, T., Emmer, P., Ritchie, A., & Wang, T. (2021, January 6). The data is in. People of color are punished more harshly for Covid violations in the US. The Guardian. <https://www.theguardian.com/commentisfree/2021/jan/06/covid-violations-people-of-color-punished-more-harshly>

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65. Das, K.V., Fan, Y. & French, S.A. Park-Use Behavior and Perceptions by Race, Hispanic Origin, and Immigrant Status in Minneapolis, MN: Implications on Park Strategies for Addressing Health Disparities. *J Immigrant Minority Health* 19, 318–327 (2017). <https://doi.org/10.1007/s10903-015-0339-1>

66. Byrne, J. (2012). When green is White: The cultural politics of race, nature and social exclusion in a Los Angeles urban national park. *Geoforum*, 43(3), 595–611.

67. Thomas, D. (2020, June 8). ‘Safe Streets’ Are Not Safe for Black Lives. Bloomberg.com. <https://www.bloomberg.com/news/articles/2020-06-08/safe-streets-are-not-safe-for-black-lives>

II. LESSONS LEARNED

Equitable approaches to healthy community design

During the COVID-19 crisis, existing structural inequities outlined above resulted in disproportionate burdens on communities of color, including higher rates of serious disease and deaths during the COVID-19 pandemic. A recent analysis of 14 states' public health monitoring systems by the University of Utah found that COVID-19-associated hospitalization rates in the United States were highest in high-poverty census tracts, but rates among Black and Hispanic persons were high *regardless of poverty level*.⁶⁸

There is also vast documentation to show the immense employment and financial challenges that many people and families had to deal with when their jobs were shut down to protect public health. Many other, often essential, workers continued to show up to work but struggled with a lack of workplace protections from COVID-19, limited transit service, and other challenges generated or exacerbated by the ongoing crisis.⁶⁹ For example, the Washington State Labor Education and Research Center's 2021 report on the state's precarious essential workers one year into this pandemic revealed that "the economic shutdown during the pandemic drove workers in 14 of 26 high-risk, low-wage occupations to file for unemployment, food stamps, and emergency assistance at high rates. Those hardest hit include hospitality workers, personal care and services, vehicle operators, and managers in those fields. In addition to unemployment, the report documents the housing crisis now facing these workers as unpaid rent debts pile up."⁷⁰

Against this background of challenge and difficulty, what did cities do to expand access to safe public spaces and transportation options, whose lives did they impact, and what lessons can be drawn from these experiments to improve future approaches. **In this section we unpack six lessons gleaned from the field scan and interviews.**

KEY INFORMANT

“There’s a history of displacement in many communities, of not trusting the government and for legitimate reasons. Cities must be mindful when they experiment with interventions. This is a time to innovate and in a really inexpensive way - with paint and flex posts. These are learning labs and we should be intentional, inclusive, and willing to incorporate feedback from communications with communities.”

Bill Nesper, Executive Director, League of American Bicyclists

68. Wortham, J. M., Meador, S. A., Hadler, J. L., Yousey-Hindes, K., See, I., Whitaker, M., ... & Kim, L. (2021). Census tract socioeconomic indicators and COVID-19-associated hospitalization rates—COVID-NET surveillance areas in 14 states, March 1–April 30, 2020. *PLoS one*, 16(9), e0257622.

69. Introducing the Transit Equity Dashboard. (2021, June 17). TransitCenter. <https://transitcenter.org/introducing-the-transit-equity-dashboard/>

70. Groves, D. (2021, March 23). Precarious essential workers hit hardest by pandemic, report finds. *The Stand*. <https://www.thestand.org/2021/03/precious-essential-workers-hit-hardest-by-pandemic-report/>

LESSON 1

Recognize your discipline's limitations to measurably improve health equity—the challenges are interdisciplinary and your efforts must be as well.

The link between the social determinants of health, including social, economic, and environmental conditions, and health outcomes is widely recognized in the public health literature. Transportation policies, guidance, standards, and decision-making processes rarely account for interdisciplinary impacts of transportation decisions and often fail to evaluate and recognize the full impacts on communities.⁷¹ Active transportation projects—like implementing Complete Streets, streetscaping treatments, or design enhancements to parks and other shared places—are often done with the goal of improving safety for all users, increasing physical activity, providing a base for economic growth, or meeting sustainability goals. Achieving these goals, and the changes they entail requires creating a more inclusive decision-making process that brings other disciplines and people to the table.

Although there has been an enormous push for efficient interagency coordination, as well as for more fruitful public-private partnerships, many approaches in the name of inclusion and equity still fall short. The only way you can do this is by opening up the decision-making process to the many agencies and departments that work with a community's streets as well as other interested departments, community groups, and community leaders. Transportation, public works, and planning agencies that broaden the transportation decision-making process to include many more players who represent different disciplines beyond engineering and design are those that have made the most progress. Collaboration can take a number of forms, ranging from formal advisory committees appointed by officials, to informal

work groups, to project-oriented teams organized across departments. Whatever the format, these groups need the active participation of their members and an open mind to solve transportation and planning problems more holistically without creating unintended consequences. Infrequent meetings of disengaged group members that focus on dry staff reports will not produce the innovative thinking that is usually necessary to change everyday practice.

Public health agencies are effective at getting the right people in the room, and organizing outreach and education, though it is unusual for a public health entity to take the central leadership role during the implementation process. It is more common for public health to lend support to planning and public works agencies by serving as a convener and educator. Some public health agencies have sponsored Complete Streets workshops that bring together key collaborators to work out the implementation plan. They also sponsor walking audits, write brochures and research-based reports, and even make videos that help explain the benefits of Complete Streets. The public health community is generally well regarded and its opinions are respected. As a knowledgeable but newer participant in the transportation realm, transportation practitioners generally appreciate the support from public health and learn to ask health-oriented staff to weigh in at important steps in the transportation decision-making process. Public health grant programs increased the effectiveness of public health organizations. With this support, communities could build the necessary capacity to focus on Complete Streets implementation. It has enabled the creation of new, though mostly temporary, staff positions inside public health agencies, inside transportation agencies, or with non-profit groups with transportation expertise.

