



RSTF 2020

TRAFFIC SAFETY CULTURE

AND HEALTH



Housekeeping

- Number of attendees
- Webinar recorded
- Use Chat feature for questions and to relay technical issues
- Mic and video features enabled for breakout groups

Opening Remarks

- **Kelley Yemen**, Director of Complete Streets, City of Philadelphia

RSTF Goal:

To reduce roadway crashes and eliminate serious injuries and fatalities from crashes in the Delaware Valley

Share the conversation!

Use **#rstf** during today's meeting, and tag **@DVRPC**

For minutes and recordings of previous meetings, visit:
<https://www.dvrpc.org/Committees/RSTF/>

Traffic Safety and Public Health

- Traffic violence is a public health crisis in our region, like Covid-19, opioid addiction, and gun violence
- Culture change is often led by the public health field (e.g. tobacco use)
- We need to change our culture around traffic safety, especially as it relates to speed

Introduction

- **Kevin Murphy**, Manager, Office of Safe Streets, Delaware Valley Regional Planning Commission



The Delaware Valley Regional Planning Commission is the federally designated Metropolitan Planning Organization for a diverse nine-county region in two states: Bucks, Chester, Delaware, Montgomery, and Philadelphia in Pennsylvania; and Burlington, Camden, Gloucester, and Mercer in New Jersey.

