

Linking Transportation Policy and Public Health Meeting
November 13-14, 2008
Arlington, VA

INTRODUCTION

The US Centers for Disease Control and Prevention (CDC) and the Healthy Eating, Active Living Convergence Partnership (Convergence Partnership) co-sponsored a meeting on transportation and public health in Arlington, VA on November 13-14th, 2008. The goals of the meeting were to:

- Bridge the information gap between transportation policy and public health.
- Think strategically about how transportation policies affect public health.
- Identify priorities for transportation policy and public health.
- Build momentum to promote transportation policies that support public health.

More than 60 participants representing national and local organizations, government agencies and private institutions attended.

The meeting dialogue centered on early drafts of six papers, commissioned by the Convergence Partnership, to address links between health and transportation policies. Final versions of these papers will address the following topics:

- **Public Transportation and Health**
- **Non-Motorized Transportation and Health**
- **Roadways and Health**
- **Injury Prevention and Health**
- **Economic Development and Health**
- **Food Systems, Transportation, and Health**

Highlights from the meeting discussions found that:

- Transportation policies profoundly impact public health and are not equitable.
- The transportation reauthorization bill is an important opportunity to transform how we think about transportation and improve public health.
- Other opportunities include the stimulus package, the climate change bill, infrastructure bills and the housing bill.
- Transportation policy must shift away from an emphasis on congestion mitigation toward a goal of providing equitable access and opportunities for all.
- Public health and safety should be an underlying goal of transportation policies.
- Health economic impacts and health impact assessments should be part of transportation planning and funding.
- New projects should include development of complete streets.
- Economic and regulatory incentives and disincentives should support these new goals.

During the discussion some key strategies and policy recommendations were suggested including:

- A script for talking to policy-makers, including how many people group members represent, principles they believe in, and specific asks.
- Case studies showing what can be accomplished.
- A short synopsis of research showing outcomes, cost savings, and linkages.

OPENING SESSIONS

Welcome

Anne Haddix - Centers for Disease Control and Prevention

Brian Raymond - Kaiser Permanente Institute for Health Policy

Camille Mittelholtz - US Department of Transportation (DOT)

The welcome session included an introduction to the ongoing Transportation for America (T4A) campaign, supported through the Convergence Partnership, and its partners. The American Public Health Association (APHA), as a partner of T4A, is an advocate for including public health issues in the reauthorization bill. The Convergence Partnership has also commissioned six papers on the public health impacts of transportation policy.

The US DOT supports programs and initiatives that improve physical activity, promote safety and accessibility and support land use choices for added modality. The US DOT supports consideration of health issues as part of state and local long-term planning activities. US DOT has drafted a proposal for a new transportation bill that includes new funding mechanisms, increased funding flexibility and consolidates existing programs. They would welcome further input from the public health community.

Overview of Health Issues

Dr. Howard Frumkin – US Centers for Disease Control and Prevention – National Center for Environmental Health/Agency for Toxic Substances and Disease Registry

Dr. Frumkin commented that US DOT efforts to use transportation policy as a way to improve health and wellbeing dovetails with public health goals. The leading transportation related health challenges include chronic diseases - heart, cancer, stroke, asthma, hypertension, arthritis – injury and obesity. Other related challenges include climate change and social capital impacts. Key strategies to mitigate these challenges include: reduced travel time, alternate/active travel modes, clean/green vehicles, programs to encourage healthy travel, and education and auto safety measures. Land use, transportation and health are interconnected and establishing policies that improve and protect public health is needed.

Overview of Transportation Issues

Stephanie Pollack - Center for Urban and Regional Policy, Northeastern University

Ms. Pollack stated that there must be a paradigm shift in how transportation policy is viewed – rather than thinking about movement, it has to focus on access and opportunity. Tremendous amounts of money are spent on transportation – it is the 2nd largest household cost behind housing. Strategies to improve the current transportation policies include developing better metrics that measure access and mobility; influencing

metropolitan planning organizations; shifting the funding allocations to support alternate transportation modes; and providing options for those who are transportation disadvantaged.