71. StreetSmart. (n.d.). Approach. <http://www.thinkstreetsmart.org/approach.html>

Boston's COVID-19 Health Inequities Taskforce

In June 2020, former Boston Mayor Martin J. Walsh declared racism a public health crisis, an acknowledgment of the link between the institutions, policies, programs, and practices that create, sustain, and exacerbate racism, and its relationship to health and wellbeing. Soon after, the Health Inequities Task Force (HITF) and the COVID-19 Equity and Recovery Team (CERT) were established. The CERT is comprised of long-time practitioners in public health, urban planning, community engagement, and equitable economic development. The newly-created Health Inequities Task Force was made responsible for analyzing racial and ethnic data on COVID-19 cases and consolidating best practices for COVID-19 inclusive responses and recovery efforts. Every week, CERT met with the Health Inequities Task Force, along with Health and Human Services, the Boston Public Health Commission, the Office of Economic Development, and the Office of Equity to workshop Health Equity Now plan goals, strategies, and implementation priorities, which resulted in the creation of the city's Health Equity Now Plan.⁷² The Plan outlines 18 recommendations for how the city should tackle structural inequities in Boston, of which the eighth is to Promote Active Living by “creat[ing] conditions in communities of color to support active living in order to help prevent physical and mental illnesses.” Each recommendation includes a suggested list of measurable objectives, including but not limited to those summarized below:

- Provide opportunities to incorporate fitness into everyday life and promote healthy lifestyle choices** by improving and increasing infrastructure for walking and biking; ensuring equitable access to quality and culturally relevant open space and recreation for all ages and abilities; launching a health and wellness campaign focused on increasing awareness and changing behaviors to improve health outcomes and involve youth in leading it; and connecting existing open spaces with safe and pleasant walking paths and develop a network of volunteers to help children, elders, and others access these.
- Increase cultural pride in the Bostonian community** by installing easily accessible, attractive, and navigable signage in the city's top 10 most commonly spoken languages; supporting communities of color to publicly celebrate and share their heritage with festivals, events, banners, and holidays; supporting communities to be actively involved in revitalizing key commercial corridors by leveraging cultural assets (e.g. conduct cultural asset mapping through Main Streets programs); and even supporting the creation of a mural festival with local artists and community participation.
- Achieve an increased sense of safety in the community** by developing of a citywide plan for supporting young people and helping them to feel welcome throughout the city's outdoor and indoor spaces; increasing efforts to reduce street violence and improve the relationship between police and residents; and evaluating the need for traffic calming in neighborhoods where majority residents are POC and implement measures where needed.
- Provide affordable, reliable transportation** by making more micromobility options available for neighborhoods that experience first-mile and last mile challenges; and reviewing recent research on ways in which women use transportation networks and have specific transportation needs and concerns and adapt accordingly.

72. Boston's *Health Equity Now Plan* integrates city planning and issues of health by examining how the Social Determinants of Health impact health, wellness and economic equity. An intersectional approach is applied in order to both celebrate our mosaic of multi-cultural diversity and to understand how gender, ethnicity, race, sexual orientation, religion, immigration status, disability, and economic status interact to impact health equity. This plan weaves a Theory of Change with data-driven strategies, and these in turn, span across city functions. [View the report.](#)

LESSON 2

Deploy tactical urbanism and demonstration projects (light/quick/cheap) to test ideas quickly, engage the community, and build trust.

If the first question for developing any project is “What are we doing and why?”, the first question for tapping local culture could be, “How can the distinctiveness of this place and the people in it contribute to the success of what we’re doing?” Developing projects in a way that incorporates and supports local icons, ethnic identities, and institutions can bolster public support for projects, result in projects that better meet needs, and are better used and loved by the community.

Done right, “light/quick/cheap solutions” like setting up temporary traffic barricades, creating pop-up parks, a neighborhood block applying for a temporary street closure, or a small business owner or park organization opting for moveable outdoor seats and tables over permanent infrastructure modifications, are a powerful tool to respond to a community’s evolving needs and preferences. They can also serve the larger purpose of showing people what is possible in the long-term—especially as we look at COVID-19 recovery strategies. “Light is about making manageable and flexible improvements with little economic burden. Along with the satisfaction of seeing immediate results, this also means that if something doesn’t work, there is room to try something else.”⁷³

The pandemic has provided lessons about how to plan and implement these projects in ways that build rather than eroding trust. Some light/quick/cheap projects received pushback because they were deployed without community input before the project, but that does not need to be the case, even for projects planned and installed relatively quickly.⁷³

Having a community engagement plan in place upfront, building directly on engagement previously conducted in the community, and communicating clearly about the purpose of the project—to provide space for direct input before a potential change is made permanent—are all key steps to take.

“A light/quick/cheap (LQC) strategy allows for experimentation over time. Places are always evolving alongside the needs and desires of the people that use them, and the flexibility of an LQC approach can nurture this dynamic relationship between people and place.”

From the [Action Plan for Lighter Quicker Cheaper report](#) for the City of Meridian, Idaho⁷⁴

Temporary use initiatives can also be a great economic development strategy by promoting communities’ willingness to innovate and allow organic cultural initiatives to flourish. SGA’s Creative Placemaking Field Scan found that cities from coast to coast are increasingly appealing to tourists and potential transplants through public programming like festivals, farmers’ markets, pedestrian havens, and a variety of organized free outdoor activities. **Tactical urbanism is not about achieving perfection; it’s about implementing impactful interventions that leverage short-term action for long term change.**⁷⁵

73 & 74. Action Plan for Lighter Quicker Cheaper approaches for the City of Meridian, Idaho. (2015). City of Meridian. <https://meridiacity.org/planning/files/LQC%20Placemaking%20report%20Final.pdf>

75. Kittelson & Associates, Inc. (n.d.). Adapting Public Spaces During COVID-19: 3 Examples of Tactical Urbanism Projects. <https://www.kittelson.com/ideas/adapting-public-spaces-during-covid-19-3-examples-of-tactical-urbanism-projects/>

Temporary, context-relevant projects can also be an effective way to involve people from diverse backgrounds in planning decisions and build community trust. Retrofitting existing spaces quickly and flexibly with enhanced lighting, signage, public sitting and activity-designated areas, and public arts can address a wide range of needs related to the public realm. And the process of doing so creates opportunities for more creative approaches to community engagement and participation. By taking visible, proactive steps to highlight the voices of the people who have been underrepresented throughout history and collaborate with them to realize their vision for their communities, local decision-makers are making an affirmative, unequivocal statement about their priorities. Light/quick/cheap projects meant to reclaim public space from cars and open them back up to people provide a great opportunity to reimagine the built environment in a way that prioritizes opportunities for exercise and a healthy lifestyle, socializing and relationship-building, and adequate connectivity across the community.

The Scenic Route: Getting Started with Creative Placemaking in Transportation is an online interactive guide to creative placemaking, an emerging approach to planning and building transportation projects that taps local culture and to produce better projects through a better process.

