ROUTE 34 EAST-DOWNTOWN CROSSING HIA

Gregg Furie, MD
Clara Filice, MD, MPH

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DISCLOSURE

I have no conflicts of interest to disclose.

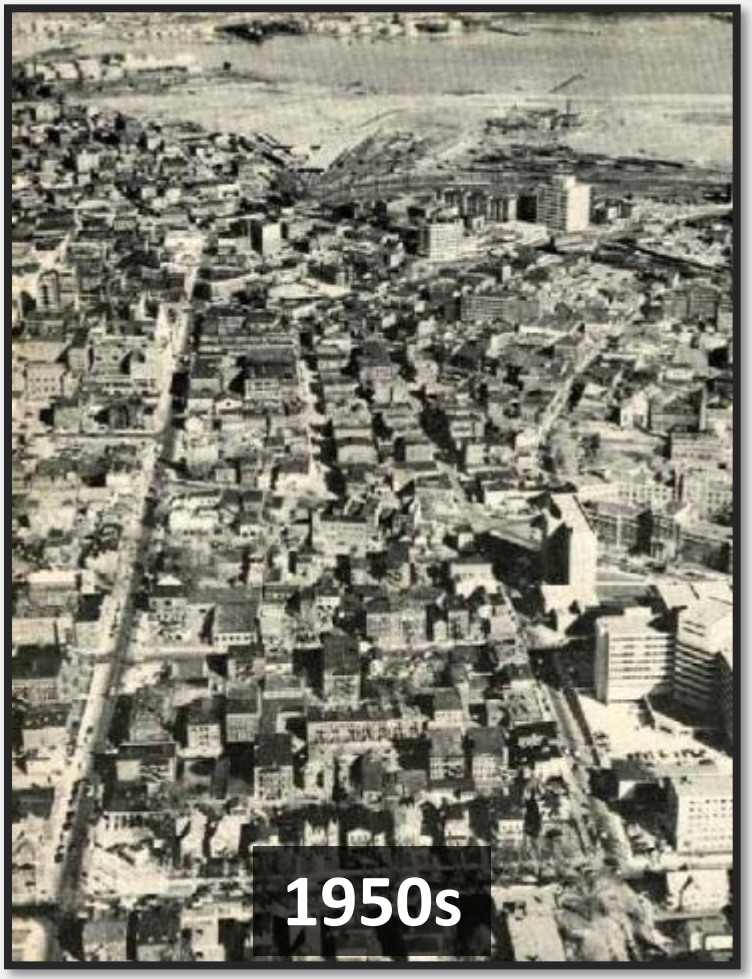
The views expressed here represent those of the presenter and do not reflect those of the City of New Haven.

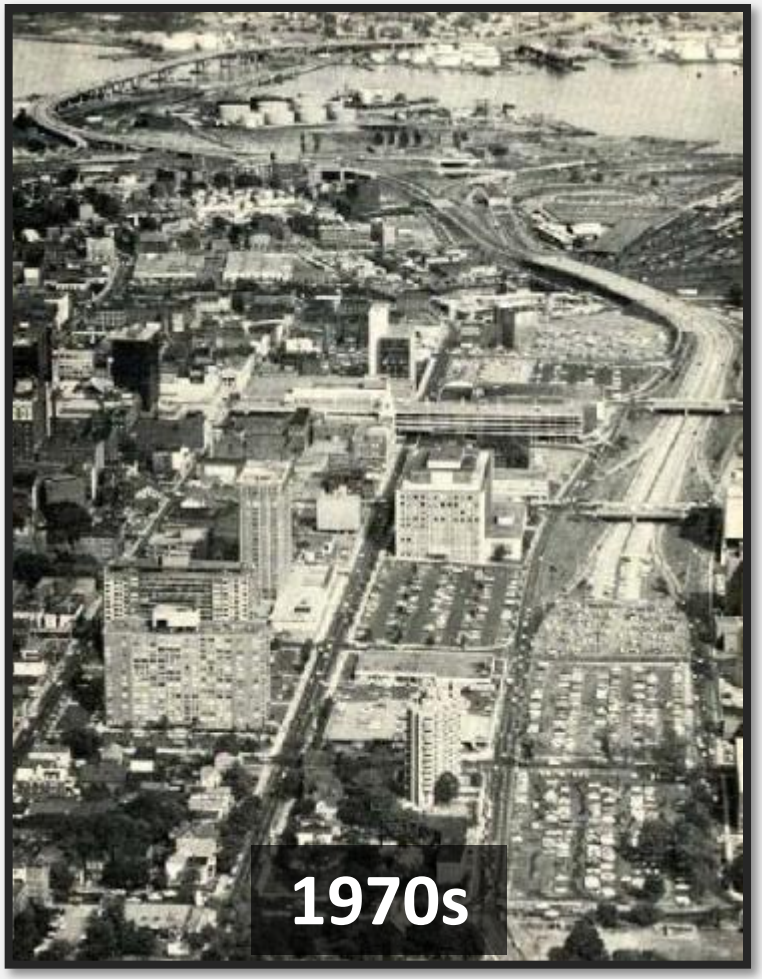
OVERVIEW

- Route 34 East and the Downtown Crossing Project
- HIA objectives
- HIA process
- Benefits and challenges of partnering with decision-makers

