Overview

• Description of HIA
• Recommendations
• Evaluation
• Lessons learned

Clark County, WA
Bike & Pedestrian Master Plan HIA

1. Screening
   - January 2010
   - Produce Rapid HIA

2. Scoping
   - Provide input on Plan

3. Assessment
   - Produce Comprehensive HIA

4. Reporting
   - Evaluate effects of HIA

5. Evaluation
   - February 2011
Projects
Priority trails, bikeways, and sidewalks

Programs
1. Restructure bike/ped committee
2. Improve internal communications
3. Ciclovia
4. School programs
5. East county scenic tour

Policies
1. Developing a network
2. Jurisdictional coordination
3. Traffic & demand management
4. Education & encouragement
5. Funding
6. Active transportation & supporting land uses
Recommendations

- Low-speed designs
- Variety of facility types
- Parking programs
- Performance measures
- Land use policies
- Food access
- Design for all users
- Recognize safety in numbers
- Include health & equity in criteria
Evaluation

Criteria

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Points</th>
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<tbody>
<tr>
<td>Socioeconomic status</td>
<td>10 points</td>
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<tr>
<td>Walkability potential</td>
<td>4 points</td>
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<tr>
<td>Connectivity</td>
<td>5 points</td>
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<td>Low-stress facilities</td>
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Evaluation Categories:

- Closing Gaps
- Safety & Comfort
- Access & Mobility
- Multi-modal
- Implementation
- Community Benefit
- Health
Evaluation

Approach:

- HIA effectiveness
  - Qualitative comparison of final plan & HIA recommendations

- Decision making process
  - Key informant interviews
Evaluation

Influence of the HIA:

• Plan referred to as a “transportation and health” plan
• All recommendations at least partially adopted
• Health criteria included in project prioritization
• Health issues more visible

Partnership resulted in:

• More HIAs, closer to “health in all policies”
• Better Screening
• Health Element in the Comprehensive Growth Management Plan
Evaluation: Interviews

The health and socioeconomic benefits and health criteria would not have been in the plan. It wouldn’t have even been on our radar.

I’ve evolved as a planner.

The HIA was relevant, timely, and really exciting to have as a part of this process.

We didn’t have that data available before.

The HIA helped to daylight equity issues.

Planners from this project are beginning to ask what Public Health can bring to the table.
Lessons Learned

**Strengths**  early involvement, extensive baseline assessment, collaborative relationships

**Challenges**  data needs, state of the science, economic terms, communicating data

Read related documents at:

Acknowledgements
Robert Wood Johnson Foundation; ESRI, Inc.