Creative placemaking harnesses the power of arts and culture to allow for more genuine public engagement—particularly in low-income neighborhoods, communities of color and among immigrant populations—in the development of transportation projects. Forget the traditional, staid public meeting format and instead imagine artists engaging community members using multiple languages to generate meaningful dialogues, capturing their creativity and local knowledge to better inform the ultimate design of the project.

Done right, creative placemaking can lead to both a better process and a better product. The end results are streets, sidewalks and public spaces that welcome us, inspire us and move us in every sense of that word. It doesn't take much to get started, but it does require a new approach to public engagement along with intentional partnerships with artists, arts councils and community-based organizations.

The Scenic Route website features a series of case studies categorized by mode, approach, and location. Some of the best examples are: the 11th Street Bridge Project in Washington, DC, an infrastructure reuse that will soon create a new world-class destination park, provide a new pedestrian connection across the Anacostia River, and support neighboring residents; Downtown Pathways in the City of El Paso, which used cultural programming and public art to create a more efficient pedestrian connection between two centers of cultural and economic activity in the city; and Santo Domingo's Heritage Trail Arts Project, where the rich artistic and cultural assets of the pueblo guided and informed a process to create a safe pedestrian trail connecting the town, the pueblo housing developments, and a new commuter rail station. [Read more here.](#)

TOOL EXAMPLE

Design for Distancing Initiative

In May 2020, when stay-at-home orders were still in place and small businesses were uncertain about how to reopen, the City of Baltimore made a \$1.5 million investment to help small businesses open without compromising public health. They chose to make this investment in a tactical urban design initiative: Design for Distancing. Launched as a partnership between the city, the Neighborhood Design Center, the Baltimore Development Corporation, and Johns Hopkins Bloomberg School of Public Health, Design for Distancing included two components. First, it sponsored a design competition seeking innovative ways to reconfigure public spaces to help small businesses reopen and adapt to physical distancing requirements. Second, it launched a pilot initiative to implement winning designs in Baltimore commercial districts and embed public health best practices within the city's urban landscape to support economic recovery at large. Of 162 submissions to the competition, 10 designs were selected and published in the Design for Distancing Ideas Guidebook. The city then paired winning local design-build teams with Baltimore districts to scope and implement the interventions. Design teams received stipends for their work and districts received up to \$100,000 in financial support for implementation. All submitted designs were required to consider a range of users and groups and support their safe interaction (from young children to seniors; from single people to large families differently abled patrons, etc.). The MicroDistrict model, for example, proposed a staffed pop-up hub and neighborhood anchor that safely and enjoyably meets neighborhood needs through a variety of functions, including kids' activities, health checks, food trucks and mobile pantries, haircuts, art, mobile libraries, and internet access. Make ApART, another winning proposal, redesigned a vacant lot across the street from Creative Alliance in Highlandtown that provides a physically safe, collectively social venue that brings diverse groups together using art classes, performances, and other encounters.



Open street workshop, Springspark, NY | Picture by City Street Lab

76 & 77. City of Baltimore. (2020). Design For Distancing Guidebook. <https://www.designfordistancing.org/>

78. Milner, J. (n.d.). How Can Placemaking Lead to a More Inclusive Recovery? Urban Institute. <https://www.urban.org/research-action-lab/projects/inclusive-recovery-insights/how-can-placemaking-lead-to-a-more-inclusive-recovery>

II. LESSONS LEARNED

CASE EXAMPLE

Demonstration Project in Wenatchee, WA

In July 2021, a multidisciplinary team from Wenatchee, WA installed a temporary project to improve safety at the complex intersection of Methow St., Orondo Ave., and Okanogan Ave., one of the top five most dangerous intersections in the community. To ensure their project properly met the community's needs, the team created an engagement plan that took into account the largely Spanish-speaking population residing in the neighborhood. Wenatchee's plan included a socially distant pop-up market event as a vital tool for community feedback and engagement in real time at the intersection and neighboring park. To encourage attendance and community ownership, the planning team distributed bilingual flyers, postcards, and posters and reached out directly to groups that might not think to join a transportation event, including dance groups, zumba instructors, artisans, food vendors, and local community-based organizations. Throughout the event, a bilingual team of communicators mingled and encouraged input about the project. The Wenatchee team also built a clear, highly visible process for accountability to the community by collecting ideas during the event on a sticky note board. **When a resident raised a concern, the team used it as an opportunity to work with that resident to come up with a solution in real time, sometimes making the suggested changes while the project was up.**

At all stages of the pop-up demonstration, the Wenatchee team emphasized that the pop-up was temporary, and a key opportunity for the community to make their voices heard before permanent change. At the end of the event, the team thanked the volunteers, sponsors, community organizations, and local residents who came. By demonstrating that they valued community input and describing how they would incorporate community feedback, the team was able to build trust.⁷⁹



79. Learn more about Wenatchee's project and other light/quick/cheap projects in Washington State: <https://smartgrowthamerica.org/complete-streets-safety-demonstration-project-wenatchee-wa/?eType=EmailBlastContent&eld=8a0c2158-c545-40aa-b9b1-a7ef21a78581>

LESSON 3

Commit significant resources to ongoing engagement in ways that build trust in the community's key audiences.

Decision-making must move at the speed of trust. But how do you build trust? Rather than treating community engagement as a checkbox exercise, an inclusive community engagement plan overcomes barriers to participation for underrepresented communities, which could include non-native English speakers, people living with disabilities, and people who can not afford or do not have access to a personal vehicle. This requires holding public meetings at easily accessible times and places, collecting input at community gathering spaces, and hosting and attending community meetings and events. The best community engagement plans don't require people to alter their daily routines to participate and should make use of the places where people already are such as clinics, schools, parks, and community centers.

The work inside agencies to build understanding, buy-in, and new skills may take many months but it is key to engage with various partners every step of the way, albeit in different capacities. Residents, business owners, and community officials do not need a detailed understanding of the process, but up-front and consistent communication on new projects is critical. If community members see automobile lanes or parking being removed without understanding the reasoning, they may block further progress. Building opportunities for feedback and communication may also solicit positive input from the community along with negative feedback, both of which are important and necessary to capture early on to ensure that the needs of the community are being served.

Back in 2013, the Local Government Commission (LGC) was commissioned by the California Endowment to develop the *Participation Tools for Better Community Planning* guidebook,⁸⁰ which provides an overview of public participation tools that can help communities plan for health-promoting land use and transportation. LGC's guidebook details the many practical benefits of engaging residents in planning decisions, including debunking myths and misunderstandings between residents with competing values and interests (whether real or perceived), helping people understand project tradeoffs, expediting the development process for projects that meet goals of residents, and enhancing trust in local government.

