

Health is a Calling Card: Tools for Building Health into Your Safe Routes to School Program

October 4, 2012 webinar

Questions and Answers

How do you fund an HIA?

Biggest cost is staff time on HIAs. HIAs can be rapid versions, which are less costly.

CDC doesn't recommend large scale, costly HIAs. Candace recommends going to Pew Charitable Trust's [Human Impact Project](#) which is the number one funder of health impact assessments.

Candace: How do we find the spreadsheet where we can input our own information, and what info can we work with?"

To obtain a copy of the full HIA report or this spreadsheet- send Candace an email crutt@cdc.gov. She and Brian Cole were the leads in creating that spreadsheet

How do you turn an HIA recommendation such as "traffic safety should be a priority" into something tangible?

Our transportation plan had specific chapters on bicycles and also on pedestrians. We created Levels Of Service (LOS) for cyclists (As opposed to just cars as is commonly done). The recommendation took all that into account to make the point that if we going to do all the bike and pedestrian work (and call it part of the "traffic") then we need to make sure safety was a priority.

Did SRTS come up as a recommendation in the HIA?

Yes. The HIA liked the SRTS program and suggested we expand it to all our schools (we were mainly in the K-3 & 4/5 schools) and incorporate the program in with Active Living if we decided to repurpose and rename the Recreation Department to the Active Living Division. Which is what we've ended up doing.

Does the no-wheelchair sign mean the tunnel is not handicap-accessible?

Yes, the tunnel is not ADA – it is extremely old and "grandfathered".

That sidewalk in the left image with the turn in the island, is that a good safety treatment for kids?"

If we're talking about the raised concrete sections in the center of the road where the pedestrian crossing makes the right angle turns, those are essentially raised curb barriers to deflect wayward cars. The pedestrian crossing is at grade level. The ADA landing in the lower right of the photo comes off a standard 4-foot sidewalk along that side of the street. There is no sidewalk where the woman is standing.

Ms. Rutt indicated that HIAs could lead to partnerships between public health professionals and planners that continue beyond the completion of the HIA. Has she or other speakers seen this relationship formalized so that public health has a permanent seat at the planning table, e.g. in development review?

Yes, it's mandatory in Alaska that planners and developers consult with planners at the outset of projects. In the last few years, Candace has been doing trainings with MPOs and planning organizations, and her organization is going to be a cooperating agency with DOT on a multimodal project in downtown Atlanta.

Informal and formal partnerships have developed.

Fred Boykin responded: When it became necessary to broaden the scope of the recreational department in Decatur to look at the whole health of the community, they formed an Active Living board that focused their expertise on HIAs, and on making health a focus in the community. Much more fitness equipment and walking maps and programs for races and regular engagement of the entire community has increased. Fred wishes that community residents would attend more commission meetings addressing these types of projects.

Another example: In Charlotte, the health department is at the table on the City/County Joint Use Task Force and is on the advisory committee for the MPO's Long Range Transportation Plan. This is another example of a health and transportation intersection.

Brian, can you explain in more detail how large or closed campuses are barriers?

With a sprawled campus its huge footprint itself is a barrier given that it can be gated or fenced, and force people to traverse its perimeter and go out of their way to reach a neighborhood school. Therefore, housing and school connection can be stymied, because kids and families travel long distances around that large campus - this triples the length of a walking/biking trip and causes parents to want to drive.

Shared use of a facility is one means of overcoming a large campus barrier; the state network and regional network project are focused on joint use practices and efforts that help communities increase shared use of school facilities.

Brian, how do you decide how many points to allocate to each section?

The ASNC Development Team agreed on the seven, highest-priority survey categories. We then populated these categories with the highest-priority issues/questions. Using approximately a 100-point maximum total, we then prioritized them and assigned the points.

Regarding the correlation between BMI and ASNC - was there a statistical significance to the data?

The correlation that I presented in my presentation was based on a small sample size (12 total). We're now finishing a companion study using a similar built environment survey, which also correlates with BMI. This study uses a sample size of 450 records, with another statistical overlay/comparison using up to 50,000 records.

Does the cul-de-sac with pedestrian cut-through result in increased car traffic on the cul-de-sac from parents dropping kids off at that point instead of driving them all the way to school?

It depends on how close the pedestrian cut-through cul-de-sac is to the school. The farther away it is, the less likely that large numbers of cars would converge at that point.