ROUTE 34 EAST AND THE DOWNTOWN CROSSING PROJECT

ROUTE 34 EAST: AN UNHEALTHY LEGACY





http://www.cityofnewhaven.com/CityPlan

ROUTE 34 EAST: AN UNHEALTHY LEGACY

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route 34 east

new haven

downtown crossing

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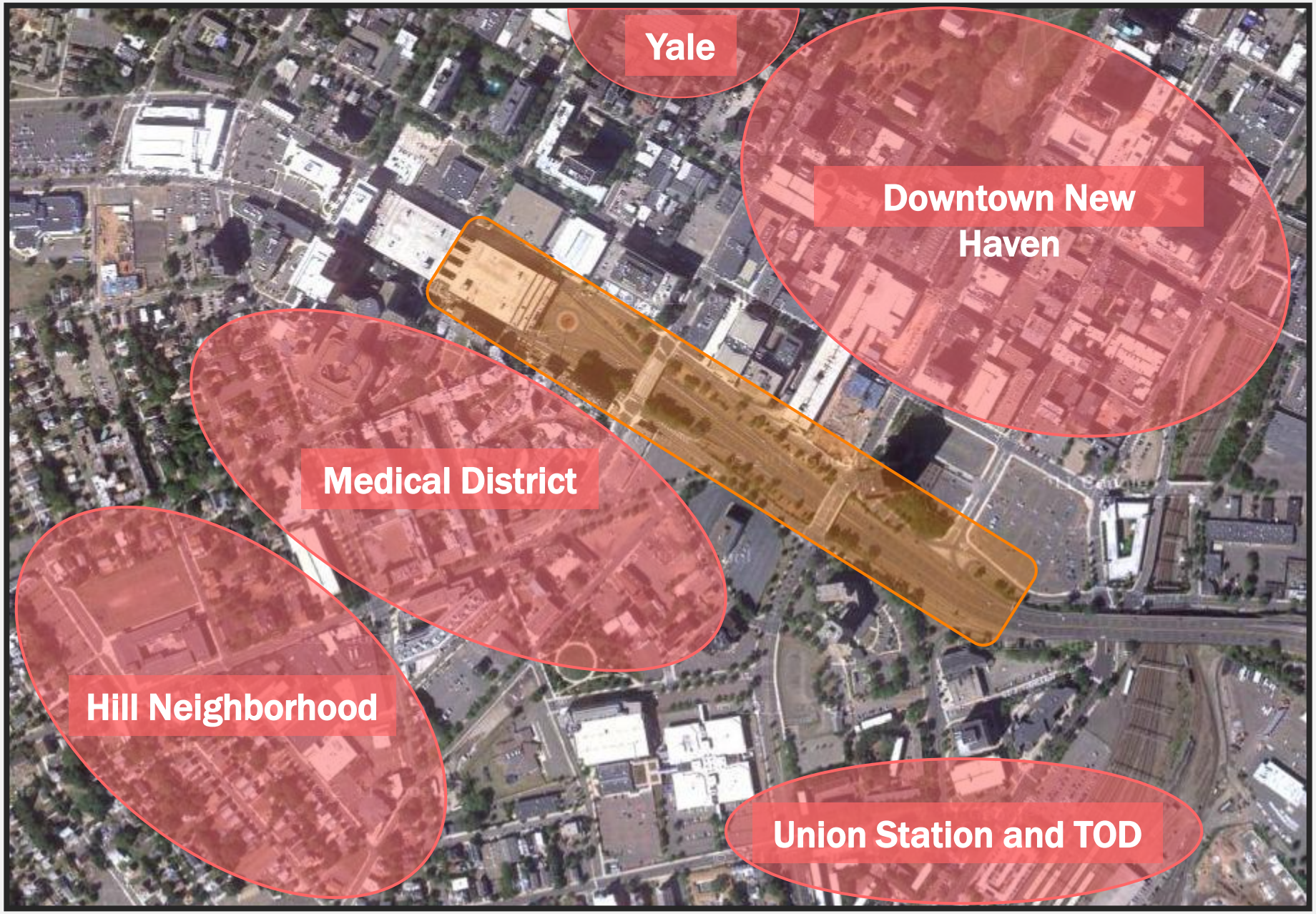

