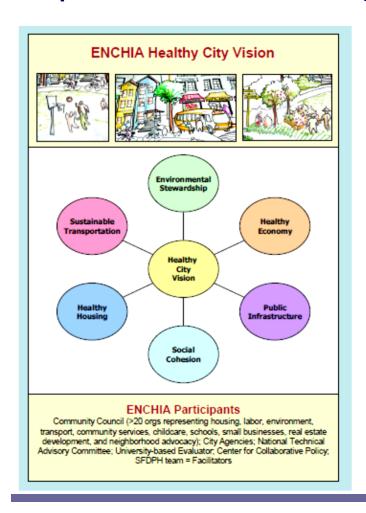
Integrating Health in Transportation Policy: HIA, EIA or DNA



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Eastern Neighborhoods Community Health Impact Assessment (ENCHIA)



- Collaborative, consensus-based health impact assessment to analyze how development in three SF neighborhoods affected health
- Multi-stakeholder public + private
 Community Council guided the process
- ENCHIA stakeholders sought a comprehensive human needsresponsive metric to guide and evaluate urban planning
- 18-month process culminated in the development of the "<u>Healthy</u> Development Measurement Tool"



Diverse health needs impacted by urban transportation systems

- Access:
 - Convenient access to jobs, schools, basic needs
 - Ability to use walking, bicycling, and public transit
- Safety:
 - Clean Air
 - Quiet neighborhoods
 - Motor vehicle collision hazards
- Equity:
 - Areas with disproportionately higher environmental impacts and lower infrastructure investments





SF's Healthy Development Measurement Tool provided a framework and monitoring system for urban planning

- Healthy city vision Community-health objectives
- Community-level Health Indicators
- Policy and Design Strategies
- Criteria for healthy development
- Public Health Evidence



Get Started...

- Begin with an <u>introduction</u> or download a <u>helpful presentation</u> (PDF).
- . Use the Tool.
- · Look at community indicators.
- Check out SF neighborhood data.
- Access Tool <u>resources</u>.

The Tool

The Healthy Development

Measurement Tool is a comprehensive evaluation metric to consider health needs in urban development plans and projects.

The HDMT explicitly connects public health to urban development planning in efforts to achieve a higher quality social and physical environment that advances health.

Who We Are

We're committed to assessing urban environmental conditions and responding to health inequities and environmental policy gaps using health impact assessment methods. We're the San Francisco Department of Public Health, Program on Health, Equity and Sustainability.

Be sure to contact us with any questions or comments.

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The Healthy Development Measurement Tool | San Francisco Department of Public Health, Copyright @ 2006 Page accessed on Monday, July 14, 2008 at 01:16 PM.



Metrics for a Healthy Transportation System

Access	Transportation Safety	Ambient Livability / Walkability Environmental Quality		
Daily travel time / distance	Share of urban road network with design speed <30 mph (urban arterials) and <20 (residential streets)	Traffic density (vehicle miles travelled / unit area)	Pedestrian Environmental Quality Index / Pedestrian Level of Service	
Average daily travel trips	Number injury collisions	Area with PM 2.5 or NOx concentration above health based standards	Ratio of pedestrian network length to surface road network length	
Share of income spent on transportation expenses	Number of severe injuries and fatalities	Health effects (pre-mature mortality, asthma hospitalizations, etc) attributed to traffic pollution	Pedestrian density	
Number of health-relevant goods and services within walking distance		Population exposed to ambient noise >55 dB (WHO community standard) Frequency of social contact of the contact		
Proportion of households within 1/2 mile of local or regional public transport stop with <15 minute frequency		Health effects (stress, sleep disturbance, etc) attributed to traffic noise	Population average minutes physical activity from active transportation	



Map of areas exceeding PM 2.5 standards:

