

# **Collaborative Workshop on Walkable Kentucky Communities**

**Thursday, August 27th, 8:30 am - 4:00 pm  
Transportation Building, 200 Mero St., Frankfort, KY 40601**

## **Final Report and Recommendations**

### **Recommendations in Brief:**

#### Recommendation #1:

Work with AARP, Main Streets, and other partners to develop a statewide network of local champions

#### Recommendation #2:

Create the *Kentucky Pedestrian Planning Assistance for Communities* brand and update/expand program materials

#### Recommendation #3:

Document and disseminate successes of program and lessons learned for a statewide and national audience

#### Recommendation #4:

Educate State Legislature on the need for a long-term funding source or active transportation

**Ian Thomas, America Walks  
Gary Toth, Project for Public Spaces**

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## **Project Background and Workshop Goals**

Founded in 2004, the Partnership for a Fit Kentucky (PFK) is a team of public and private-sector leaders, administrators, advocates, health professionals, and community members who support the Kentucky Department for Public Health's Obesity Prevention Program.

In 2012, PFK identified community access to physical activity as a top priority, and formed a Physical Activity Committee to promote policy, environmental, and system changes that support active lifestyles. Member organizations include Kentucky Transportation Cabinet, KY Tourism Cabinet, KY Coordinated School Health, KY Injury Prevention and Research Center, KY Office of the Americans with Disabilities Act, KY Association of Economic Development, KY Department of Education, KY Rails to Trails, KY Department of Parks, Federal Highway Administration, National Parks, and community walk-bike advocates.

The Committee's first initiative was to provide all 69 local health departments with funding and resources to conduct community walkability audits. KY Transportation Cabinet (KTC) team members followed up with individualized feedback and technical assistance to help each community interpret the results of the audit and start to address identified problems. As a next step, in 2013, the Physical Activity Committee offered a competitive funding opportunity through the Healthy Communities Program and identified 6 communities to begin planning for active transportation design. Three communities worked with the Kentucky Tourism Cabinet to incorporate existing trails into a broader trail system for longer distance walking and exercise opportunities. The other three began to develop pedestrian master plans with training and technical assistance provided by KTC, Federal Highway Administration, and the KY Office of the Americans with Disabilities Act.

In 2014-2015, KTC and the Kentucky Department for Public Health (KDPH) formalized the training and technical assistance into a workshop curriculum, and held regional workshops in the western and eastern parts of the state. Travel grants were awarded to ten communities who were then expected to convene a team of stakeholders, attend the workshop, conduct a walkability audit, prioritize pedestrian improvements, develop a formal pedestrian plan, and have it officially adopted by the local government. Accomplishing all of these steps documents the community's need and readiness for pedestrian improvements, and greatly improves the prospects for the community to obtain funding for projects listed in the plan.

Through these efforts, a total of 27 Kentucky communities and 3 Metropolitan Planning Organizations (MPOs) have adopted pedestrian plans, and most of them have funded and completed actual construction projects. However, with more than 500 cities and towns in Kentucky, the main challenge faced by KTC and KDPH is insufficient capacity to continue reaching out to new communities, engaging stakeholders in the process, and actually delivering the trainings.

To address this challenge, America Walks (with funding from the U.S. Centers for Disease Control and Prevention) facilitated a partnership-building workshop on August 27, 2015 in Frankfort. The goals of the workshop were to:

1. Expand partnership and increase impact of existing pedestrian planning and implementation efforts
  - Engage new partners, including American Association of Retired People (AARP), Area Development Districts, University of Kentucky Transportation Center, and Main Streets
  - Increase statewide awareness of walkable community benefits and create demand for training in pedestrian planning and implementation
2. Increase communities' access to effective resources and funding for pedestrian planning and implementation
  - Expand training opportunities for communities and increase awareness
  - Help communities find funding to develop pedestrian master plans and projects

This report summarizes the presentations made, discussions held, and ideas generated during the workshop, and includes recommendations for next steps for the partnership.