Yale
Downtown New Haven
Medical District
Hill Neighborhood
Union Station and TOD

HIA OF PHASE I OF THE DOWNTOWN CROSSING PROJECT

FALL 2010

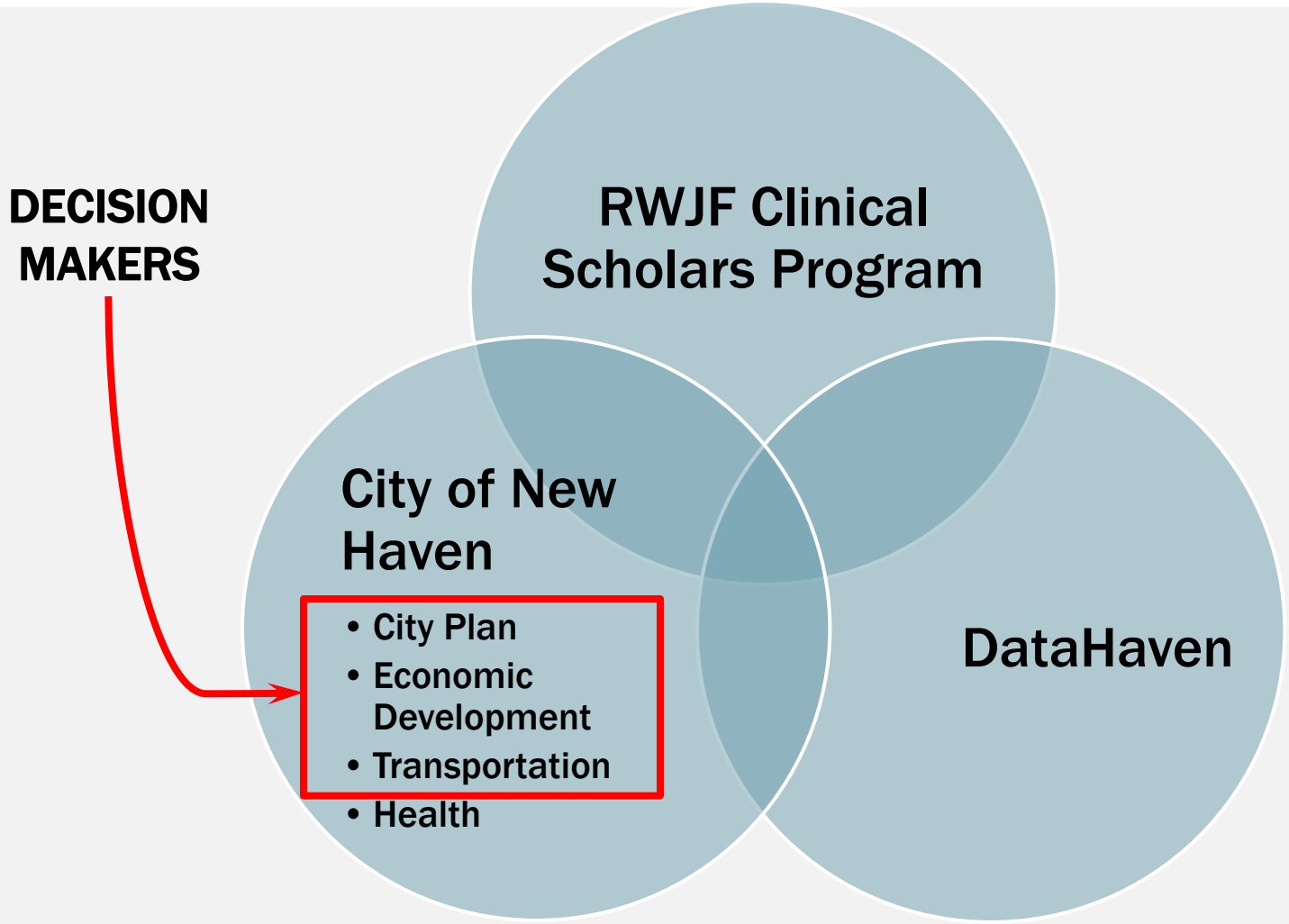

USDOT
TIGER 2
DOT.GOV
route 34 east
new haven
downtown crossing
Health Matters!
NEW HAVEN ™
Robert Wood Johnson Foundation
Clinical Scholars

OBJECTIVES

Improve specific health outcomes related to the Downtown Crossing project

Demonstrate to City government officials how HIA could meaningfully inform decision making and improve health in future projects and policies