Voices for Health and Transportation – Panel Plenary

Radhika Fox – Policy Link

PolicyLink is a national research and action institute that advances economic and social equity. Transportation equity, a major focus for PolicyLink, must include connectivity between affordable housing and places of employment; mitigation of negative impacts of transportation and inclusion of health impact assessments in future planning processes.

Barbara McCann – National Complete Streets Coalition

The National Complete Streets Coalition promotes the adoption of complete streets policies at the federal, state, and local levels. Complete Streets enable safe transportation for all, including bikes and pedestrians. More than 70 jurisdictions have adopted a complete streets policy. The coalition is currently working on federal transportation legislation that would require the Highway Trust Fund to support the creation of complete streets. The surface transportation program should increase funding support for “complete streets” designs. The coalition is also working toward the passage of complete streets bills submitted in the House and Senate.

Cecil Corbin-Mark – WE ACT for Environmental Justice

WE ACT works in the Harlem and Manhattan communities – they have addressed new transit depot location issues which would have greatly increased community exposures to diesel particulates. Their efforts resulted in the NY Metropolitan Transit Authority becoming more accountable to communities and the use of cleaner buses. WE ACT continues its work quantifying negative health outcomes, like low birth weight rates related to diesel exposures; preventing new exposures; and improving access to healthy foods and services. They are convening a New York State consortium of activists to address equity and injustice in the transportation reauthorization bill and are a member of the Transportation Equity Network.

Anthony Kane – American Association of State Highway and Transportation Officials

AASHTO is interested in partnering with others to promote health as part of the transportation reauthorization bill. Their priorities for improving transportation policies include broadening helmet laws; continued federal support for transit; tax incentives for cleaner and safer vehicles; tougher seatbelt and DUI laws; and increased use of health indicators as part of planning, to include veto powers for projects that would negatively impact health. They advocate greater progress to improve safety and access in lower-income communities. Mr. Kane noted that states actually have great authority over how transit dollars are allocated. Public health advocates should work with Metropolitan Planning Organizations to inject public health planning strategies at the local and regional level.

Participant Discussion – Health and Equity

Strategies to address health and transportation inequities included:

- Advocate for comprehensive roads designed to accommodate everyone – including those who do not or cannot drive.
- Address transportation funding sources - focus on personal miles traveled, rather than vehicle miles, to augment the Highway Trust Fund.
- Target outreach to state transportation departments who have the greatest oversight for how federal funds are used.
- Link health outcomes, economic costs and benefits to transportation policies to support argument for comprehensive planning.
- Increase spending for transit projects, particularly in low-income communities.
- Support alternate funding models such as allocating a portion of the greenhouse gases cap and trade funds to transit; implementing a carbon charge; charging based on average use; heavy vehicle use; and increased registration fees.
- Address rural and freight transportation in addition to urban travel needs.
- Any new funding mechanism should not unduly burden low income communities.
- Include all members of the community in the planning and decision making process.

Success Stories of Transportation Policies on Public Health

William Dietz – CDC Division of Nutrition, Physical Activity and Obesity

Physical activity is directly impacted by transportation policies – transit users are more physically active than non-users and a lack of safe non-motorized transportation options reduces physical activity. Public health professionals need to outline the costs and benefits of improved mobility options to advocate for needed changes. For example, Trust for America’s Health reports that disease prevention programs (including increased access to sidewalks and public transit) yield a \$5.60 return for each dollar spent. Success stories will also be necessary to persuade policymakers to make changes. CDC has collected a few examples but would love to add more, representing various population areas. Dr. Dietz challenged participants to select a bill name that will shift the paradigm on transportation policy – following the example of calling the estate tax a “death tax.”

Ann Dellinger, CDC Division of Unintentional Injury Prevention

Injury prevention and vehicle safety programs have resulted in successful policies for vehicle safety redesign; improved road conditions; implementation of helmet, seatbelt and child-safety seat laws; lowered speed limits; and tougher alcohol laws. These policy changes have been supported by data that indicate health improvements. They have also shown that federal funding is a powerful lever for change – helmet laws were repealed in a number of states when they were no longer tied to funding.

Jean Ospital – South Coast Air Quality Management District

Goods transportation is the next major challenge – there is an expected 300% increase in port cargo and 170% increase in truck travel in California by 2020. These will greatly impact air quality. Studies by the California Air Resources Board, USC and through the Multiple Air Toxics Exposure Studies (MATES) monitoring have shown the negative impacts of transportation related poor air quality on health. Federal support will be needed to meet air quality goals while supporting national cargo transportation needs. Cleaner fuel and technology choices will be required in addition to expanded

transportation options if air quality is to be improved. Land use planning should be integrated into transportation decisions to minimize exposure and reduce vehicle emissions. The new reauthorization should include better funding for Congestion Mitigation and Air Quality Improvement Programs and stringent guidelines for air quality.

Discussion

- Climate change and transportation policy are linked; however, strategies that address both issues and improve health must be championed by the public health communities.
- The transportation reauthorization and future policies should look beyond traditional highway safety issues and include deliberate plans to improve health.
- The auto industry bailout offers another opportunity to influence future transportation choices, including the development of greener automobiles.

SUMMARY OF PAPERS

Public Transportation and Health

Todd Litman – Victoria Transportation Policy Institute

This paper will describe the many ways that transportation policy impacts public health. It will use data to support a need for more diverse transportation options to improve equity and health. The paper recommends using more than just traffic safety measures to evaluate how our transportation system impacts public health. It further underscores a need to focus on convincing people from all backgrounds to use transit and focusing on the quality of transit services as a means to increase use. Finally, it recommends increased funding for development of integrated transportation options.

Non-Motorized Transportation and Health

Susan Handy – University of California

A comparison of public transportation, walking and biking use in multiple countries and cities across the United States found that the primary factors that influence bike use are the physical environment and motivation (social norms). The paper will discuss these findings and recommend that federal funding and policies encourage new projects to enhance walking and biking. Focusing efforts in areas with the greatest potential for change like short distance trips, areas with existing mixed use, and in low income communities would provide immediate results. The current economic situation combined with national concerns about gas prices and climate change is the perfect opportunity for major changes in transportation policies.

Roadways and Health

Catherine Ross

Roadways profoundly impact health and the new transportation bill must address these issues, as well as, climate change, social and economic challenges, expanded transit options, maintenance needs, and improved social connectivity. Current funding for transportation relies on vehicle miles traveled, encouraging and rewarding greater road traffic rather than promoting alternative modes of travel. Dr. Ross' paper will include solutions such as the use of health impact assessment in planning, context sensitive

design, complete streets, and models like the livable centers initiative, road diets, pedestrian impact statements, green streets, traffic calming, and an environmental review toolkit. Convergence opportunities include the Metropolitan Mobility Caucus, Lieberman/Warner Climate Security Act, Transportation Sector Emissions Reduction Fund. Ross suggested a new title for the transportation bill: Clean Low-Emissions Affordable New Transportation Equity Act (CLEAN TEA).

Injury Prevention and Health

Leslie Mikkelson

Traffic crashes are the leading cause of death for those under 34, and people of color are more likely than whites to die from traffic crashes. Injury prevention must be part of transportation policy and planning. Transportation policy should actively minimize these impacts through improvements to the roadways (Safe Routes to School, complete streets, traffic calming, land-use development) and transit systems; and by reducing impaired driving. Other strategies for injury prevention include personal safety laws (helmet, safety seat, seat belts) and improved vehicle design.

Economic Development and Health

Todd Swanstrom

Reducing poverty and economic segregation will reduce health care costs, among other public benefits. Transportation policy directly impacts the location and beneficiaries of economic development, jobs, poverty and equality. Access to and creation of jobs should be a goal of transportation planning – the SAFETEA-LU reauthorization is expected to generate 1.9 million new jobs. Policy levers should be utilized to ensure that the workforce will have transportation options and that new jobs are located in underserved communities. Short-term policies to meet people’s needs – including more buses – are needed. Three-quarters of the built environment will be constructed in the next 30 years. Therefore, a long-term strategy to create a built environment that is more equitable and includes affordable, accessible housing will also be needed.