#### Workshop Facilitator Bios

As State and Local Program Director with America Walks, **Ian Thomas** works with government agencies and other organizations on education and advocacy projects supporting walkable communities. Previously, he served as Executive Director of the PedNet Coalition of Columbia, MO, developing one of the largest Walking School Bus programs in the country and coordinating a campaign that led to Columbia adopting the first "complete streets" policy in Missouri. In 2013, Ian won election to the Columbia City Council, where he continues to advance healthy community policies. He is a member of Smart Growth America's Local Leaders Council and the National League of Cities' Transportation and Infrastructure Committee.

During 34 years with New Jersey Department of Transportation, **Gary Toth** helped transform the agency into one that invites communities into the planning process and designs transportation systems that respond to local needs. He was the founder of the agency's Context Sensitive Solutions Program and Project Manager for the Smart Transportation Guide. As Senior Director for Transportation Initiatives with the Project for Public Spaces, Gary has worked with dozens of communities to help them plan and create more sustainable streets and transportation networks. He is a certified instructor for the National Highway Institute's Transportation and Land Use Course.

# Workshop Participants

## Kentucky Department for Public Health:

- Connie White, Deputy Commissioner
- Shellie Wingate, Healthy Communities Program
- Elaine Russell, Obesity Prevention Program
- Dustin Falls, Arthritis and Osteoporosis Program
- Andy Waters, Health Promotion Branch
- Nicole Barber Culp, School Health

## Kentucky Transportation Cabinet:

- Troy Hearn, Planning Division
- Carol Brent, Planning Division
- Lynn Soporowski, Planning Division
- Adam Ross, Design Division

## Government and Other Public-Sector Partners:

- Greg Rawlings, Federal Highway Administration
- Joe Crabtree, University of Kentucky Transportation Research Center
- Steve Sparrow, Kentucky Injury Prevention Research Center
- Genia McKee, Kentucky Injury Prevention Research Center
- April Harris, Three Rivers Health Department District
- Lanny Taulbee, Kentucky Department of Aging and Independent Living
- Elizabeth Schmitz, Kentucky Environmental Education Council
- Vicki Birenbeg, Kentucky Heritage Council
- Kitty Dougood, Kentucky Main Streets
- Nicole Peritore, Kentucky Cooperative Extension

## Private-Sector Partners:

- Scott Wegenast, AARP
- Carl Pagels, AARP
- Jeff Rubin, AARP/Age-Friendly Berea
- Amalia Mendoza, Foundation for a Healthy Kentucky
- Stephen Lin, Kentucky Youth Advocates
- Kristian Wagner, Kentucky Cancer Consortium
- Sellus Wilder, Walk Bike Frankfort

## Facilitators:

- Ian Thomas, State and Local Program Director, America Walks
- Gary Toth, Senior Director for Transportation Initiatives, Project for Public Spaces

## Welcome and Introductions

The morning session started with a welcome from Connie White, Deputy Commissioner of the Kentucky Department for Public Health. Dr. White then introduced the facilitators for the workshop - Ian Thomas of America Walks and Gary Toth of Project for Public Spaces.

Ian and Gary reviewed the workshop goals and agenda and then invited each participant to introduce himself or herself, and describe why collaborating for walkable communities is important to him/her on a personal or professional level. Here are the responses:

- *Complete streets are safe streets*
- *Kids need a voice/need to be heard*
- *We need "age-friendly communities"*
- *Independence is exploring where you live*
- *We need to remove the mental barrier of "no car=homebound"*
- *In auto-centric neighborhoods, residents don't interact or know each other*
- *Revitalize historic downtown - I'm not against cars but let's slow them down*
- *Public health needs to focus on built environment as part of changing behavior*
- *For FHWA: "Health + Transportation + Walkability" resonates*
- *Many agencies have learned the critical importance of collaboration*
- *There's no way we can get this done alone*
- *Need to change mindsets on how we allocate funds*
- *Culture change must be sensitive to all users*

## Presentation:

### ***Benefits & Best Practices in Walkable Community Design***

In this session, the facilitators gave a 30-minute presentation titled *Benefits and Best Practices in Walkable Community Design*.

To illustrate the diverse benefits of walkable communities, a *Collaborative Framework of Aligning Principles*, developed by the Montana team in preparation for a parallel workshop, was presented. The six aligning principles are:

1. Safety
2. Mobility and Access
3. Economic Vitality
4. Quality of Life
5. Health and Environment
6. Equity

More information about Montana's *Collaborative Framework of Aligning Principles* is provided in Appendix 1.