HIA WORKGROUP

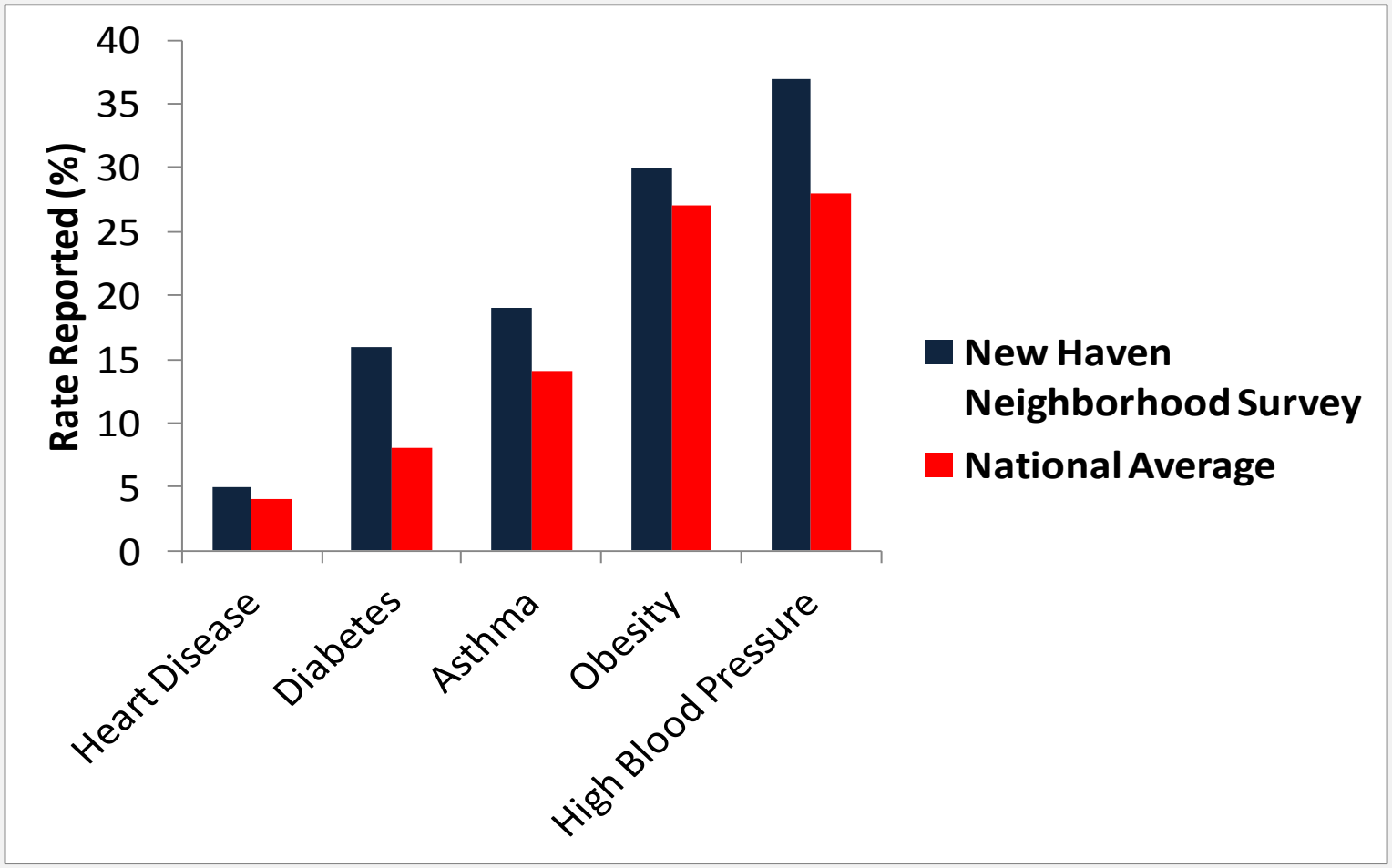


OUTCOMES OF INTEREST

Physical Activity

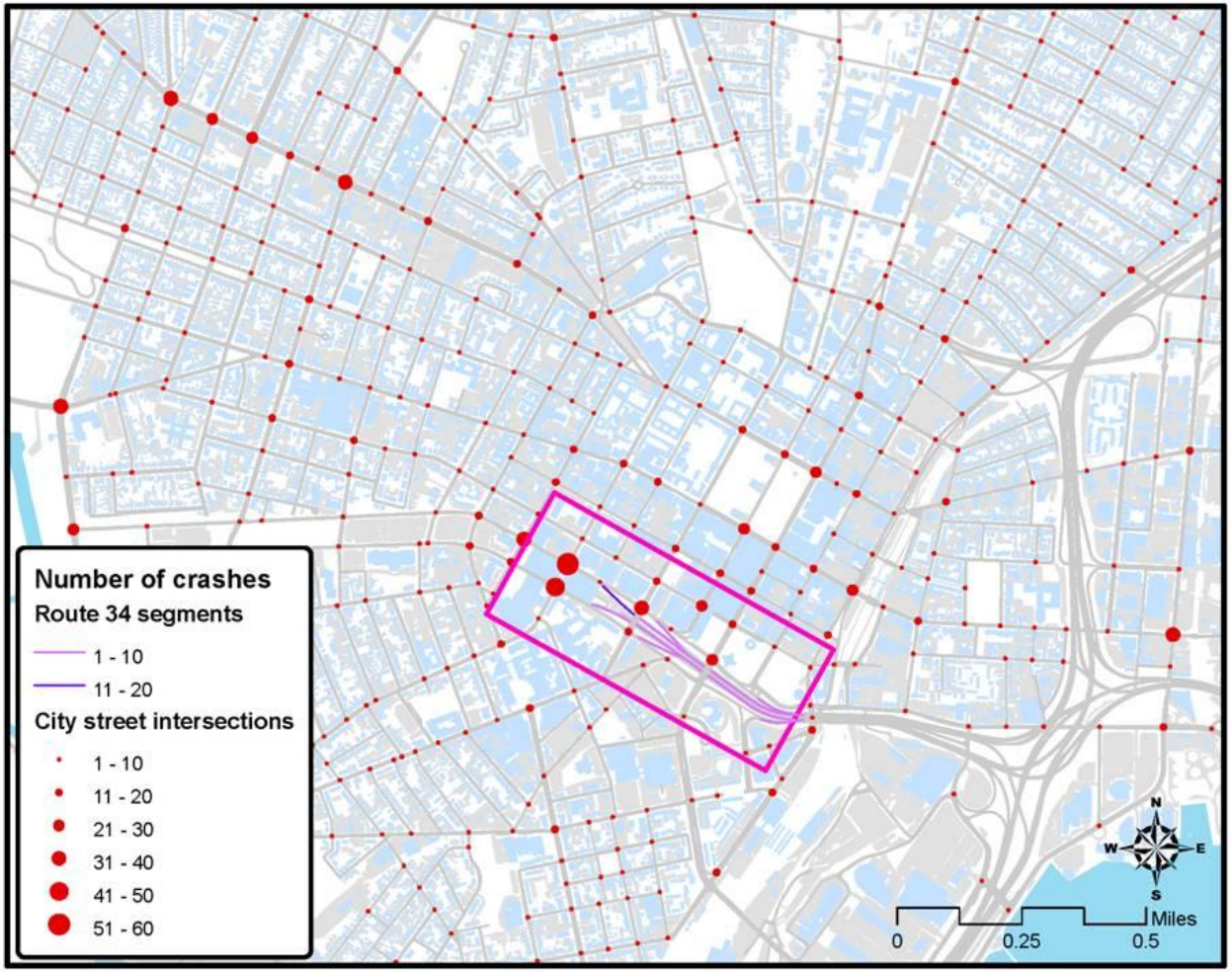
Pedestrian and Cyclist Safety

HEALTH IN NEW HAVEN NEIGHBORHOODS



Community Alliance for Research and Engagement Community Survey, 2008

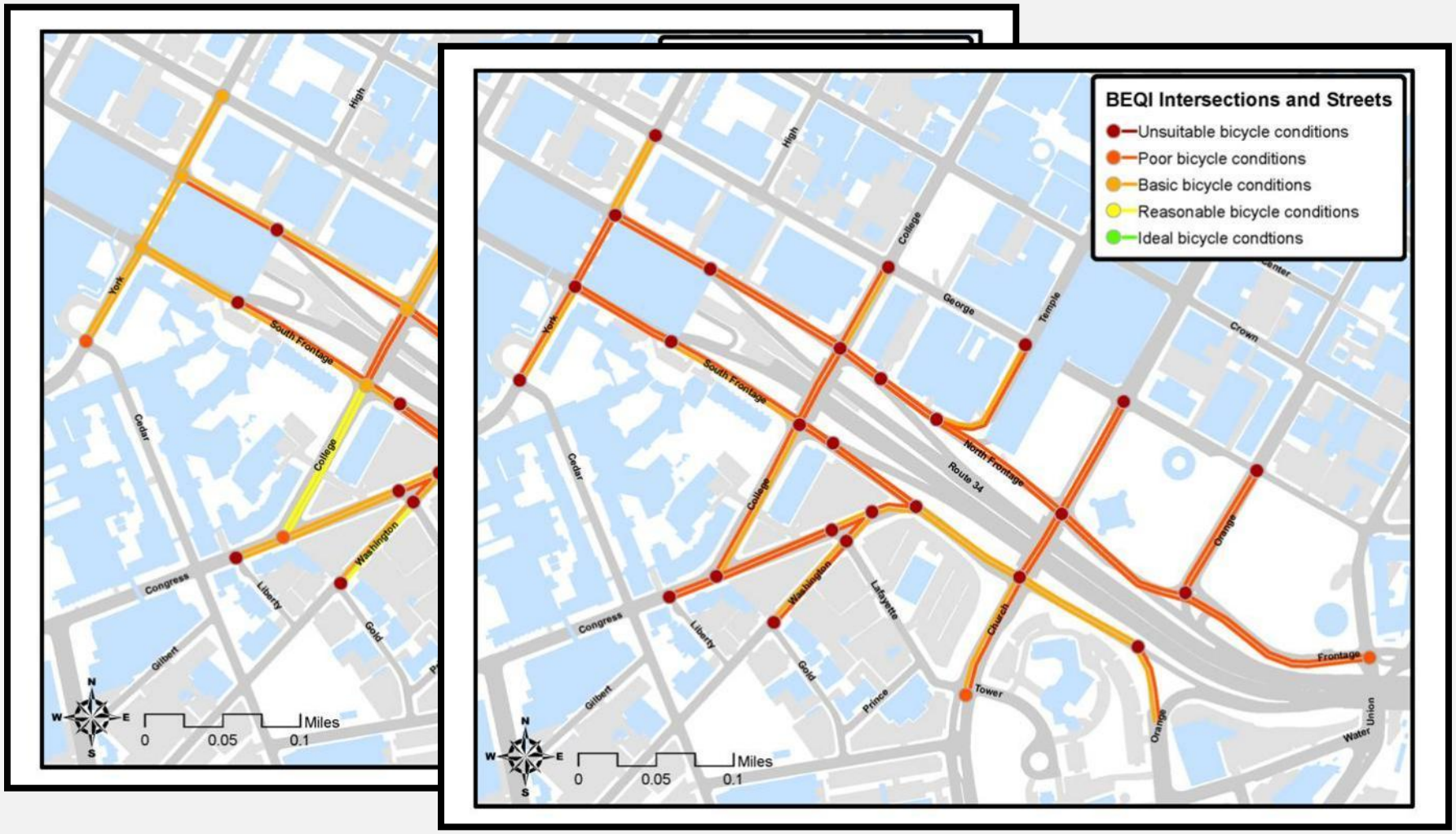
CRASHES ALONG THE CORRIDOR



BASELINE DATA

- Sociodemographic
  - US Census Bureau American Community Survey
- Commuting and Mode of Transportation
  - US Census Bureau Longitudinal Employer-Household Dynamics
  - US Census Bureau American Community Survey
  - Yale University and Yale-New Haven Hospital