Identifies high pollution areas for emissions and exposure reductions

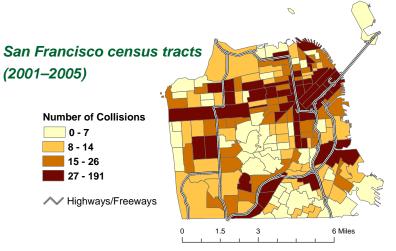




Transportation Noise Map 2008



SFDPH Pedestrian Injury Forecasting and Spatial Assessment of Disparities



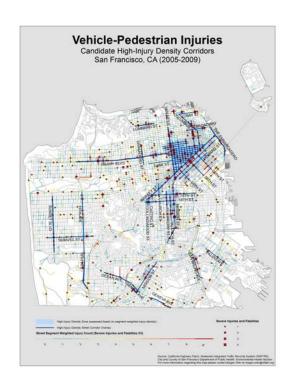
Source: California Highway Patrol, Statewide Integrated Traffic Records System

Significant predictors of area-level collisions:

- Traffic volume (+)
- Arterial streets (+) w/o surface transit
- Neighborhood commercial zoning (+)
- Employees (+)
- Residents (+)
- Land area (-)
- Below poverty level (+)
- Age 65 and over (-)

Wier et al. Accident Analysis & Prevention. 2009.





High-injury (blue) corridor methodology identifies:

- 5.2% of city street length in miles
- 55% of severe and fatal pedestrian injuries
- 51% of total pedestrian injuries

HIA of Road Pricing within SF Downtown Cordon

► Feasibility study approved by the San Francisco County Transportation Authority (SFCTA) Board: December 2010

The Northeast Cordon (AM/PM) was the best performing (greatest benefits with the fewest adverse impacts) among dozens of scenarios:

- 12% fewer peak period auto trips
- 21% reduction in vehicle hours of delay
- 16% reduction in Northeast Cordon GHGs (5% citywide)
- \$60-80M annual net revenue for transportation services and amenities
- 20-25% transit speed improvement
- Next steps: further study/analysis, including environmental review
- Implementation decision: likely 2-3 years, following environmental review

www.sfcta.org/sfmobility

SFDPH noted SFCTA study assessing:

- Transportation System Performance
- "3 Es": Environment; Economy; Equity



Health Impacts?



Road Pricing HIA: Baseline conditions (2005)

- Substantial health burdens from transportation, including quantifiable impacts on air pollution-related mortality, noise-related heart disease, and traffic injuries to pedestrians and cyclists
- Substantial unrealized potential health benefits from active transport
- Disproportionately burden on residents living within the pricing zone

http://www.sfphes.org/transportation/Road_Pricing_HIA_Technical_Report.pdf

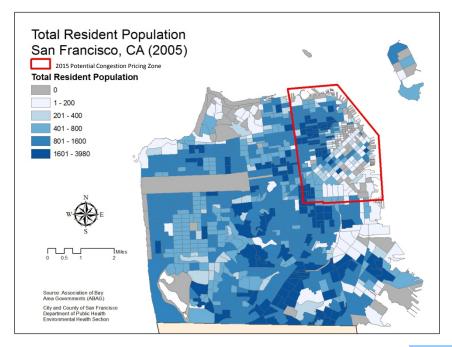


Road Pricing HIA: Future (2015) with and without road pricing

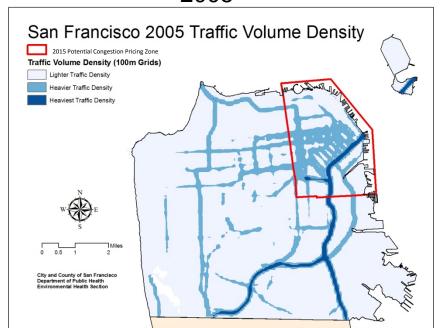
- ☐ Increased traffic volume and adverse transportation impacts in priority development areas with BAU
- ☐ Modest benefits from pricing effects on traffic volume under future conditions.
- ☐ Largest benefits related to active transportation and avoidance of vehicle-pedestrian collisions.