KEY INFORMANT

“The point is that you should have these processes set up way before the crisis happens, be proactive. Go in the community walking, biking, and rolling around asking questions or holding meetings at the community center or have spaces for regular feedback where people could put comments, like at the library or hospitals.”

Dara Baldwin, *Director of National Policy, Center for Disability Rights*

80. Local Government Commission. (2013). *Participation Tools for Better Community Planning*. https://civicwell.org/wp-content/uploads/2022/01/Participation_Tools_for_Better_Community_Planning.pdf

81. Ramsey County. (n.d.). Equity Action Circle. Retrieved February 24, 2022, from <https://www.ramseycounty.us/covid-19-info/racial-equity-community-engagement/equity-action-circle>

82. Ramsey County. (2020, October). COVID-19 Equity Action Circle 2020-2021 Recommendations. <https://www.ramseycounty.us/sites/default/files/Projects%20and%20Initiatives/Coronavirus/COVID-19/EAC%20Recommendations%20Report%2010.18.2020%20FINAL.pdf>

TOOL EXAMPLE

Community Advisory Committee

An advisory group focused on outreach can be a powerful tool to raise awareness of sensitivities that project organizers need to be aware of. In Ramsey County, MN, the Racial Equity and Community Engagement Response Team (RECERT) formed a community advisory committee, known by locals as the “Equity Action Circle,” in May 2020. The Equity Action Circle, consisting of 15 community members representing a diverse range of backgrounds, was assembled to provide guidance “to the County’s Community Engagement team and County Manager on how to best “meet the unmet needs of racial and ethnically diverse residents for the COVID-19 response, in order to prevent exacerbated racial disparities and improve county operations, service delivery and program administration. The Equity Action Circle will advise the County Manager and RECERT on identified priority areas, policies, systems and environmental changes with a racial equity lens.”⁸¹ Five months later, this advisory committee released the COVID-19 Equity Action Circle 2020-2021 recommendations detailing specific objectives to address Ramsey County’s short-, mid-, and long-term needs. These objectives cover a range of enhanced services and amenities including language accessibility support, healthcare and public health education, affordable housing and transportation, and more.⁸²

“Out of our effort to have thousands in the community participate came the Seventh Principle of the new general plan: Citizen Participation Will Be a Permanent Part of Achieving a Greater City. This principle has changed government, making it more open, responsive and effective. It has also raised the level of trust among citizens – not in trusting City Hall, but in trusting that they own City Hall.”

Former Pasadena, CA Mayor Rick Cole; retrieved from LCG’s *Participation Tools for Better Community Planning Guidebook*

“Nationwide, parks play a vital role in the health and wellbeing of community members as well as the livability of our cities. Historically disadvantaged communities, including immigrants, experience poorer general health and shorter life spans than white community members. Research shows that the number one prescription for healing health and educational disparities is to provide access to parks and open space.”

From the City of Minneapolis’ *Racial Equity Action Plan*

CASE EXAMPLE

COVID-19 Community Impact Survey

In order to gain a better understanding of the impact of COVID-19 on health and well-being of these communities, as well as their perceptions about the effectiveness of the local response to the crisis, New American Economy (NAE) worked with local officials and community partners in Atlanta, Austin, Denver, Louisville, and Tulsa from February to May of 2021 to conduct a COVID-19 Community Impact Survey of more than 2,100 predominantly BIPOC and immigrant residents. The survey, which was distributed in 16 different languages, was designed with the goal to inform how each of the five partner communities respond directly to COVID-19 and adapt their disaster preparedness and resilience work to be more inclusive of communities of color. The 43 items making up the questionnaire address the following key areas: personal and household well-being; access to economic relief; cultural and linguistic inclusion; and perception of COVID-19 response and sense of belonging.

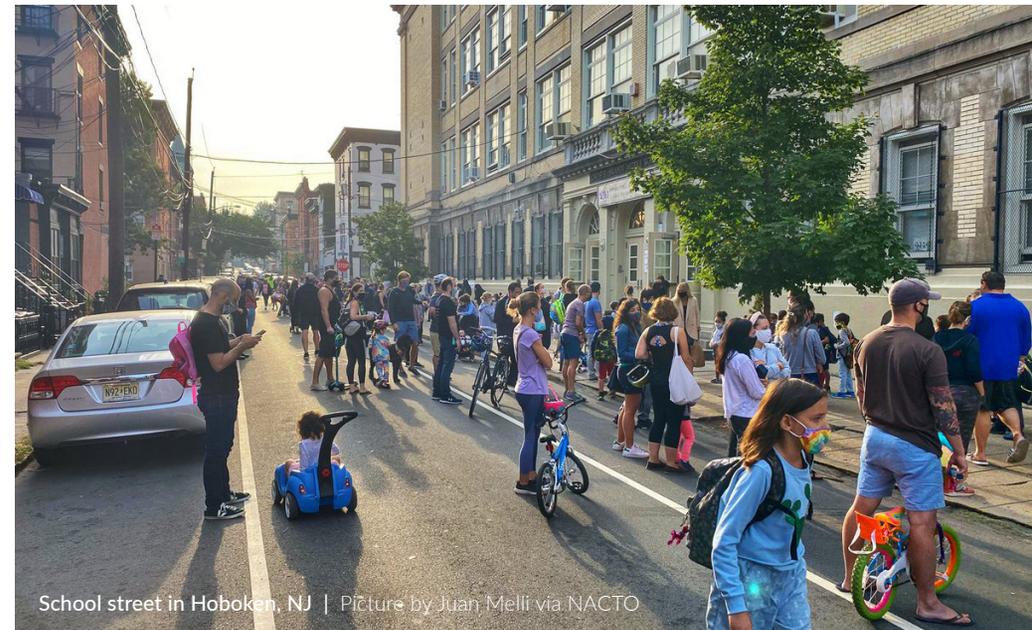
LESSON 4

Consider how different groups of people use and relate to streets and public spaces and then embed that awareness deeply into your plans and processes.

How do you define and measure the success of your community's transportation network, and take the adequate steps to ensure that the needs of your most underserved neighbors are prioritized in that definition? Everyone has a different relationship with the streets, parks, and the rest of the public realm they interact with every day, whether because of who they are, how they live, the design of those elements, and even regulatory elements like law enforcement and land use permits. Design alone can rarely succeed at making a public space active and inclusive. But it does provide an important foundation. The look, feel, and function of a public space—its design—determines who can navigate to and within a space, to whom it appeals, and what types of activities can take root there. While thoughtful programming may attract a diversity of people, bad design can make that programming ineffective or impossible, and make potential users feel uncomfortable and unwelcome.⁸³

Agencies must review the rules, procedures, and habits that have typically guided them. Facilities for bicycling, walking, active mobility with assistive devices, and taking and operating public transportation are simply not in some plans, codes, manuals, and other guiding documents. They can, and must, be added. Some communities do this systematically by reviewing all documents that might affect transportation. Others work through pilot projects, finding the issues that must be corrected as they work through the project.