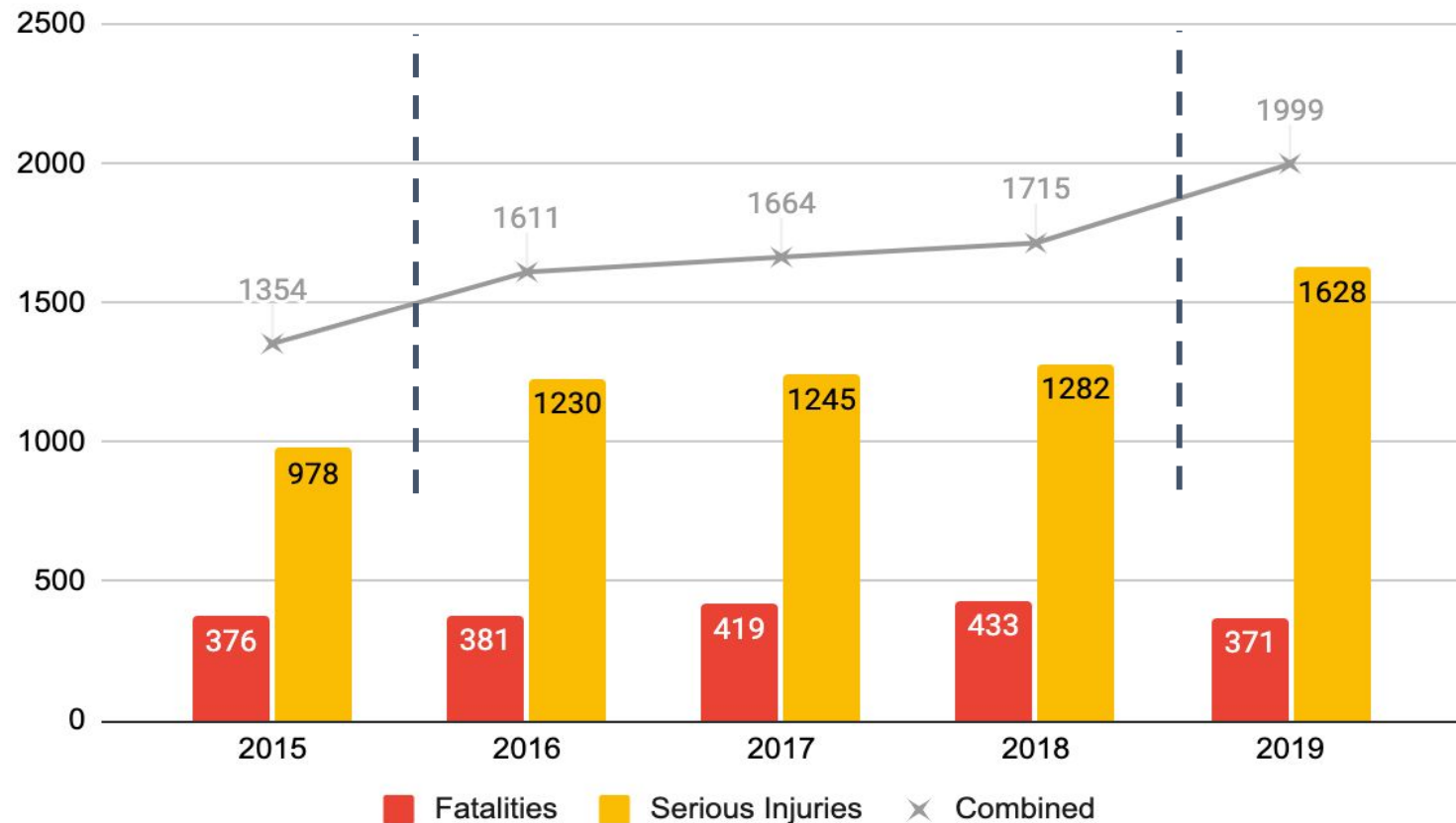


DVRPC's vision for the Greater Philadelphia Region is a prosperous, innovative, equitable, resilient, and sustainable region that increases mobility choices by investing in a safe and modern transportation system; that protects and preserves our natural resources while creating healthy communities; and that fosters greater opportunities for all.

DVRPC's mission is to achieve this vision by convening the widest array of partners to inform and facilitate data-driven decision-making. We are engaged across the region, and strive to be leaders and innovators, exploring new ideas and creating best practices.



Total KSI – Regional Trend (by person) 2015-2019



RSTF 2020

FOCUS ON

TRAFFIC SAFETY CULTURE



dvrpc

❖ Media

❖ Law

❖ Health

dvrpc



Intro to Traffic Safety Culture

-March 2020

“Traffic Safety Culture” is the **shared belief system** of a group of people that influences road user behaviors and stakeholder actions that impact traffic safety.

“A zero (traffic) deaths vision requires a change—a shift in culture both within transportation agencies and other organizations as well as within communities.”

Nic Ward

Director, Center for Health and Safety Culture, Montana State University

Traffic Safety Culture and the Media

-June 2020

Media's Influence

- How the media portrays crashes shapes our opinions
- Victim blaming can be an unintentional consequence of news coverage based on limited evidence

Opportunities for Change

- Neutral language avoids unconscious blame assignment
- Crash statistics help explain how seemingly episodic events are part of larger trends
- “Crash” not “Accident”

Traffic Safety Culture and the Law

-October 2020

Car Supremacy

- Laws prioritize driving, creates unintentional bias in adjudication
- Separation of land uses & parking minimums makes driving often the only choice, increases crash exposure
- Environmental laws target tailpipe emissions, but look past other polluting aspects of the auto industry

Opportunities for Change

- NYC's Right of Way Law: failure to yield = a traffic infraction (VZ)
- Laws not enough, culture shift needed

Just Streets -September 2018

A joint meeting of the RSTF and Health Communities Task Force

In the DVRPC Region...

43% of census tracts region-wide are above average for at least one correlated IPD

91% of census tracts where crash rates are above average are also above average for at least one correlated IPD

From DVRPC, "Crashes and Communities of Concern."
<https://www.dvrpc.org/Products/18022>

Featured Speaker

- **Sarah Shaughnessy**, MPH, MCRP, Community Health Planner, Richmond City Health Department

Add questions for Sarah to the Chat! We will have a short Q&A following the presentation.

Local Panel

- **Stanton B. Miller**, MD, MPH, FACS, Executive Director, Jefferson Center for Injury Research and Prevention
- **Tracy Nerney**, RN, Trauma Injury Prevention Coordinator, Jersey Shore University Medical Center
- **David Saunders**, Director, Office of Health Equity, Pennsylvania Department of Health

Moderated by **Lily Reynolds**, Deputy Director of Complete Streets, City of Philadelphia

Add questions for the panel to the Chat!

Breakout Groups - Action Items

- Each group will be assigned a facilitator to lead discussion
- One **notetaker** & one **reporter** needed from each group
- Group agreements:
 - Everyone will have a chance to speak.
 - It's OK to disagree.
 - Disagree with the idea, not the person.
 - Do not interrupt each other.
 - If you get stuck: park the issue so the process can keep moving.

Report Back & Closing Remarks

- **Patricia Ott, P.E., RSP**, Managing Member, MBO Engineering, LLC

Report Back

- Reporters share action items or themes from the discussion

RSTF 2020 Wrap Up

- This meeting concludes RSTF 2020: Focus on Traffic Safety Culture
- Discussion will continue...
 - Action items
 - Transportation Safety Analysis & Plan (2021)
 - Future RSTF meetings
- Next meeting: Spring 2021 on traffic safety enforcement




The DVRPC'S REGIONAL SAFETY TASK FORCE
WOULD LIKE to FORMALLY RECOGNIZE

Kelley Yemen

for HER SERVICE as CO-CHAIR of the RSTF,
and HER COMMITMENT to IMPROVING SAFETY for the TRAVELING PUBLIC
of the DELAWARE VALLEY REGION.