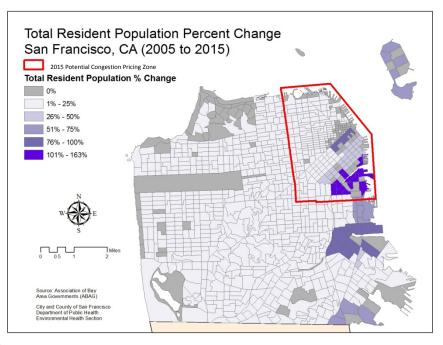
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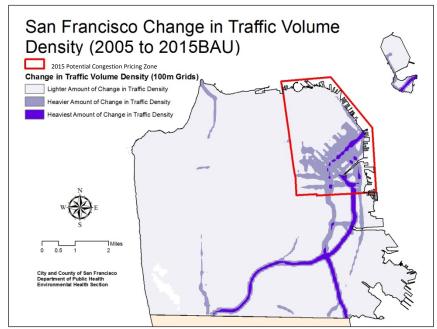








2015 "Business As Usual"



Road Pricing HIA: Economic valuation

		Estimated Value (\$, Millions)		
		Change:	Change:	Change:
		2005 - 2015	2005 - 2015	2015 BAU -
Economic value of health effects	2005	BAU	RP	2015 RP
Illness, injury and death from environmental	-\$1,124	-\$49	\$4	\$53
hazards				
Lives saved with active transportation (walking	\$1,225	\$80	\$112	\$32
and biking)	-			

http://www.sfphes.org/transportation/Road_Pricing_HIA_Technical_Report.pdf



Road Pricing Recommendations to the Transportation Authority's Study Process

- Increase congestion pricing fees on poor air quality days
- Invest in walking and biking safety improvements where injuries are highest
- Use quieter, low-emission hybrid buses in areas where noise, air pollution are worse
- Invest in walking and biking infrastructure to encourage trips into/out of the zone



Van Ness Avenue Bus Rapid Transit (BRT)

- Proposed BRT for Van Ness Avenue, San Francisco's major north-south transit route
- Draft EIS/EIR included detailed study of air pollution, noise, pedestrian safety and transit performance effects.
- HIA judged to have low-information value given project support and commitments and existing comprehensive impact assessment process
- Health department provided focus comments on EIA assessment of noise and pedestrian safety analysis





Design and evaluation of Bay Area Transportation Plans now include health and equity metrics!

- GHG reduction
- Adequate housing
- Healthy and Safe Communities
 - PM 2.5 attributable mortality
 - Transportation Injuries
 - Active transportation time
- Open Space preservation
- Household transportation costs
- Reduction of Travel times
- Economic vitality—GDP growth
- Transportation system maintenance







Broader Lessons for Healthy Transportation Planning

- Opportunities to integrate health performance metrics into existing routines and practices of the transportation planning.
 - Means for inclusion and prioritization of health supporting projects and designs
 - Leverages existing processes
 - Generates ownership by transport sector
 - Creates a monitoring and accountability system
- HIA has important residual roles
 - Inter-institutional learning
 - Major policy change and major projects
 - Metrics and methods development
 - Accountability where health is missing
- Main challenges and needs
 - Widely applicable metrics and methods
 - Sufficient attention to disproportionate impacts





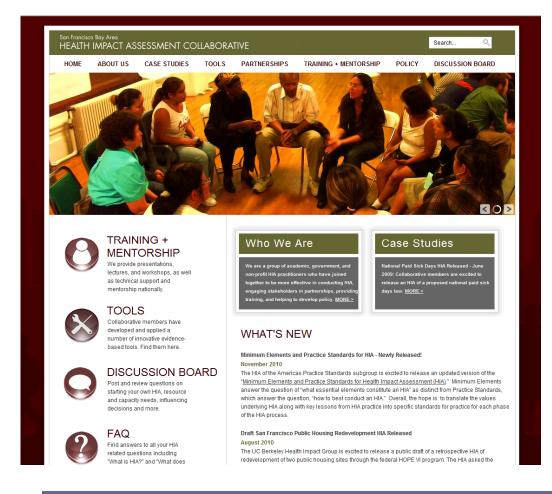
Technical needs for health and transportation planning

- Development of replicable, scalable, actionable metrics
- Estimation methods integrated with transportation modeling tools
- Robust methods for evaluating equity
- A toolbox of policy and design solutions
 - Road user charges
 - Design standards for non-motorized safety
 - Automated enforcement





Resources:



SF HIA Collaborative www.hiacollaborative.org

SF Department of Public Health www.sfphes.org

Healthy Development Tool www.thehdmt.org

UC Berkeley HIA Group http://sites.google.com/site/ucbhia

Human Impact Partners www.humanimpact.org