Data were provided showing that the cost of health care as a percentage of Gross Domestic Product is rising unsustainably, and that health care services and education have only a small impact on the problem. Because the built environment is the most important factor in determining health behaviors, and since public health agencies have little impact on the environment, they must partner with others - especially transportation and planning.

Next, a history of twentieth-century transportation planning in the U.S. was given. Due to the American "love affair with the automobile," federal and state transportation agencies were instructed (and generously funded) to design and build a massive highway and street system that would enable private cars to travel quickly and efficiently throughout their city, the region, and the country.

Over several decades, it has become apparent that there are serious drawbacks to what is now seen as an over-reliance on the automobile - health, safety, pollution, quality of life, cost, etc. Public health professionals, with their experience in community engagement and data analysis, can assist transportation planners and engineers in moving towards a more multi-modal future. Redesigning communities so they are safe, convenient, and attractive for people to walk to nearby destinations is a critical component of this new approach.

Finally, in this session, examples of effective collaboration among state-level Health, Transportation and Commerce Departments and the non-profit sector in Oregon, Minnesota, Massachusetts, Iowa, North Carolina, Arkansas, Kentucky, and Montana were presented. This information is included in Appendices 1 and 2.

## **State and Local Presentations**

Following a short break, three presentations were given, summarizing ongoing state and local programs to improve walkability in Kentucky communities.

First, Elaine Russell with the Department for Public Health's Obesity Prevention Program discussed the work of the Partnership for a Fit Kentucky's Physical Activity Committee. This group, many of whose members were in attendance, has identified the development and adoption of a "pedestrian plan" as the first step in an individual community's strategy for improving the built environment for walking and increasing rates of physical activity.

Troy Hearn, Bicycle and Pedestrian Coordinator with the Kentucky Transportation Cabinet, then outlined the training he has developed to give community stakeholders the knowledge and tools they need to develop pedestrian plans. When done correctly, the process of developing a detailed pedestrian plan engages community members to identify priorities for creating a safe, attractive walking and biking environment for people of all ages and abilities. Once the plan has been officially adopted by local government, it documents the community's need and readiness for pedestrian improvements, and greatly improves the prospects for the community to obtain funding for projects listed in the plan.

Finally, Sellus Wilder with Walk Bike Frankfort (a local advocacy organization) discussed the City of Frankfort's Pedestrian and Bicycle Master Plan, one of the first to be developed as a result of training. He described the 2014 training workshop facilitated by Troy Hearn through the partnership between the Kentucky Transportation Cabinet (KTC) and the Kentucky Department for Public Health (KDPH), and reported on the ensuing community engagement and planning process, the adoption of the plan, and implementation, which is now in progress.

To date, 27 Kentucky communities and 3 Metropolitan Planning Organizations (MPOs) have adopted pedestrian plans, and most of them have funded and completed actual construction projects. However, with more than 500 cities and towns in Kentucky, there is a lot of work ahead before Kentuckians will have widespread access to walkable places.

While the training program has been very successful, a significant challenge faced by KTC and KDPH is a lack of capacity to continue reaching out to new communities, engaging stakeholders in the process, and actually delivering the trainings. The main purpose of the workshop was to solve this challenge.

## Walking Meetings

Following the *Better Bites* lunch, participants were formed into groups of three or four (with colleagues from the same department split into different groups) and each group was asked to take a walking meeting.

During a 45-minute walk (maps of recommended walks from the KTC headquarters were provided) the groups were instructed to discuss the following questions related to the presentations they had just heard about existing efforts to assist communities to develop their own pedestrian plans:

1. How effective are these efforts?
2. What are the strengths and assets of these efforts and how can they be enhanced?
3. What are the barriers and challenges and how can they be addressed?