EXISTING PEDESTRIAN AND BICYCLE CONDITIONS



SUMMARY OF BASELINE FINDINGS

- High prevalence of disease related to physical inactivity
- Crashes are common
- Corridor and surrounding neighborhoods are densely populated with residents and workers
- Adjacent neighborhoods are predominantly Hispanic, black, and socioeconomically disadvantaged
- Many corridor residents do not have access to an automobile and rely on walking, biking, or public transit
- Many corridor workers live within walking or biking distance
- Poor existing conditions for pedestrians and cyclists

IMPACTS AND RECOMMENDATIONS

- Impacts:
  - Overall, project will increase physical activity
  - Increased number of pedestrians and cyclists could result in increases in absolute number of unintentional injuries if appropriate measures to protect safety are not utilized

- Recommendations:
  - Strategies to
    - further increase pedestrian and cyclist activity
    - prevent pedestrian and cyclist unintentional injury
  - Provided:
    - broad recommendations → specific actions → priority sites → evidence

RECOMMENDATIONS

Reduce pedestrian unintentional injury		
Recommendation	*Action*	*Priority Sites*
Enhance pedestrian crossings	- Minimize pedestrian crossing distance with: • pedestrian medians • refuge islands • curb extensions	N. Frontage and Church

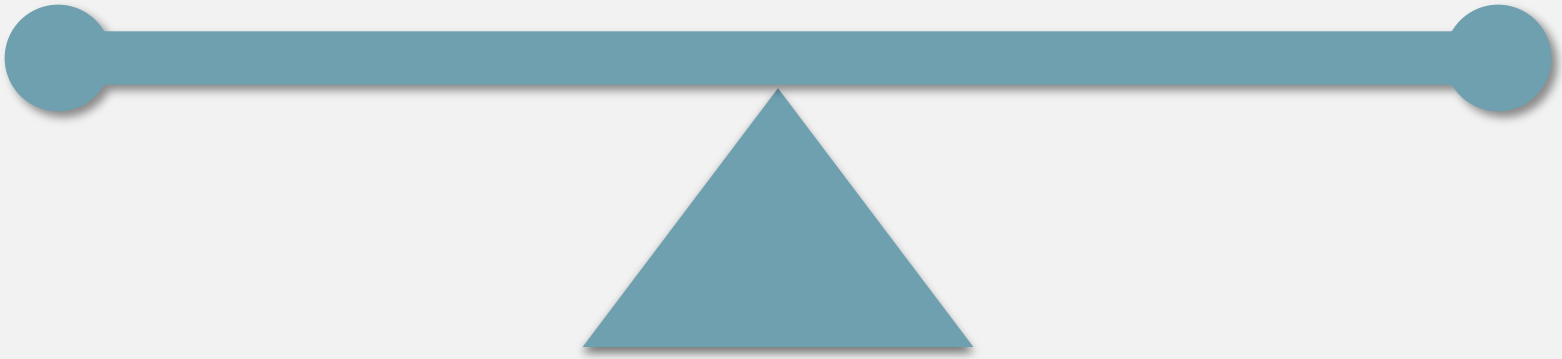
Reduce bicyclist unintentional injury		
Recommendation	*Action*	*Priority Sites*
Minimize motor vehicle-bicyclist conflicts at intersections	- Bike boxes - Raised or colored intersection crossings	N. Frontage and College

BENEFITS AND CHALLENGES OF PARTNERING WITH DECISION-MAKERS

PARTNERSHIP

Directly engaging decision makers in the HIA process may help establish a health-in-all-policies approach to governance

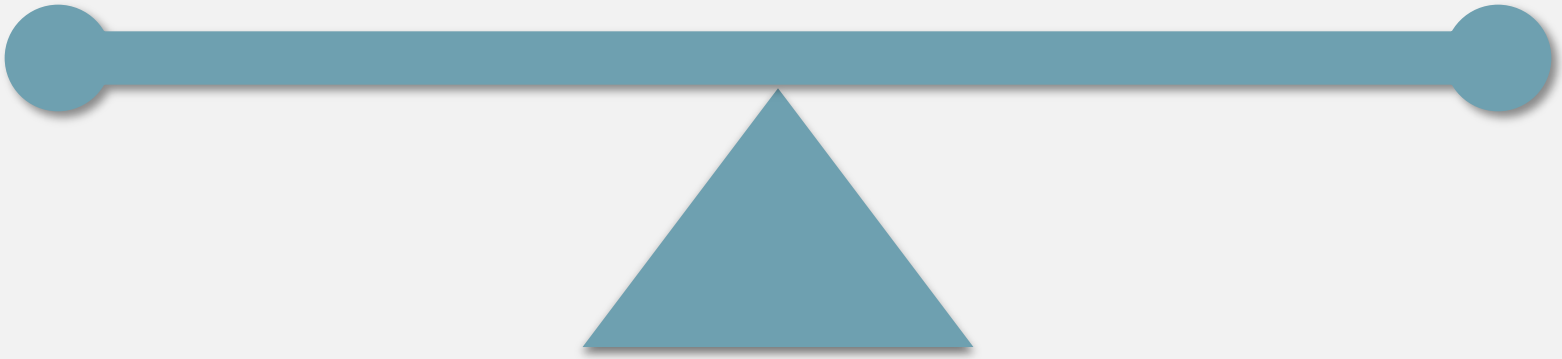
May present challenges to simultaneously engaging community members, particularly if existing relationships are contentious