December 7th, 2020



BARRY SEYMOUR

EXECUTIVE DIRECTOR

DELAWARE VALLEY REGIONAL PLANNING COMMISSION

Closing

- Open call for nominations for a PA co-chair for the RSTF
 - 2-year commitment (2021-2022)
 - Space for nominations on the meeting survey
 - May also contact Marco/Kevin (contact info on next slide)
- Please complete meeting survey!
- See you in Spring 2021!

A photograph of four diverse women walking and laughing together outdoors. They are dressed in professional-casual attire. The image is overlaid with a semi-transparent white box containing contact information.

Contact

Marco Gorini, Transportation Planner
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Kevin Murphy, Manager, Office of Safe Streets
215-238-2868 | kmurphy@dvrpc.org



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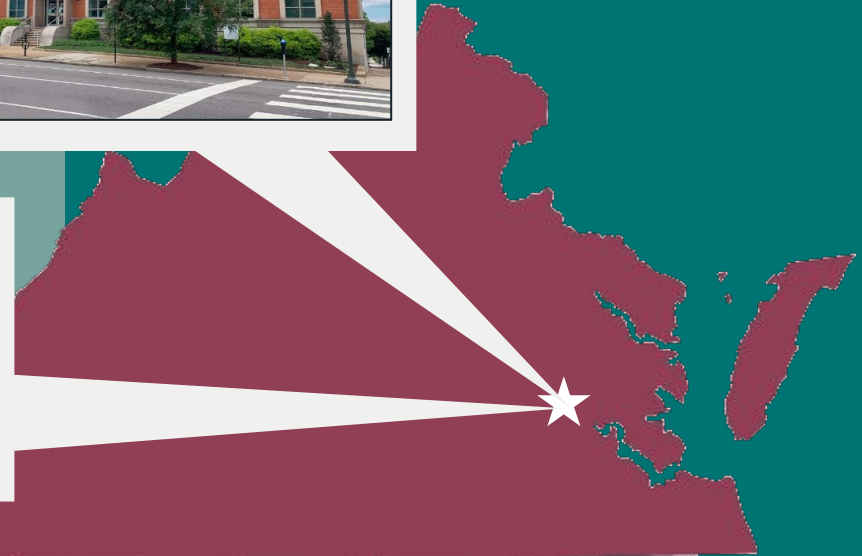
RICHMOND CITY
HEALTH DISTRICT

Getting Health in All Policies

Sarah Shaughnessy,
Richmond City Health Dept.
December 2020



Richmond City Health Dept.



What is Health in All Policies?

"Health in All Policies is an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts, in order to improve population health and health equity."

- WHO

HiAP requires an understanding of

Trends

How have outcomes changed over time in specific geographic locations?

Root causes

What are the drivers of poor health outcomes? What are the root causes of those outcomes?

Interventions

In what ways can we intervene to address the causes of poor health outcomes as they related to the social determinants of health?

Collaboration

Given its complexity and interrelatedness, what partnerships are needed to be effective in this work?