### 1. Responses on Effectiveness

- *It was hard to start but now the ball is rolling, the program is effective*
- *Efforts largely effective, but more outreach with the business community is needed*
- *Communities are doing good work but need to remember small things such as sweeping the streets*
- *The opportunity for agencies to learn community perspectives is important*
- *Agencies cannot advocate, but non-governmental team members can*



## **2. Responses on Strengths and Assets**

- *Education about the idea of "the useful walk"*
- *The message that, if you plan for most vulnerable, you will address everyone's needs*
- *Skills/knowledge about identifying and leveraging champions (such as Police, Fire Department, etc.)*
- *Use of funds, staff time and other resources to inspire community leaders*
- *Use of case studies of successful communities*
- *Finding unique ways to engage kids/students*
- *Competition between towns*

## **3. Responses on Barriers and Challenges**

- *It's hard to get decision-makers into the room*
- *Initial buy-in from new communities is sometimes challenging - because communities lack this expertise, successful outreach is difficult*
- *Some communities find the word 'policy' scary*
- *It's important to frame the message correctly*

# **Discussion Forum: *Partnership Asset Mapping and Future Planning***

## **Small-Group Discussions**

After capturing the key ideas discussed during the walking meetings, an asset-mapping and future planning activity was conducted.

Participants were organized into four small groups, again ensuring that colleagues were at separate tables, and asked to discuss the *Pedestrian Planning for Communities* program and answer the following questions:

1. How does my organization align with this work?
2. What strengths, capacities, and other assets can my organization bring to the partnership?
3. What specific role can my organization play, going forward?

The following responses were recorded.

## **How does my organization align with this work?**

### AARP/Age-Friendly Berea:

- *Livability, "age friendly" process, and quality of life for all*

### Foundation for a Healthy Kentucky:

- *Develop and promote health policy*
- *Invest in Kentucky's future - kids and obesity prevention*

### Kentucky Environmental Education Council:

- *Encourage people to be active outside*
- *Network of educators who can be trained and can share resources*

### Kentucky Injury Prevention Research Center/ Safety and Prevention Alignment Network/ Safe Communities:

- *Safe aging, safety and injury prevention, motor vehicle safety*
- *Safe and healthy communities, promote physical activity and walkability*
- *Provide valuable DATA*

### Kentucky Department of Aging and Independent Living:

- *Oversee agencies and districts on aging and independent living*

### Kentucky Heritage Council:

- *Promote existing and continuing use of neighborhoods built before the age of the automobile*

### Kentucky Main Streets

- *Create pedestrian-friendly communities through:*
  - *Revitalizing downtowns*
  - *Having boots on the ground*

### Kentucky Transportation Cabinet:

- *"We build it" and lots of other roles*
- *Build a whole lot of sidewalks/new group focus*
- *Research and training capabilities*
- *Technical subject matter experts*

### Kentucky Department for Public Health:

- *Bring partners together, develop and promote messages*
- *Empower youth to advocate for what they would like to see happen*
- *Provide resources to schools and local health departments*

### Three Rivers Health Department:

- *Strategic planning identifies need for physical activity*
- *Investing in increasing physical activity and walkability is a priority*

## **What strengths, capacities, and other assets can my organization bring to the partnership?**

### AARP:

- *Research, tool kits*
- *Advocacy voice, leverage*
- *Expertise, funding*

### Age-Friendly Berea

- *State wide and national demonstration site*

### Foundation for a Healthy Kentucky:

- *Ability to move policy*
- *Resources to invest in prevention, data*

### Kentucky Environmental Education Council:

- *Network of educators who can be trained and can share resources*

### Kentucky Injury Prevention Research Center/ Safety and Prevention Alignment Network/ Safe Communities:

- *Capacity for collaboration with many groups*
- *DATA*

### Kentucky Department of Aging and Independent Living:

- *Data/statistics on aging and disability*
- *Activities and access to senior centers for other groups*

### Kentucky Heritage Council:

- *Technical expertise (not money)*
- *Tax credit program for rehabilitating historic buildings*

### Kentucky Main Streets

- *Network of staffed local organizations*

### Kentucky Transportation Cabinet:

- *Funding, technical expertise*
- *State wide influence*

### Kentucky Department for Public Health:

- *Network of local health departments*

### Three Rivers Health Department:

- *Local partnerships*
- *Community health improvement plan (CHIP)*
- *Experience in policy wins*

## **What specific role can my organization play?**

### AARP

- *Communication channels*
- *Advocacy, policy, expertise*

### Age-Friendly Berea

- *Promotion, marketing, planning, involvement*

### