The Importance of Addressing Human Health and Safety in Planning

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Part the First:

Personal Security
What We Do Boils Down to These

- Planning Emphasizes Suitable Relationships between Land Uses and Travel Between Them
- Engineering Stresses Improving Performance, Satisfying the Need to Move Things & People
Sanitation Reform Movement (Late 1700’s to early 1900’s)
- Many blamed sickness on overcrowding and “miasma”
- Although theories turned out to be untrue, it was too late to change public opinion

Other Reasons
- Contributing factors were the predominant (over 40%) immigrant populations in cities and the fears that this triggered in other segments of society
- Landscape architects like Olmstead further promoted miasma, light, and air theories based on then-dominant city design features, like “light shafts” in tenements
- Social factors were also invoked to describe the ills brought about by tenement living at the turn of the 20th century
- New demand for land commensurate with rise in incomes

“A tainted spot on the body politic”
Reverend Josiah Strong, *Our Country* (1885), referring to the presence of immigrants in American cities
The Rise of Zoning

- Health and Hygiene
  - Similar figures that argued for more light and space shaped the first zoning laws such as those in Los Angeles and New York
  - Rigid separation of uses demarcated the U.S. efforts from those of previous, German efforts

- Protection of Property Values

- Restricting the Movements of Lower-Income and “Others”
Moving Walking Out of the Street

- Roads started out as means to get goods to distant marketplaces (urban) or as migration routes (rural)
- Streets were for people – and horses, carriages and, later, streetcars
- As time went on, the emergence of segregated land uses, first facilitated by the streetcar, exploded with the coincidence of the private automobile and its mass production
- By the early 1960s, the dominant pattern of automobile use was firmly entrenched
Police picked up the children of Danielle and Alexander Meitiv on Sunday as they were walking home alone from a park that’s nearly a mile from their house. This time, instead of bringing the children home, police took them directly to Child Protective Services.

“It’s beyond ridiculous,” Danielle Meitiv said Monday. “The world is safer today, and yet we imprison our children inside and wonder why they’re obese and have no focus.”

The Meitivs, who live 6 miles from Washington in Silver Spring, Maryland, believe in “free-range” parenting, which includes allowing their children to play and walk alone in the neighborhood to teach them self-reliance and responsibility.
Moving Health Out of Planning

- Property Value Protection is Hardwired into Many Euclidean Zoning Decisions
- NEPA Regulations Generally Ignore or Indirectly Address Human Health and Security Concerns
Personal Safety in Planning
or, Why People Don’t Walk Even When there are Sidewalks
Jane Jacobs

- “Eyes on the street” – must be able to look onto the street from inside the buildings.
- Fought against remote neighborhoods advocated by the city planners of her day.
### Overlap between CPTED and Sound Planning / Design

*CPTED shares and reinforces many of the “smart” design principles encapsulated by neo-traditional planning, form-based / design-based codes, and Complete Streets.*

Your New Best Friend: Who will City Council listen to when it comes time to adopt the controversial ordinance change: the planner or the police chief (or both, together)?

<table>
<thead>
<tr>
<th>Principle</th>
<th>CPTED</th>
<th>Planning</th>
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<tbody>
<tr>
<td>“Eyes on the Street”</td>
<td>✔</td>
<td>✔</td>
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<tr>
<td>Landscaping / Streetscaping</td>
<td>✔</td>
<td>✔</td>
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<tr>
<td>Public Art</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Definition of Public, Semi-Public and Private Spaces</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Mixing of Complimentary Land Uses</td>
<td>✔</td>
<td>✔</td>
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<tr>
<td>Front Porches, Street Orientation, Build-to Lines, etc.</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Pedestrian-Level Lighting</td>
<td>✔</td>
<td>✔</td>
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<tr>
<td>Excellent Maintenance</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Community Cohesion and Support for Group Activities</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Create Gathering Places</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Variety of Income Groups Living in the Same Area</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Strong Public Engagement</td>
<td>✔</td>
<td>✔</td>
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</table>
Doing CPTED with Transportation

- Research Crime Statistics
- Audit / Inventory of Site, Corridor or Area
- Talk to People
- Prepare Draft Report
- Review
- Prepare Final Report

Before and After the Project:
  - UDO Updates
  - Ordinance Revisions
  - Standards Development
  - Site Plan Review Processes

A Lot is Wrapped Up into 3 Overarching Principles

- Territorial Reinforcement
- Natural Surveillance
- Natural Access Control
40% REDUCTION IN CRIME THROUGH CPTED
Not Just About Lighting
(but there’s more to lighting than you think...)

[Image of a street scene at night with trees and streetlights illuminating the area.]
94% SAFETY IS VERY IMPORTANT

“What I like most about living in downtown Raleigh is feeling safe and the ability to get to all the events on bike or walking.”

· Over 83% of people feel safe walking the streets of downtown Raleigh

· Over 94% of people claim that safety is a very important factor in influencing downtown’s likeability

· 80% of downtown residents believe the DRA Ambassador Safety Team is important to downtown’s quality of life and sense of safety

“One of our Marbles employees was out on the town recently and left her parking lights on. When she returned to her car she found a nice note from an ambassador with a phone number to call if she needed a jump!”

Ambassador Safety Team Hours:
Monday-Wednesday: 6 am-12 midnight
Thursday-Friday: 6 am-2 am
Training

don’t fake it.

- National Institute of Crime Prevention
  - CPTED Professional Designation
  - 5-10 Days of Instruction
  - Greenville, SC
- International CPTED Association
- Books
  - Crime Prevention through Environmental Design (Crowe)
  - 21st Century Security & CPTED (Atlas)
Part the Second:

Personal Health
We want a healthy community!
(What does that really mean?)
Planning & health—we meet again!

V— is for VALUE
Not measured in wealth.
Planners think wisely
Weighing comfort and health.
What Makes Us Healthy

- Genetics 20%
- Environment 20%
- Healthy Behaviors 50%
- Access to Care 10%

What We Spend On Being Healthy

- Medical Services 88%
- Healthy Behaviors 4%
- Other 8%

Source: Lots to Lose: How America’s Health and Obesity Crisis Threatens our Economic Future (2012)
Planners, Engineers & Architects

Public Health
“As clinicians, we are trained to focus on each individual patient and his/her health problem. When epidemics of chronic illnesses such as diabetes, cardiovascular disease, asthma, obesity, and depression are seen we must realize that these are resulting from more than just the product of individuals’ unhealthy choices...

“They are resulting from the built environment in which we live. We must widen our view of health to include everything surrounding a patient and our interventions must address the environmental opportunities and obstacles that shape health behavior.”
Job Creation: Making a Case for Healthy Transportation Investments

Jobs Created Per Million Dollars Spent

- Greenways, Sidewalks & Bicycle Facilities: 17.0 jobs
- Pavement Widening: 12.5 jobs
- New Highway Construction: 12.5 jobs
- New Bridge Construction or Replacement: 11.6 jobs
- Safety & Traffic Management: 10.3 jobs
- Pavement Improvement: 9.0 jobs

Source: American Association of State Highway and Transportation Officials (AASHTO)  
Average Direct Jobs by Project Type (2012); Job in terms of full-time equivalents (FTE)
The 7 Dimensions of Health & Wellness

- Physical
- Spiritual
- Social
- Emotional
- Economic & Occupational
- Intellectual
- Environmental
Graham County Hot Spot Triggers:
- Below average number of healthcare workers
- High rates of mortality from heart disease
- Higher percent of population living below poverty line
- Higher proportion of households spending <30% on rent
- Lower than average High School graduate percent of population
- Higher than average number of people receiving food stamps

Mountainwise

Graham County Health Info

- Reported Health: Very Good, Excellent (36.7%)
- Meets Physical Activity: 60.2%
- Median Household Income: 62% of state average
- Prevalence of Obesity: 36%

Source: 2012 NCD Community Health Assessment
HIA for Transportation/Land Use Scenario Plan for 327-square mile rural area in the Raleigh region; Evaluating likely health impacts of built environment policy & active transportation.

Lesson Learned: Social determinants of health manifest themselves in several themes within scenario planning.
Capital Area MPO: Northeast Area Scenario Planning Study

Wake Co. Leading Causes of Death, Rates for African-Americans compared to White population

<table>
<thead>
<tr>
<th>Cause of Death</th>
<th>% Higher in African American Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancer</td>
<td>23%</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>32%</td>
</tr>
<tr>
<td>Stroke</td>
<td>49%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>318%</td>
</tr>
<tr>
<td>Septicemia</td>
<td>96%</td>
</tr>
<tr>
<td>Motor Vehicle Injuries</td>
<td>47%</td>
</tr>
</tbody>
</table>

Northeast Area Study – Pedestrian Crashes by Race, percentage of overall Crashes (2006-2011)

<table>
<thead>
<tr>
<th>Pedestrian Race</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black</td>
<td>51</td>
<td>40.8%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>10</td>
<td>8.0%</td>
</tr>
<tr>
<td>White</td>
<td>58</td>
<td>46.4%</td>
</tr>
<tr>
<td>other</td>
<td>3</td>
<td>2.4%</td>
</tr>
<tr>
<td>unknown</td>
<td>3</td>
<td>2.4%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>125</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

African-American population is 20% of total, but is 40.8% of pedestrian crash victims.
Buncombe County Greenways Master Plan

HIA for Countywide greenways & trails master plan; Identifying geographic areas where there is a prevalence of poor health conditions to prioritize greenway corridor investments.

Lessons Learned:
1. Getting health data at Census tract level is difficult & time consuming.

2. Results from this HIA have informed other ongoing studies in the region since the Tract-level analysis is transferrable.
HIA for Countywide bicycle master plan; *Health as a driving factor in formulation of various bike plan recommendations.*

**Lessons Learned:**
1. Be prepared to explore health claims that you never expected (e.g. health impacts of loose dogs on bicycling perceptions)
2. Identify Recommendations that balance short-term success with long-term needs.
3. Go beyond the here and now of health; consider future impacts on those just learning to ride

Two local stores are now “Bicycle-Friendly Outposts”, stocking healthy foods and supplies for bicyclists in rural areas.

What are the impacts on one’s desire to ride a bike when loose dogs are a community problem?
Questions? Ideas?
If these two can do it, you can certainly do it, too.

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