



# SAFE ROUTES TO SCHOOL HEALTH IMPACT ASSESSMENT

## EXECUTIVE SUMMARY

### SAFE ROUTES TO SCHOOL

Safe Routes to School is an initiative which recognizes that the levels of childhood obesity and the levels of active transportation to school are integrally linked - if the levels of active transportation to school can be raised, the levels of childhood obesity can be correspondingly lowered. If this perception is correct Safe Routes to School can have a positive effect of lowering levels of body mass index for over 36,000 Kindergarten - 8th grade Columbus City School students, over 13,000 of who are at risk for obesity.

### A CATALYST FOR CHANGE

Safe Routes to School is a federally funded program that not only seeks to get students safely to school, but also to increase levels of active transportation to school which can raise levels of physical activity. Safe Routes to School also seeks to improve the adverse environmental conditions that many students encounter on their way to school by taking a holistic approach to improving active transportation travel conditions.

### THE LARGE DISTRICT SCHOOL TRAVEL PLAN

During the 2013-2014 school year Columbus Public Health in partnership with Columbus City Schools and with the support of the Ohio Department of Transportation set out to create one of the first Large District School Travel Plans, entailing 24 or more schools, in the United States. Funding was

### OVERCOMING BARRIERS

- The top barrier to active transportation to school in the Focus Schools was “violence or crime” with 74% of parents listing it as an issue.
- The next two most listed barriers were “speed of traffic along route” and “safety of intersections and crossings” with 55% and 54% of Focus School parents respectively listing them as an issue.

allotted to perform a Health Impact Assessment on the plan to ensure that current social and health disparity gaps in the Columbus City School District are lessened by the plan instead of risking the inadvertent widening of those gaps. This was done by using socio-demographic data along with a selection of health indicators to decide upon 15 Focus Schools out of the 94 Columbus City Schools with Kindergarten - 8th grade students. An extensive literature review was also conducted along with collecting a variety of first hand data. This data was compiled and sorted into 3 main areas of study: physical activity, traffic safety and crime. Predictions and recommendations were made based on the data and research in order to

better inform the travel plan steering committee on how to ensure that health and social equity is taken into consideration while creating the countermeasures, a set of solutions, made by the plan.

# KEY PREDICTIONS, EVIDENCE & RECOMMENDATIONS

## PHYSICAL ACTIVITY

PREDICTIONS	EVIDENCE	RECOMMENDATIONS
<b>Building new or improving existing sidewalks</b> along with installing crossing and intersection treatments will result in a 10-15% increase in walking at schools where there is current lack of sidewalk connectivity and safe crossings.	Safety of intersections were a barrier to 54% of Focus School and 58% of Non-Focus School parents.	Implement traffic calming infrastructure and sidewalk improvements around schools that experience high volume and high speed traffic.
<b>Implement traffic calming infrastructure and sidewalk improvements</b> around schools that experience high volume and high speed traffic.	There was a 133% increase in female riders and a 44% increase in male riders on a street segment in New Orleans, LA after a bike lane was newly striped.	Provide bicycling facilities such as separated bike lanes on arterial roadways and bicycle boulevards on local streets with traffic calming measures such as chicanes, bulb outs, and traffic circles.
<b>A walking school bus program</b> will increase walking to schools throughout the Columbus City School District. Participation in walking school busses will increase by up to 80% per year.	Project U-Turn had an increase of participation in the walking school bus of 315% (165 participants to 520) over the course of 4 years.	Create and maintain a walking school bus encouragement program.

## TRAFFIC SAFETY

<b>Concentrate traffic calming interventions</b> in the low socioeconomic areas.	One city decided to focus their traffic calming interventions in low socioeconomic areas. The result was a 2.14 decrease in child pedestrian injury rate.	A minimum of 75% of infrastructure interventions built as part of Safe Routes to School funding should be allocated to the 15 focus schools.
<b>Limiting vehicle speeds</b> to 20 miles per hour or less along major walking and biking routes around each focus school will increase the numbers of students actively commuting and decrease pedestrian death and serious injury rates.	If a pedestrian is hit by a vehicle that is traveling 20 mph, the pedestrian survival rate is 95 percent. This drops to 60 percent at 30 mph, and just 20 percent at 40 mph.	A maximum speed of 20 miles per hour should be established along major walking and biking routes during before and after school hours.
<b>Increasing walking and biking</b> in Focus Schools will require a sustained, community-wide effort.	The National Personal Travel Survey evidence is that minority students are twice as likely to walk to school as whites and children from households with incomes below \$20,000 are more likely to walk. While walking rates are high at Focus Schools, so are collisions.	We recommend that the City of Columbus adopt a complete streets policy that prioritizes implementing in infrastructure and community engagement the neighborhoods surrounding the focus schools.

## CRIME

<b>Increasing sense of safety</b> and decreasing parental fear of crime would increase children's active transport and moderate to vigorous physical activity.	The Committee on Environmental Health states that reducing parental fear of crime can promote outdoor physical activity. Level of parental fear can predict rates of children's walking and biking to school, and moderate to vigorous physical activity.	Implement programming interventions that provide more visible adult supervision.
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