Changing the design of streets and public space requires changing the process used to make transportation decisions. That requires identifying the systems, routines, silos, and assumptions that, together, have created the current transportation system, with the help of the people those systems haven't served well in the past. For example, Complete Streets programs are strongest when the committee that coordinates and oversees implementation includes representatives from the most vulnerable communities prioritized by the policy, such as older adults, people living with disabilities, people who do not own or do not have access to a personal vehicle, and Black, Native, or Hispanic or Latino/a/x people.



83. Peinhardt, K., & Storrington, N. (2019, July 2). Programming for Inclusion: Enhancing Equity through Public Space Activation. Project for Public Spaces. <https://www.pps.org/article/programming-for-inclusion-enhancing-equity-through-public-space-activation>

The following are key aspects of transportation decision-making to evaluate and update:

- **Review and revise design guidance:** At many transportation agencies, the street design manual is the go-to reference for all projects. If that manual is not supportive of flexible, context-sensitive, and multi-modal approaches, this can be the largest barrier a community faces. A flexible manual can empower planners and engineers to develop design solutions that balance the needs of many users and support the surrounding neighborhood.
- **New measures of performance:** Creating and using new performance measures for transportation projects and the transportation system is essential. It helps agencies ensure if they are on the right track—and helps them celebrate their new way of making decisions. Performance measures can track positive outcomes of active and multi-modal transportation projects (such as improvements to health and safety), changes to decision-making processes (such as other policy updates and project exemptions), and equity improvements (such as more just investment in underserved communities or reduction of health and safety disparities). Having data that demonstrates success can become a powerful selling point for future projects and funding.
- **New approaches to select and prioritize projects:** Jurisdictions usually have more potential transportation projects than they have funding to implement at any given time. Usually the decision about which projects move forward is based on congestion for cars, political will, or “squeaky wheel” complaints from the community. To ensure these projects mitigate rather than exacerbate disparities by prioritizing the needs of vulnerable, underinvested communities, a Complete Streets policy should establish project selection criteria to ensure funding is allocated fairly and equitably. Examples of criteria for determining the ranking of projects should include assigning weight for active transportation infrastructure; prioritizing underserved communities; alleviating disparities in health, safety, economic benefit, and access to destinations; and creating better multimodal network connectivity for all people who use the street.

TOOL EXAMPLE

Geographic Equity Toolbox for Project Prioritization

Oakland’s Slow Streets program is an example of a common issue of limited community engagement and absence of feedback mechanisms to understand diverse user needs during rapid response or quick-build project implementation during the pandemic. Based on the findings from their Interim Findings Report, the city was quick to revisit their implementation processes of the Slow Streets Program, evaluate existing slow street corridors and make context specific changes based on the feedback received.⁸⁴ The city also used its Geographic Equity Toolbox to prioritize outreach and maintenance requests for the program.⁸⁵ The tool was developed to inform OakDOT’s work and to guide their investments to advance DOT’s Racial Equity Goals and citywide efforts. The city describes the tool as a mechanism to provide a data-driven context for how disparities play out spatially across Oakland and not as a replacement to community engagement efforts. In an interview with Bloomberg, Warren Logan, Oakland’s policy director of mobility and interagency relation said, the work to improve Slow Streets, which will be extended into the foreseeable future, is “a trust-building exercise” that could produce results beyond road regulations. “It could change how the city operates, especially in respect to communities of color.”⁸⁶

84. City of Oakland. (2020). Oakland Slow Streets Interim Findings Report. <https://www.oaklandca.gov/documents/oakland-slow-streets-interim-findings-report-september-2020-1>

85. OakDOT Geographic Equity Toolbox. (2020, July 22). City of Oakland. <https://www.oaklandca.gov/resources/oakdot-geographic-equity-toolbox>

86. Surico, J. (2021, April 29). Can 'Open Streets' Outlast the Pandemic? Bloomberg CityLab. https://www.bloomberg.com/news/articles/2021-04-29/what-s-next-for-the-open-streets-of-the-pandemic?cmpid=BBDO43021_CITYLAB&utm_medium=email&utm_source=newsletter&utm_term=210430&utm_campaign=citylabdaily

Many transportation and land-use investments are concentrated in the same areas, with an ongoing cycle of disinvestment in other areas. For many, COVID-19 is a life-or-death crisis where your ZIP code determines if you physically and financially survive. Performance measures should address categories like access, economy, environment, safety, and health while accounting for how implementation will impact communities of concern. It is imperative to revisit the community's definition of progress and the metrics used to determine success. Using mapping and data-centric tools can come in handy to advance equity through evidence-based decision making. Measuring performance in transportation is about more than keeping your road smooth; it's about spending limited public dollars on projects that do the most good for all members of our community.

87. Bliss, L. (2020, April 17). How Oakland Made Pedestrian-Friendly Slow Streets. Bloomberg. <https://www.bloomberg.com/news/articles/2020-04-17/how-oakland-made-pedestrian-friendly-slow-streets>

88. About Slow Streets - FAQs. (2021, November 22). SFMTA. <https://www.sfmta.com/reports/about-slow-streets-faqs>

89. City and County of Denver. (n.d.). Denver to Launch Next Phase of its Shared Streets Initiative. <https://www.denvergov.org/Government/Departments/Department-of-Transportation-and-Infrastructure/Programs-Services/Shared-Streets>

90. Baruchman, M. (2020, May 7). Seattle will permanently close 20 miles of residential streets to most vehicle traffic. The Seattle Times. <https://www.seattletimes.com/seattle-news/transportation/seattle-will-permanently-close-20-miles-of-residential-streets-to-most-vehicle-traffic/>

91. Safe Streets Initiative | Portland.gov. (n.d.). City of Portland. <https://www.portland.gov/transportation/safestreetspdx>

92. City of Austin. (n.d.). Healthy Streets. <https://www.austintexas.gov/HealthyStreets>

93. City of Austin. (2020, September). Second Report on the Healthy Streets Initiative (Resolution No. 20200507-062). <https://www.austintexas.gov/edims/pio/document.cfm?id=347646>

94. City of Austin. (n.d.). Healthy Streets. <https://www.austintexas.gov/HealthyStreets>

Austin's Self-Enforced Healthy Streets Program

Deeply-rooted disparities in the experiences of different communities on our streets impact the ability of those communities to safely access and enjoy the programs that were created in response to COVID-19. Many cities like Oakland,⁸⁷ San Francisco,⁸⁸ Denver,⁸⁹ Seattle,⁹⁰ Portland⁹¹ kept their programs self-enforced, limiting the involvement of law enforcement.