Food Systems, Transportation and Health

Kami Pothukuchi

Transportation choices shape and underpin regional land development, economies, and operations. New transportation policies and regional planning should enable access to healthy and affordable food for all. They should also support regional food sources that can improve local economies, reduce waste, provide greater flexibility and affordable transportation, and reduce greenhouse gas emissions and energy consumption. The reauthorization bill should include transportation assistance to access healthy foods, promote inclusion access issues as part of regional planning, improve transit services, support the development of neighborhood food systems and increase coordination with other sectors. Food system policies cross multiple sectors and changes will be needed not only in transportation policy, but also agriculture, energy, and health.

Group Discussion: Approaches to Increase Use of Alternative Transport Modes

After breaking into two initial round table discussions, participants were asked to identify approaches to increase use of alternative transportation modes, including:

- Stop making congestion mitigation the primary goal of transportation policy and funding.
- Increase funding for alternatives to automobile transportation.
- Focus on shifting transportation modes.
- Use funding more strategically to target high-impact areas.
- Integrate land use and transportation planning .
- Develop an infrastructure that enables people to walk and bicycle safely.
- Terminate use of vehicle miles traveled (VMT) and use alternative measures including neighborhood access to resources.
- Create performance measures.
- Promote a minimum walk score as an important tool for people who are buying a house or locating an office.
- Allocate transportation funds to communities that increase their average walk score by a certain amount.
- Use social marketing techniques educate and promote health communities to the public and through realtors.
- Educate people that suburbs are not as safe as walkable urban areas.
- Offer incentives to jurisdictions that create bicycling and walking master plans and adopt complete streets policies.
- Encourage travel surveys to collect data on the amount of time spent traveling.
- Use a systems approach instead of a project approach with localities.
- Involve transportation disadvantaged groups – low-income communities and seniors – in the conversation.
- Support continued investment and development of existing infrastructure in areas designed for mixed use rather than building new, costly suburbs.
- Create incentives for planning that addresses access issues, similar to the conformity rules, which ties funding to emissions targets.

Congressional Overview

Donald Shriber - CDC Washington Office (moderator)

Alex Herrgott – Professional Staff, Senate Environment and Public Works Committee

Jackie Schmitz – Legislative Assistant, House Transportation and Infrastructure Committee

Jenelle Krishnamoorthy – Professional Staff, Sen. Tom Harkin, Senate Health Education, Labor and Pensions Committee

Christa Shivley – Legislative Assistant, Rep. Earl Blumenauer

Minority – The representative for the minority shared their position that the transportation reauthorization bill be limited to traditional transportation projects. The national program should determine where funding for public health and safety programs should come from – but the transportation bill is not the place for them. Although the audience may not share these views, he added that representatives are always happy to hear new ideas from interest groups – even when they may not necessarily agree. He suggested that specific asks and ideas about how to improve programs are helpful and having a large supporting

coalition is powerful. Finally, he recommended developing incentives for use of alternative modes of transportation, rather than disincentives for driving.

Majority – Multiple representatives shared an opinion that the reauthorization is a “transformational moment” to completely rethink transportation policies in the United States. The new bill will likely include a fresh framework and include new financing methods– possibly vehicle miles traveled. Public health champions have been instrumental in educating members of Congress about why transportation and other policies are important contributors to health. Members represented by the panel will try to include health outcomes and measures as part of the final authorization bill. Other opportunities for public health advocates to champion alternate policies include discussions about the crumbling infrastructure and freight transportation, and the stimulus and housing bills.

The current timeline for reauthorization will have the transportation bill on the floor for markup in spring 2009 and finalized by September 30th, when the current bill expires. However, this is a very ambitious timeframe and it is likely that the reauthorization will not occur in 2009. The stimulus package provides another opportunity to influence transportation and health, and is likely to include funding for ready-to-go projects.

Day One Summary: Gaps and Priorities as Outlined by Participants

- There is a need for greater investment in public and non-motorized transportation.
- Other revenue sources, beyond the gas tax, are needed to support long-term policy changes, including state general funds.
- Federal policies toward fuel costs and taxes influence transportation choices and should be retooled so funding doesn’t encourage or reward increased driving.
- Performance measures for health and safety should also be included in the reauthorization bill and tied to funding.
- Public health advocates need to use convincing data, including economic cost-benefit analyses, to push for changes.