FEASIBILITY

May allow for a more impactful HIA when resources are limited

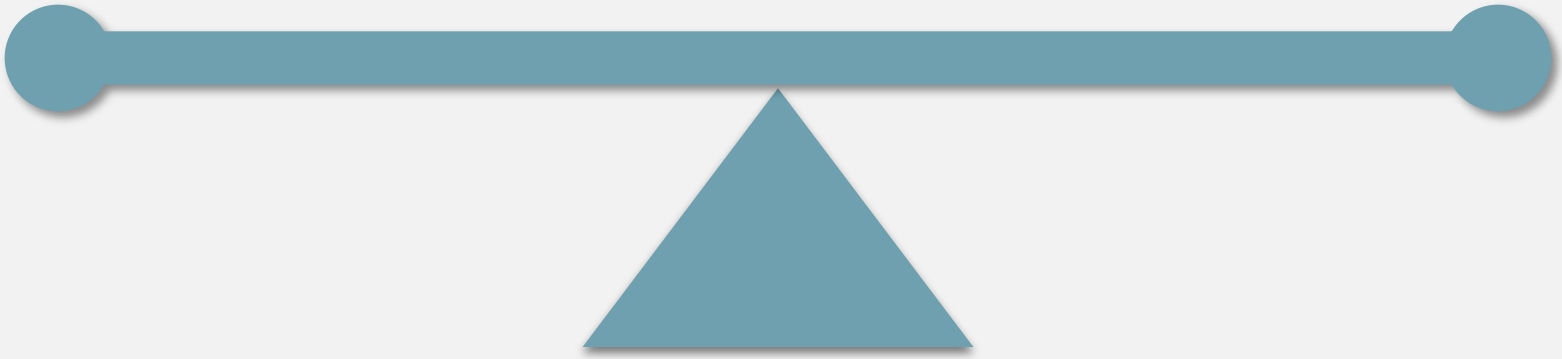
Decision makers must be willing to participate and to contribute time and/or other resources



HIA PROCESS

Decision makers engaged throughout duration of HIA

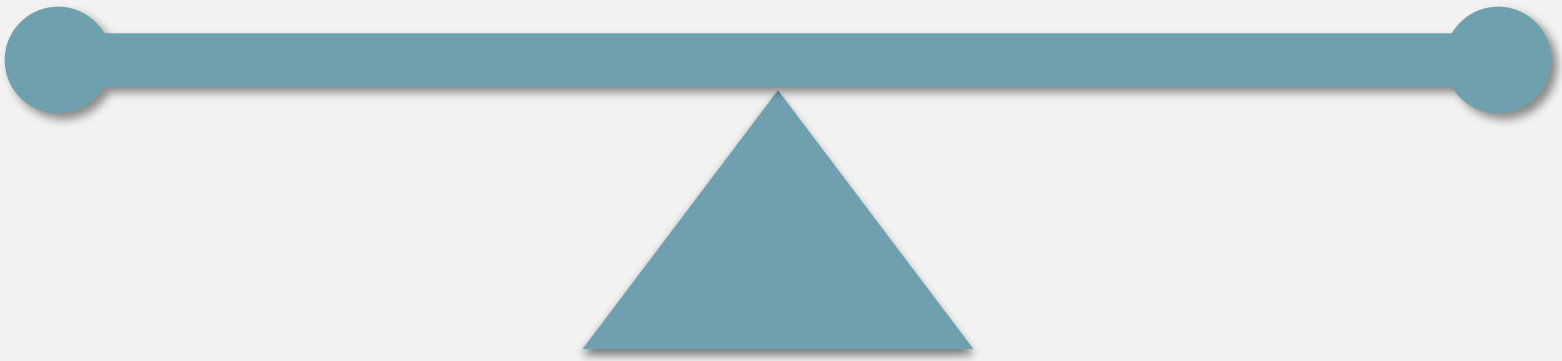
Dynamic design process may lead to shifting target for evaluation