Traditional Approach

Vulnerable populations

Single factor/social
problem

Focus on lifestyle

Risky behavior

Risk assessment

Find a cure

Intervention/treatment

HiAP Approach

Oppressed populations

Systems focus

Social responsibility

Causes of risky conditions

Alternatives assessment

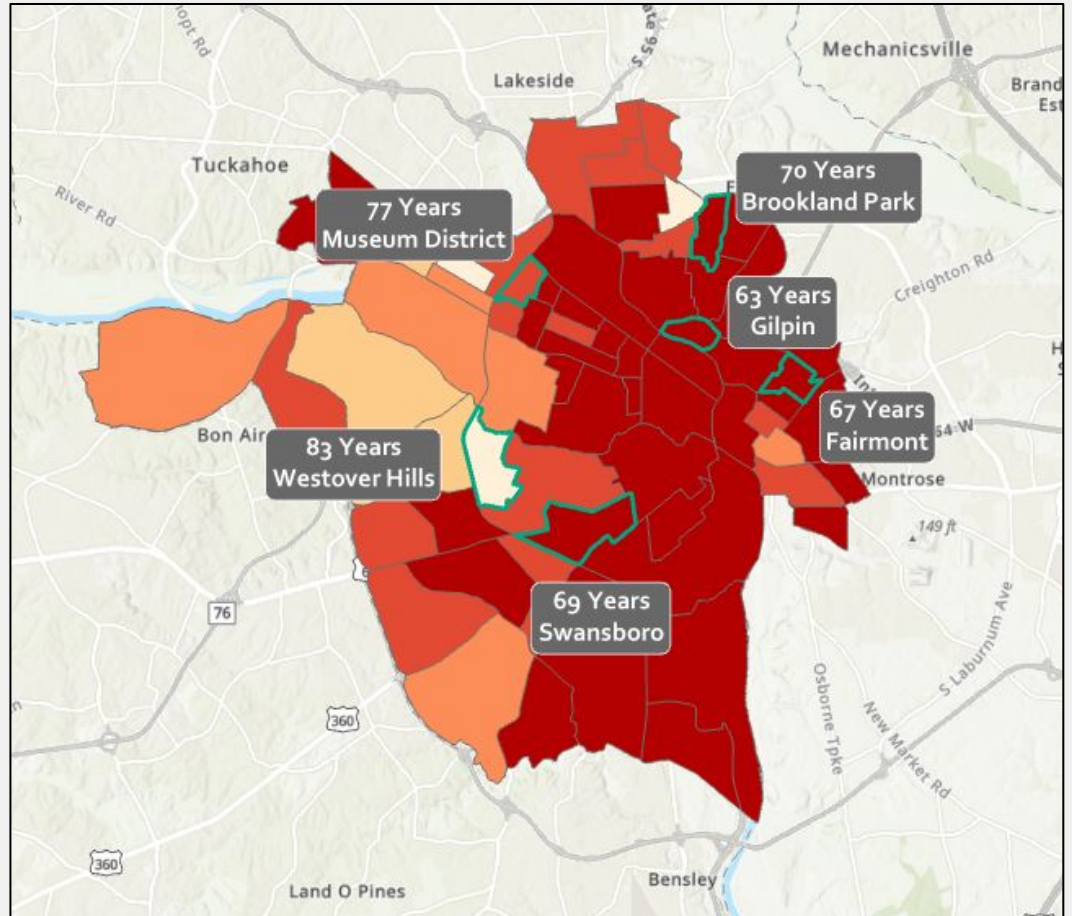
Find a cause

Systemic change

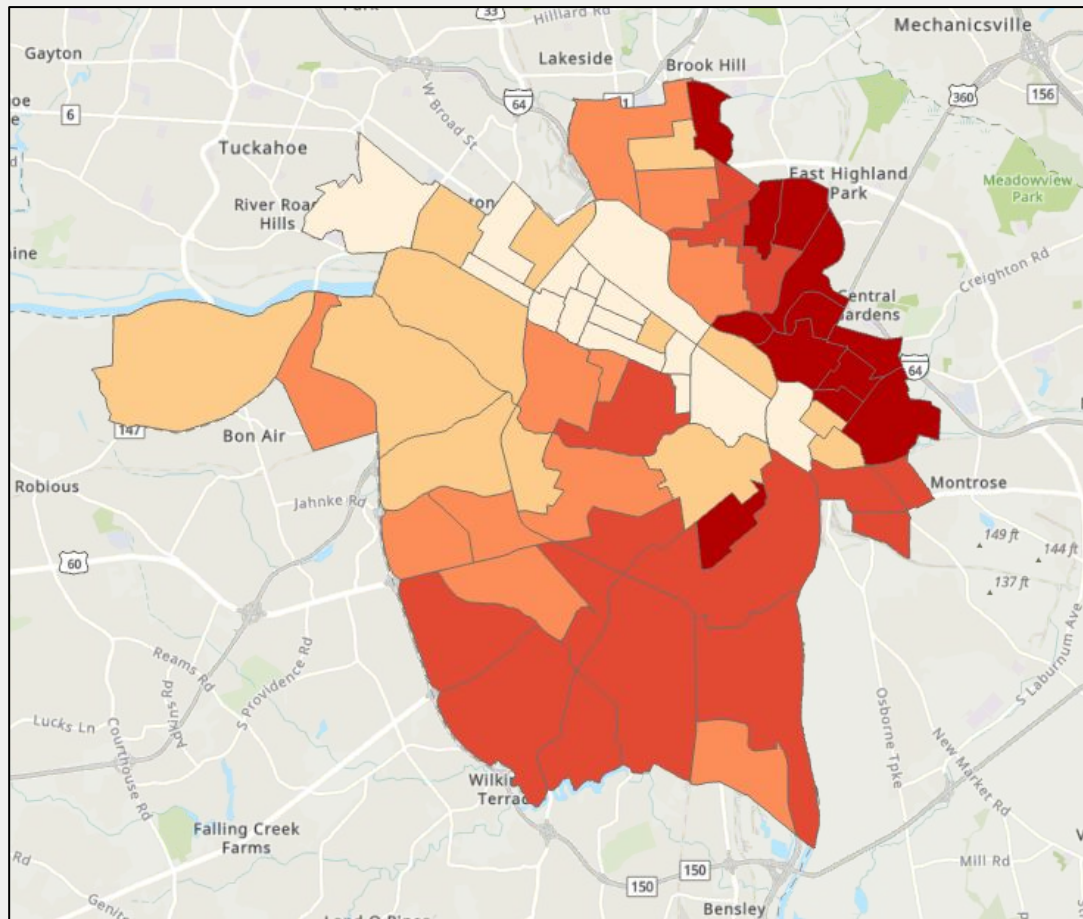


Richmond: A Tale of 2 Cities

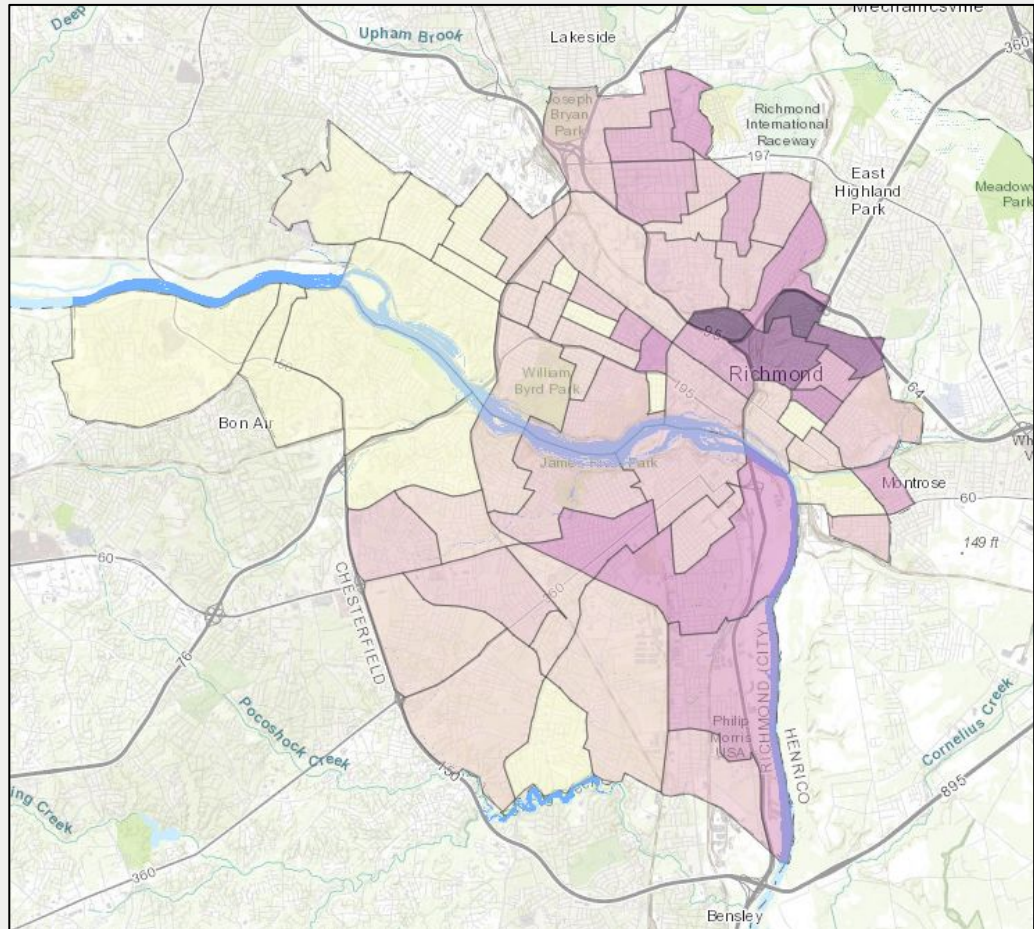
Life Expectancy



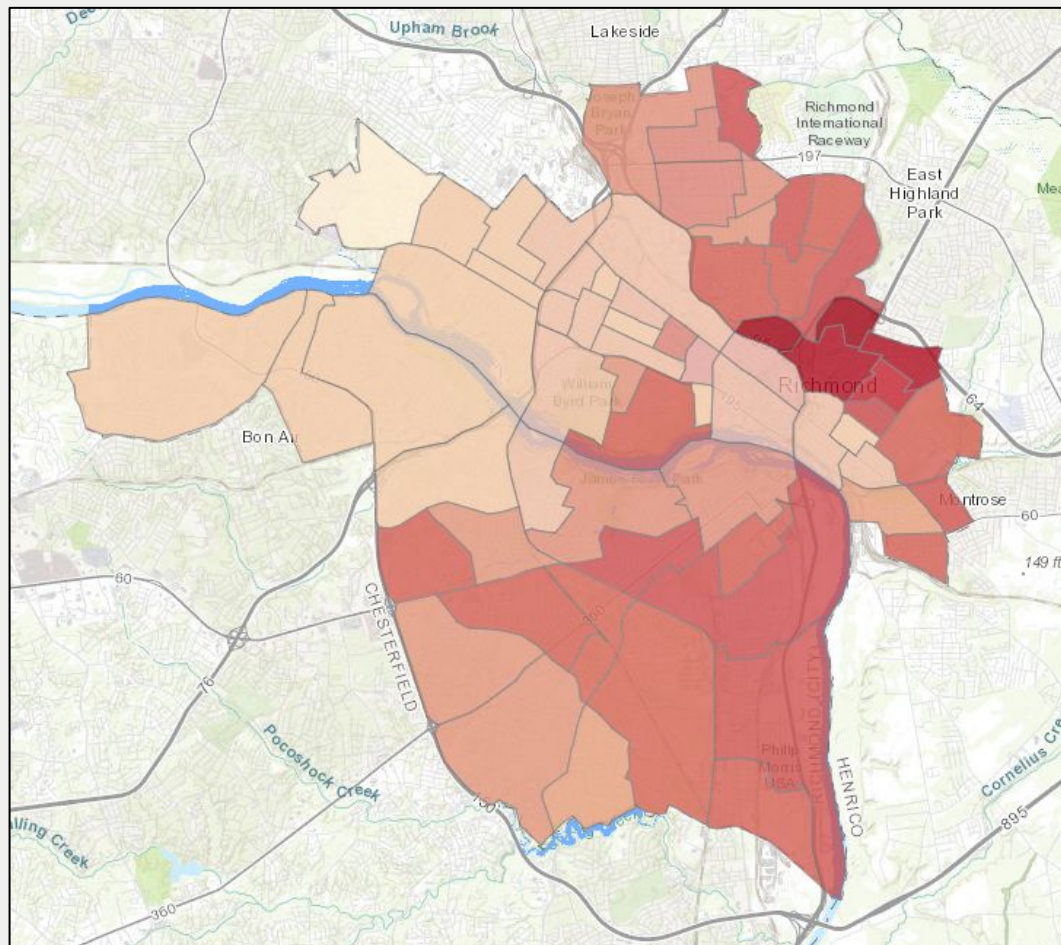
Diabetes Prevalence



No Vehicle Access

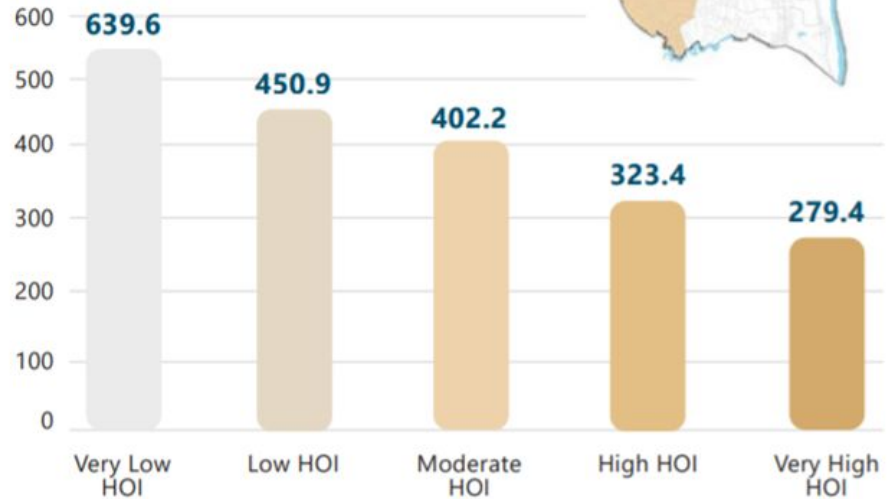


Urban Heat Vulnerability

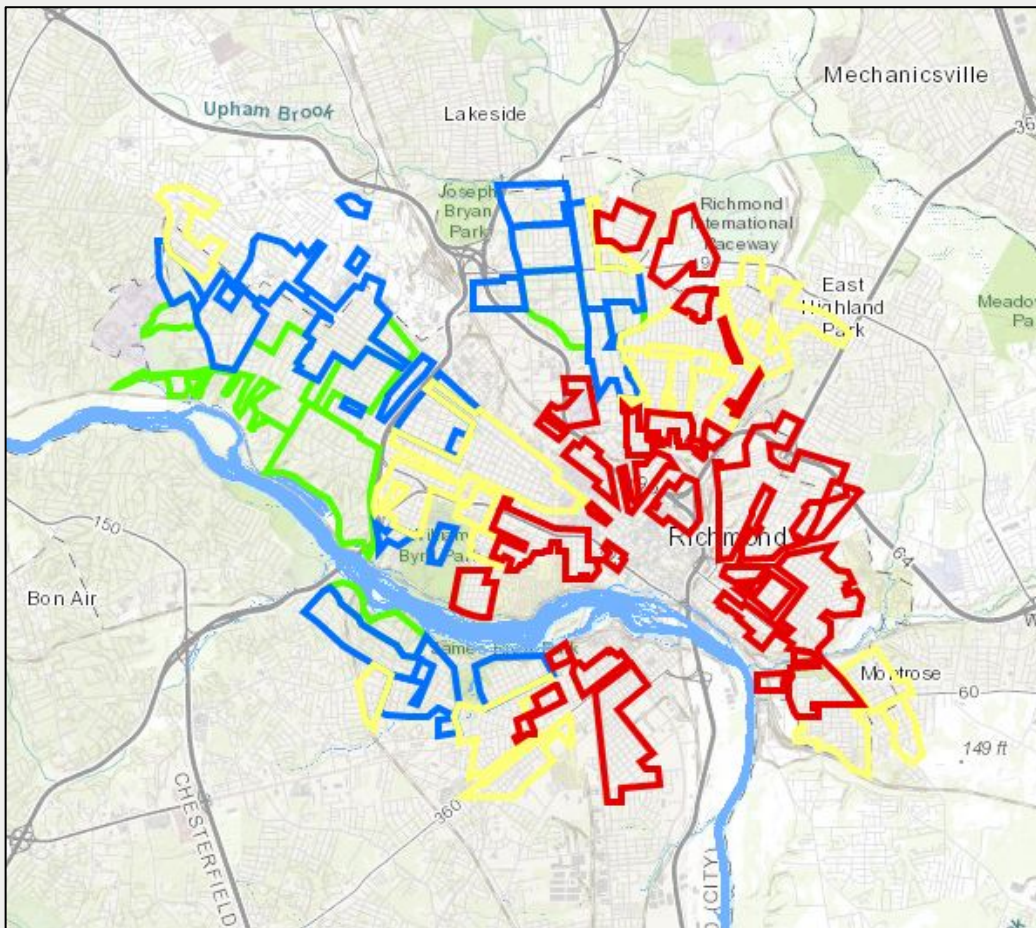


Crash Risk & Health Opportunity