Austin's Healthy Streets Program was launched in the summer of 2020⁹² involving the closure of approximately 10 miles of street in 7 of 10 council districts, focusing on interventions to create spaces and routes for walking, bicycling or using other personal and assistive mobility devices while being able to maintain physical distances.⁹³ Instead of relying on traditional law enforcement approaches (or even visible police presence), the program was enforced with partnerships between city staff and community block captains, who were volunteers from the community itself. Over the first three months of the program, the program had 32 people serve as volunteer block captains to support the Austin Transportation Department's (ATD) efforts to engage with the neighborhoods served by these streets.⁹⁴ Closing streets to cars for expanded space for public activities is rooted in the idea that everyone had the luxury to stay at home, but that was not true. As many essential workers continued to travel throughout these unprecedented times, community-led programs can support a greater understanding of the diverse needs in the community, especially of those who continued to be in more vulnerable situations than others.

LESSON 5

Institutionalize more flexibility into regulations and policies governing public spaces to accommodate evolving community needs and priorities.

The pandemic underscored the importance of reviewing guidance and regulation for use of our streets, curbs, and public spaces. It became apparent that flexibility in the use of public space offers great potential for pursuing economic activities while lowering capital investments. In regular times, changes like these could take months, even years. Review of land use, design, and other regulations is necessary to make our processes transparent, easy, and accessible for everyone, especially those with fewer resources. Municipalities should use this as an opportunity to set up regular review processes to identify policies that need to be updated as an ongoing practice to meet the changing demands and needs of the communities.

Instituting more flexibility requires gaining a thorough understanding of existing decision-making structures and determining specific actions that remove barriers. In some cases this means creating entirely new decision-making systems. Communities that do not understand the current decision-making process can be stuck by unexamined procedures and rules, resulting in very limited changes.

The process of developing this understanding has the advantage of building relationships and a common vocabulary before difficult decisions have to be made.

Over the course of the pandemic, cities and states across the country recognized the barriers presented by existing regulations and took steps to change zoning codes, food safety rules, and other regulations to allow micro-entrepreneurs to launch and operate home-based businesses such as in Ann Arbor, which after more than a year into the pandemic-induced downturn, relaxed its city ordinance in early September 2021 to allow in-home enterprises to welcome more clients.⁹⁵ Every state allows some type of home-based, or “cottage,” food production, and this year at least 16 states passed legislation that further relaxes food safety, licensing and permitting rules for those producers while 10 more states are considering it.⁹⁶ It is important to note that this flexibility was sought in many places before the pandemic hit but the dire need for this pushed many legislators to act more promptly in the recent months. For example, Nashville, Tennessee, a city which was battling a lawsuit from 2017 contesting the ban on virtually anyone working in a “home occupation” from seeing clients on-site passed a rule in July 2020 for allowing home occupations such as musicians, hairstylists and others to see clients in their homes—during certain hours, and with a permit.⁹⁷

KEY INFORMANT

“We need to have more accommodation for how different cultures like to use public spaces, whether they’re parks or streets and not attempt to impose a set of values, or morals on what an appropriate use of the public realm is. Utilize outreach to build cultural competence.”

Mike McGinn, *Executive Director, America Walks*

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II. LESSONS LEARNED

CASE EXAMPLE

Portland's Healthy Business Initiative

In May 2020, the Portland Bureau of Transportation (PBOT) launched its Safe Streets Initiative to prioritize physical distancing on Portland's streets during the pandemic. The program identified three strategies that became the pillars of the initiative namely Safer Busy Streets, Healthy Businesses, and Slow Streets.⁹⁸ PBOT converted 100 miles of already low-traffic streets into "local access only" to restrict cut-through traffic under Slow Streets. The Busy Streets initiative closed streets to traffic in areas with narrow sidewalks, crowded bus stops, or busy intersections using physical barriers, paint, and other markings to create more room in crowded areas. And lastly, the Healthy Businesses initiative helped local businesses adapt to physical distancing guidelines with a business toolkit⁹⁹ to provide more space for pickups and deliveries, places for customers to line up to pick up their purchases and also worked with businesses and organizations to allocate space in the sidewalk and street for retail, services, restaurants/cafes, and groceries.¹⁰⁰ In the summer of 2020, PBOT issued over a 1000 permits allowing local businesses, supplied free 5-minute pickup/drop-off signs, free and discounted paint supplies for street painting projects to support creative use of street space for businesses to safely serve their customers over the pandemic. They also particularly supplied free traffic control devices and outdoor dining plaza kits to BIPOC-owned businesses. The initiative received an overwhelmingly positive response in a survey they conducted in September 2020 and PBOT continued the program through the summer of 2021 as well.¹⁰¹

All of the Safer Busy Streets installations were in areas that scored higher on PBOT's Equity Matrix using three demographic variables—race, income, and limited English proficiency (LEP). The interventions, as a result, prioritized census blocks with points above citywide averages for these variables i.e. census blocks with a higher than citywide average concentration of people of color and/or people with LEP, and or people below the average for total household income.¹⁰²

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LESSON 6

Provide access to a diverse range of transportation options in rural areas and small towns, not just more urban areas.

Unlike in densely populated urban communities, residents in rural areas and small towns do not have access to a wide range of mobility options. Typically, fixed-route public transit service is either limited or non-existent, flexible services require significant advance notice, and use of a private car might be the only available mode of transportation. Time and time again, federal policymakers have operated under the assumption that living in a rural area inevitably means spending a lot of time driving long distances to accomplish daily needs—and that rural residents have great enthusiasm for this. But this belief is out of touch with the reality of rural life, where more than one million households don't have access to a car, and for the most part, life is still arranged around small downtowns or town centers.¹⁰³

If individuals in these lower-density communities cannot drive themselves, they often lack access to alternatives. For example, a study conducted in New Brunswick, Canada found that if older drivers in rural areas lost access to a personal vehicle, they would not make 34 percent of the trips they normally do.¹⁰⁴ From a health and wellness standpoint, that lack of mobility is not just frustrating, but also dangerous; an older adult who cannot drive has an immediate increased risk for adverse health outcomes, and takes 15 percent fewer trips to the doctor.¹⁰⁵ In a 2018 survey by the National Aging and Disability Transportation Center, forty percent of the non-driving older adult survey respondents cited access and availability of affordable transportation as a barrier.