APPLICABILITY

Scope reflects weak points in decision makers' knowledge base

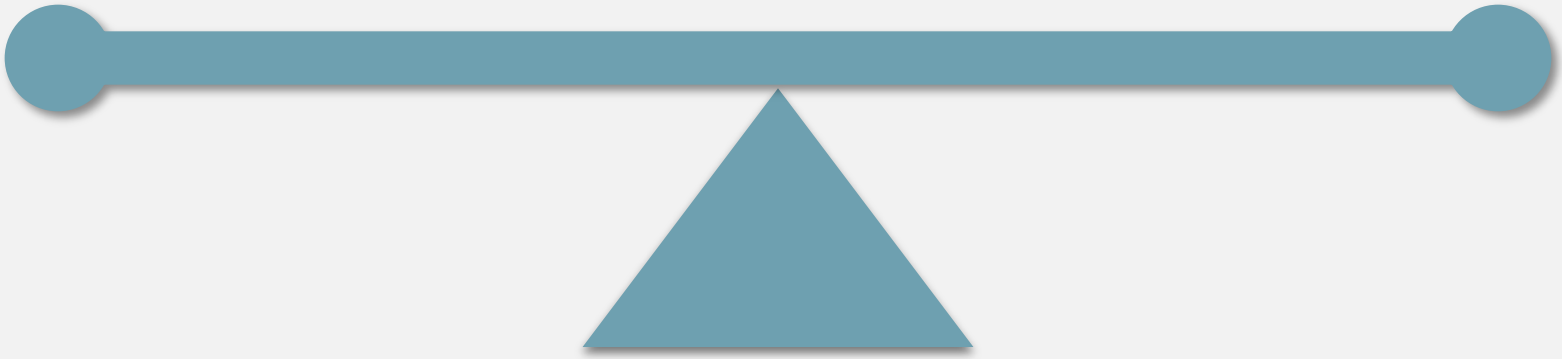
Desired granularity of recommendations may not be possible given existing evidence



CREDIBILITY

Making the HIA process transparent to decision makers may make findings and process more credible

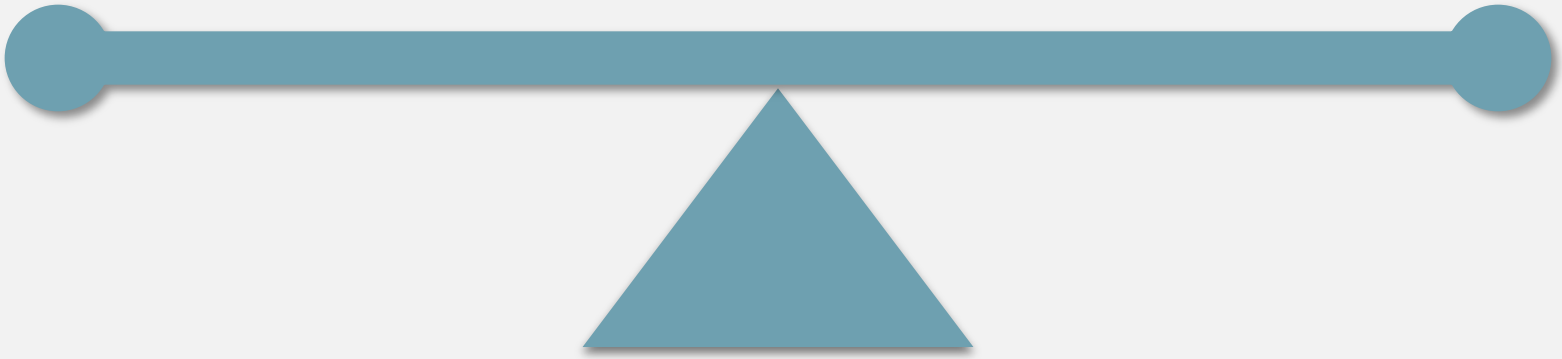
Objectivity of recommendations may be questioned by community members



RECOMMENDATIONS

Decision makers' participation in generating recommendations may increase likelihood of adoption

Strength of recommendations may be weakened due to need for consensus and compromise



CONCLUSIONS

- Government officials in New Haven are eagerly seeking ways to incorporate health considerations in planning and policy
- The Downtown Crossing Project provided a unique opportunity to promote acceptance and future use of HIA
- Advantages and disadvantages of partnering with decision makers must be weighed when conducting an HIA

ACKNOWLEDGMENTS

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thank you

RECOMMENDATIONS: PROMOTING PHYSICAL ACTIVITY

- Pedestrians
  - Maximize connected street pattern
  - Utilize traffic calming features
  - Promote safety and perceived safety
  - Protect most vulnerable populations
- Bicyclists
  - Promote perceived safety
  - Utilize bike facilities appropriate for traffic volume
  - Locate bike facilities along most desirable routes
  - Maximize connectivity of bike facilities
  - Encourage bike storage and showers at destinations
  - Implement diverse interventions simultaneously

RECOMMENDATIONS: REDUCING UNINTENTIONAL INJURY

- Pedestrians
  - Minimize motor vehicle speeds
  - Minimize motor vehicle volume
  - Enhance pedestrian crossings
  - Enhance pedestrian link facilities
- Bicyclists
  - Utilize bike lanes or segregated facilities
  - Minimize cyclist-pedestrian conflicts
  - Minimize cyclist-motor vehicle conflicts on link sections and intersection approaches
  - Minimize cyclist-motor vehicle conflicts in intersections