Fatality and Injuries Rate per 100,000
by Health Opportunity Index Area
Colors on map reflect graph



Historic Redlining



Social Determinants of Health

ECONOMIC STABILITY	NEIGHBORHOOD AND PHYSICAL ENVIRONMENT	EDUCATION	FOOD	COMMUNITY AND SOCIAL CONTEXT	HEALTH CARE SYSTEM
Employment	Housing	Literacy	Hunger	Social Integration	Health Provider Availability
Income	Transportation	Language	Access to Healthy Options	Support Systems	Provider Linguistic and Cultural Competency
Expenses	Safety	Early Childhood Education		Community Engagement	Quality of Care
Debt	Parks	Vocational Training		Discrimination	
Medical Bills	Playgrounds	Higher Education			
Support	Walkability				

HEALTHY OUTCOMES
Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

10% HEALTHCARE

30% GENETICS

20% SOCIAL/ENV

40% IND BEHAVIOR

Impacting Health Outcomes

Smallest
Impact



Largest
Impact

Greater
Individual
Effort



Less
Individual
Effort



Counseling to be physically active; healthy eating education

Rx for high blood pressure, high cholesterol, diabetes

Immunizations, brief intervention, cessation treatment, colonoscopy

Fluoridation, 0g trans fat, iodization, smoke-free laws

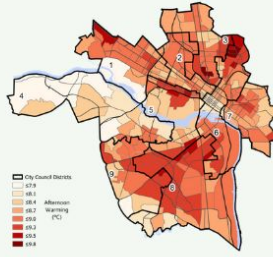
Poverty, education, housing, inequality

Expanded Park Access

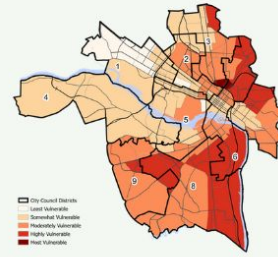
RICHMOND

Mayor Stoney announces ordinance to build five new parks in Richmond's Southside

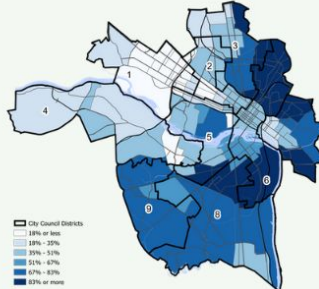
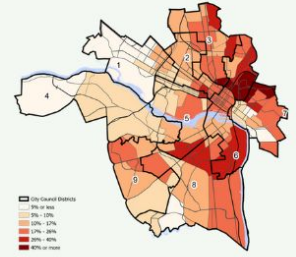
Urban Heat Island Effect



Vulnerability to Climate Change



Households w/o a Vehicle



**Due to disproportionate
impact, Black and brown
communities have high need
for walkable green spaces.**



Complete Streets Richmond

**COMPLETE
STREETS**
RICHMOND

2018 VISION ZERO SCORECARD

- A** SHOWING LEADERSHIP **B** MAKING PROGRESS **C** NEEDS IMPROVEMENT **D** NO ACTION



Ginter Park

Elementary School

Walkabout Report Summary

A community-based Safe Routes to School infrastructure assessment and walkabout study of the school environment to identify infrastructure, safety and community barriers to students walking and biking to school - conducted on September 11th, 2017.