As a result of these challenges, public agencies, nonprofits, and companies are collaborating in new ways to leverage emerging technology and service models to improve mobility options for rural and small town residents. Some agencies, like the Michigan Department of Transportation,¹⁰⁶ are focusing attention on populations with the greatest mobility difficulties, like the elderly and people with disabilities. Others, like the Vermont Agency of Transportation,¹⁰⁷ are seeking to develop online platforms that better facilitate the use of flexible modes of transportation like dial-a-ride services. Still others, like the Green Raiteros¹⁰⁸ in rural California, are combining their decades of experience with private sector support to enhance their newly-formed volunteer transportation organization. And others still, like Iowa-based company Koloni,¹⁰⁹ are working to find models for shared micro-mobility services that better fit the needs of smaller communities. These examples demonstrate just a few of the ways public agencies, companies and multi-sector partnerships are working to close mobility gaps in small and rural communities.

103. Transportation For America. (2021, September 9). It's time for infrastructure that works for rural America - Transportation For America. <https://t4america.org/2021/09/09/better-approach-to-rural/>

104. Hanson, T.R., & Hildebrand, E. (2011). Can rural older drivers meet their needs without a car? Stated adaptation responses from a GPS travel diary survey. *Transportation*, 38, 975-992.

105. Grantmaking in Aging (2018 April). The Future of Rural Transportation and Mobility for Older Adults: Current Trends and Future Directions in Technology-Enabled Solutions.

106. Shared Use Mobility Center. (n.d.). Michigan DOT awards grant to P3, others to establish ride-sharing platform in Upper Peninsula, MI, 2019. <https://learn.sharedusemobilitycenter.org/overview/michigan-dot-awards-grant-to-p3-others-to-establish-ride-sharing-platform-in-upper-peninsula-mi-2019/>

107. Shared Use Mobility Center. (n.d.). Vermont Flexible Trip Planner: Bringing Fixed and Flexible Transit Together on a Single Platform. <https://learn.sharedusemobilitycenter.org/casestudy/vermont-flexible-trip-planner-bringing-fixed-and-flexible-transit-together-on-a-single-platform/>

108. Shared Use Mobility Center. (n.d.). Green Raiteros volunteer transportation organization, Huron, California, 2018. <https://learn.sharedusemobilitycenter.org/overview/green-raiteros-volunteer-transportation-organization-established-in-rural-farming-community-huron-ca-2018/>

109. Shared Use Mobility Center. (n.d.). Small bikeshare system launched in Pocahontas, Northwest IA, 2018. <https://learn.sharedusemobilitycenter.org/overview/small-bikeshare-system-launched-in-pocahontas-northwest-ia-2018/>



Shared Use Mobility Center: Active transportation systems (like bikeshares) leveraging anchoring institutions and local assets to succeed

For example, when Koloni, an Iowa-based bikeshare company looks for communities that might be interested in its small-town-specific bikeshare model, it starts by looking for places that have assets that help small bike share systems thrive. According to Koloni CEO and co-founder Brian Dewey, they search for small communities that are home to college campuses, existing pedestrian or bike trails, or influxes of tourists. Furthermore, a number of municipalities that are potentially too small to justify an independent bikeshare program are collaborating with their neighbors to establish county-wide programs. [Read more on the *Shared Use Mobility Center* website.](#)

III. CONCLUSION

Shared, slow and safe spaces are key to resilient, healthy and equitable communities

In the U.S., health risks associated with COVID-19 including death have been disproportionately concentrated in communities with long-standing barriers to active mobility and other forms of physical exercise, largely due to sprawling development, high housing costs in urban centers, lack of public transit, unsafe or unexisting active travel infrastructure, and scarcity of attractive public places for people to move around and interact with people and nature. At the same time, many of these communities face other systemic barriers like inequitable law enforcement, poor transparency in public processes, disproportionate deployment of resources across the community, and continued disregard for the particular needs of people with disabilities. These disparities existed before the pandemic, but COVID-19 brought them to the forefront while also forcing public decision-makers to expand and retrofit systems for quick responses in order to create more shared, safe and slow spaces.

The COVID-19 pandemic drove cities to experiment with changes to parks, outdoor spaces, streets, and the public realm, as the widespread lockdowns starting in 2020 subsequently inspired millions of Americans to seek out open space near their homes. COVID-19 response in many municipalities across the country steered away from prescribed approaches; cities sought, planned, and implemented new alternatives to create shared space and opportunities for active travel, often evolving at a pace never seen before. COVID-19 showed us that we can implement innovative approaches within short timelines with a clear purpose, strategic management of resources, and focus on responding to the needs and priorities of the community. These experiments with open space in cities across the country to meet that demand were vital and valuable, though not always deployed in ways that engaged everyone or benefitted the people who already lacked safe ways to get around or convenient access to beautiful public spaces. We need to continue these experiments, but they can be done better.

KEY INFORMANT

“COVID was like an accelerator, magnifying our challenges that were already there with a finer lens, all at once. It has been a unique opportunity to review performance measures, recommit to shared goals and build partnerships between health and transportation sectors to help us build back better for all.”

Bill Nesper, *Executive Director, League of American Bicyclists*

III. CONCLUSION

As we look back at the beginning years of COVID-19 and these experiments, we should learn from these lessons. Our conventional approaches to transportation, land use, safety and enforcement from before the pandemic are neither making our communities resilient nor our streets and public spaces safer for people. At all levels of government, transportation funding and resources continue to prioritize vehicle travel and speed over getting all people where they need to go in a safe, convenient, accessible, and affordable way. We lean too heavily on forms of enforcement that can be dangerous and expensive, instead of designing our roads for slower speeds and safer interactions for people. Conventional zoning codes have led us to more sprawling and disconnected built environments with separated uses that produce densities that are too low to make transit viable, contributing to the prevalence of car-centric transportation networks. We must use this unprecedented time of change to address these barriers.

Prioritizing safe access to public spaces and active travel is a matter of public health and equity. That essential work won't be easy or quick. As the lessons learned highlighted in this report suggested, this work will need a combination of efforts from bringing together experts from different disciplines to meaningful community engagement efforts to utilizing and creating space for deploying innovative and cost-effective methods such as demonstration projects and all along being conscious of the fact that these processes cannot be yielding blanket solutions for diverse communities or be limited to efforts focused only on more urban and larger cities only.

All in all, creating a network of active transportation connections to improve access to essential destinations, fresh air and public spaces for essential physical activity—especially for those who don't currently have that access—is something city leaders must do to improve quality of life in every community.