Day Two Discussion: Policy Priorities as Outlined by Participants

After breaking into round table discussions, the groups identified the following common policy priorities:

- Make public health an underlying goal of transportation strategies and decisions.
- Include performance measurements – surveillance, evaluation, health impact assessments – tied to funding.
- Consider health economics and health impact assessments in transportation planning, policies and funding.
- Create transportation equity for all.
- Develop multi-modal transportation that is accessible to all.
- Complete streets.
- Integrate air pollution, land use and transportation planning.
- Create incentives for states to include health and safety goals in their transportation planning and spending.

- Include health, nutrition and community stakeholders in transportation planning (Metropolitan Planning Organizations and other forums). These members should be given equal weight in the decision-making process.
- Change the formula for vehicle miles traveled (VMT).

Next Steps: Building the Momentum

During the discussion some key strategies and policy recommendations were suggested including:

- A script for talking to policy-makers, including how many people group members represent, principles they believe in, and specific asks.
- Case studies showing what can be accomplished.
- A short synopsis of research showing outcomes, cost savings, and linkages.

Strategies include:

- Meet to develop a list of specific tasks.
- Identify transformative projects as examples of the kinds of changes that could happen.
- Develop a series of messages connecting transportation and public health.
- Identify partners.
- Educate community health and transportation groups.
- Organize and do outreach with grassroots groups.

Partnership opportunities:

Attendees at this meeting could partner with Transportation for America (T4A) and help inform T4A of the health needs to address in the transportation bill. It would be helpful to show the link between health and the economy. The group should develop messages that are relevant to the specific interests of different members of Congress and create the outcomes that different constituencies are seeking.

Other organizations have affiliates around the country and experience with relationship building at the local, state, and federal levels. It is important to engage policy-makers not only at the federal level, but also at the local level.

Next Steps

APHA, with support from the Convergence Partnership, is working with the T4A campaign to represent the voice of public health in advocating for transportation policy changes in the reauthorization bill. APHA announced it will be hosting a meeting of interested public health partners on December 5th, 2008 to develop common priorities and a consensus statement for the public health community. All interested participants were welcomed to attend. CDC will continue to provide technical expertise to partners as these efforts move forward. *Update: This meeting took place on December 5, 2009, and meeting notes are available by contacting Susan Polan at APHA.*

Appendix A

Round Table Discussions

Participants were asked to identify priorities and gaps based on the presentations. Many ideas and recommendations overlapped or were prioritized during a final break out session on Friday. They are included in the summary from that session.

Round Table 1: Public Transportation and Health

- Expand regional transit systems and improve quality to include frequently scheduled stops in convenient and safe locations.
- Encourage employers to implement policies to increase transit use, telecommuting, and rider vans/shuttles that mitigate congestion issues.
- Consider increased use of transit a way to improve transportation safety (fewer fatalities than auto traffic).
- Incentivize transit oriented development for developers.
- Redefine transportation goals; move away from congestion mitigation toward accessibility, safety and equitable transportation for all.
- Ensure that mass transit is affordable for all.
- Conduct social marketing and education campaigns to educate public about the public health and safety benefits of transit and other transportation options.
- Increase research on health impacts of transportation to support changes and record positive changes.
- Expand proportion of funding for Congestion Mitigation and Air Quality Improvement Program (CMAQ) and consider alternative funding incentives/disincentives for auto travel, such as a congestion tax.
- Ensure flexibility in funding to meet local community needs.

Round Table 2: Non-motorized Transportation and Health

- Increase federal funding dedicated for bike and pedestrian infrastructure.
- Subsidize funding for helmets and other safety equipment.
- Develop standards for bike/pedestrian infrastructure planning that meet community needs, connecting them with goods and services.
- Support citizens groups that work with planners to increase bike/pedestrian infrastructure.
- Identify and create a compendium of case studies and best practices that showcase the value of bike and pedestrian infrastructure.
- Create design guidelines for developers and planners.
- Build relationships with other sectors and within government for greater support of bike/pedestrian needs.
- Include rural and aging population needs in alternate transportation planning.
- Ensure that safety needs are met.
- Increase research to evaluate programs and support changes on transportation policy.
- Create disincentives for auto travel to include lower speed limits, restrictions on advertising and a vision change for the industry.
- Address equity issues, including commute length and gentrification.

Appendix B Participants

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