The Ginter Park Elementary School (GPE) walkabout included parents, students, staff from Better Housing Coalition (BHC), the GPE Communities in Schools Coordinator (CISC), Sports Backers, Northside YMCA, Richmond City Health District (RCHD), Fit4Kids, Richmond Police Department (RPD), Department of Public Works (DPW) and Virginia Department of Transportation (VDOT).
196 students, or about 65% of the GPE student population, live within one mile of the school.

196 students, or about 65% of the GPE student population, live within one mile of the school. However, the majority of students take the school bus or are driven by a parent.

RPS Bus	43%
Student drop off/pick-up	26%
Walking	22%
GRTC bus then walking	3%
Carpool	4%
Biking	1%

Figure 1 2015 Modes of Transportation

District Level Recommendations

Certain policy recommendations could be tested at GPE then implemented on a district-wide basis. Implementing these policies requires a concerted effort from RPS, RCHD, RPD, community members, Fit4Kids, VDOT, DPW, City Council, Richmond City School Board, and the SRTS Coordinator.

- 1 Develop a Crossing Guard program that allows both hired and volunteer crossing guards to serve schools.
- 2 Develop a district wide travel plan to bring SRTS to all schools and integrate pedestrian and biking safety education into curricula.
- 3 Lower speed limits in school zones during student travel hours to 15 mph with signage and limited enforcement. Create special low-speed zones around schools that connect with other public pedestrian friendly areas.
- 4 Create district level SRTS Parent and Youth Councils.
- 5 Authorize GRTC to provide free bus passes to elementary and middle school students.

RICHMOND CITY
HEALTH DISTRICT



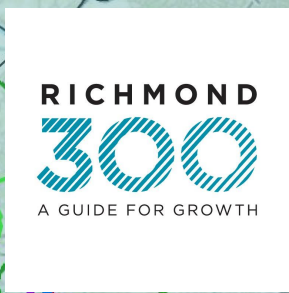
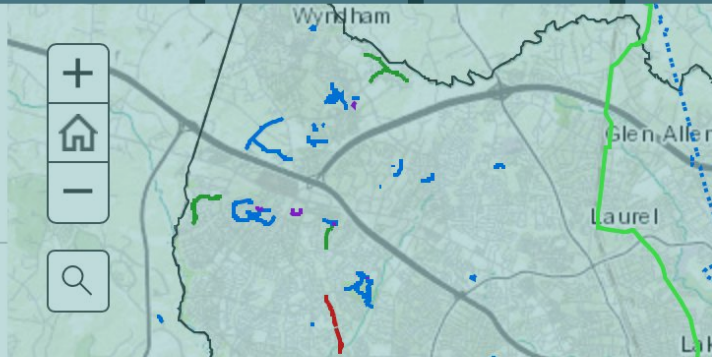
Safe Routes to School



Richmond Network

As the center of the metropolitan area, Richmond has the most developed bicycle and pedestrian network in the region.

- Regional Bike Routes
 - Designated Bike Lane
 - Shared Use Path
 - Shared Lane
 - Paved Shoulder
 - Natural Surface Trail
- Sidewalks
- National Bike Routes



VIRGINIA WALKABILITY ACTION INSTITUTE

Local & Regional Planning





Health Impact Assessment

2. Consider the Impact

Select the factors the project or policy may affect. A project or policy may impact many factors or just one.

Factors that contribute to health equity	Check all that apply
Access to healthy food	
Access to safe, affordable, housing for all people	
Supportive neighborhoods/social support/social capital	
Healthy indoor and outdoor places	
Access to safe, clean, and quality indoors or outdoor spaces, such as parks, trees, and playgrounds	
Early childhood development services and community supports	
Education that provides high quality and culturally appropriate education for each student	
Job training and jobs that provide all residents a livable income	
Community economic development that supports local homes, businesses, buildings and land	

- Social policy is health policy

- Address the cause, not the symptoms

- Work for health in *each* policy to achieve health in *all* policies



Thank you!

Sarah Shaughnessy, MPH, MCRP
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Richmond City Health Dept.
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