APPENDIX A.

KEY INFORMANT INTERVIEW GUIDING QUESTIONS

Overview

All through last year, the COVID-19 pandemic pushed some communities to retrofit streets to make it easier for people to walk, bike, roll, and use transit while safely social distancing. With support from CDC's Active People, Healthy NationSM Initiative, Smart Growth America (SGA) is developing a resource that will outline what we learned from active transportation responses during COVID and recommendations for moving forward.

To inform this resource, SGA is conducting a series of interviews with experts at partner organizations with expertise in active transportation, transportation equity, and/or reducing health disparities.

Questions

- When you reflect on active transportation during COVID-19, what is one thing you learned and how will that affect your work moving forward?

#1 Evaluating active transportation responses

- Oakland is one example of a local government that had a strong active transportation response, in part due to the iterative approach it used in listening to its community and making changes appropriately. What other cities did a good job with active transportation during the pandemic and how? Which cities fell short?
- Many cities launched Slow or Open Streets, but few were designed with essential workers in mind. What do you think were the implications of that? How do you think cities could have responded differently?
- Government response, both before and during COVID-19, typically benefits wealthier, white neighborhoods. How can cities more equitably respond to neighborhoods? What are the biggest constraints preventing that from happening?
- Did cities approach community engagement differently to accommodate for distrust in governments? If so, how? How should they moving forward? Why haven't they already done that?

APPENDIX A.



- Are you familiar with communities that created active transportation initiatives that addressed systemic racism and the impact of policing on public space?
- Why is it important to track qualitative measures of success in active transportation? Which cities or organizations do you think are doing a good job with this?

#2 Lessons learned & post-COVID

- Numerous temporary active transportation projects were rolled out during COVID-19. Would you like to see these kinds of projects stick around? What are the biggest barriers to seeing these in the future?
- What is the role of public health in transportation safety? What should public health departments have learned in 2020 in terms of public safety and public space? How should they implement that information moving forward?
- How can transportation professionals better engage and partner with public health?
- Should advocates continue to praise the economic benefits of active transportation? How can we ensure active transportation investments equitably benefit communities?
- Are there specific initiatives, programs, or policies that you'd like to see stay post-COVID-19?
- What is the most important thing cities can do to ensure active transportation investment is equitable moving forward?

APPENDIX B.

LITERATURE REVIEW: THE BUILT ENVIRONMENT & HUMAN HEALTH

Increased focus on the connection between transportation, land use, and health outcomes largely triggered by the COVID-19 pandemic has resurfaced a substantial body of research demonstrating the health impacts and costs of different approaches to transportation policy. Some key findings include:

The U.S. Census Bureau reported in 2021 that the daily average American commute time between 2006 and 2019 hit a new high of 55.2 minutes, assuming one round trip. The time expense involved in commuting—which can be relatively higher for lower-income households—contributes to almost one in four adults in the United States reporting that they do not engage in any physical activity outside of their jobs.

- Sedentary lifestyles are an [important reason](#) that two of every three adults in the United States are overweight or obese.
- Lachapelle and Frank found that Atlanta residents who had employer-sponsored transit passes were [more likely](#) to meet physical activity time recommendations than those who did not. Another small study found that employees who had bicycle storage in the workplace, as well as cultural support for active commuting, were [more likely](#) to walk or bike to work. (24)

Health Benefits of Active Transportation

Investing in public transportation and bicycle and pedestrian facilities [creates opportunities](#) for people to exercise. The most effective strategy to support physical activity is through a combination of transportation and land use changes. People who live in neighborhoods that provide safe, separated places to walk, bike, or move actively are more likely to meet physical activity recommendations.

- Transportation activities like walking, biking, and rolling are established to have a [strong, positive impact](#) on mental health.

Environmental and health impacts

- In 2019, air pollution was considered by the World Health Organization to be the biggest environmental health risk to humans, responsible for killing more than 7 million people prematurely every year.
- Thirty-five million people live within 300 feet of a major roadway, and [are at higher risk](#) of respiratory illness due to exposure to traffic-related air pollution.
- Preliminary studies [link air pollution to COVID-19 deaths](#), as there were high death tolls in some of the most globally polluted areas. Air pollution affects many organ systems such as cardiovascular, pulmonary, central nervous, reproductive, and integumentary systems.
- Long-term exposure to traffic-related air pollution [is linked to childhood asthma](#). Recent prospective studies have shown a positive relationship between traffic-related air pollution and the onset of asthma in children, as well as adverse effects of such exposure on the growth of lung functioning in children aged 10-18 years. Elevated exposure to traffic-related air pollutants, such as nitrogen dioxide, carbon monoxide, and black carbon, in utero or in infancy was also recently found to be [associated with higher risk](#) of asthma in children under age 5.
- Car-centered development has resulted in transportation becoming the [largest end-use sector](#) consuming energy and producing the highest rates of CO2 emissions.
- Climate change is largely fueled by the greenhouse emissions resulting from human activities, which partly derive from elements of the built environment like transportation infrastructure and land-use planning. Transportation contributes a significant portion of urban air pollution through vehicle emissions in the forms of carbon monoxide (CO), nitrogen oxides (NOx), particulate matter (PM), hydrocarbons (HC), and others.

Health costs associated with transportation

Transportation investments, and the transportation systems that emerge from them, shape lives and communities. Highways, sidewalks, bike paths, trains and bus service connect people to friends and family, jobs, shopping, school, and countless other activities.

These transportation systems also shape the design of the buildings and neighborhoods that they link together. Transportation systems and neighborhood design together determine the out of pocket cost, convenience, and comfort of different travel options. Most often, these potential health costs are not included in the transportation decisionmaking process and policy framework. These “hidden” health costs of transportation decisions are stacking up to a level that can no longer be ignored. If they are not factored into the decision-making process, these costs will continue to grow and undermine the country’s economic health and our quality of life.

The health impacts of traffic crashes, air pollution, and physical inactivity alone add hundreds of billions of dollars in costs—costs of healthcare, lost work days and productivity, and pain, suffering, and premature death.

- The cost of health issues associated with poor air quality due to transportation [is estimated](#) at between \$40 billion and \$64 billion per year in 2011.
- The costs of obesity account for approximately nine percent of [total US health care spending](#), and add an estimated additional \$395 per year to per-person health care expenses.
- A study of 5 mixed-use trails in Nebraska found that the [average cost per user](#) in 2002 was \$235, but resulted in medical cost savings of \$622 per person from engaging in physical activity.



Smart Growth America
Improving lives by improving communities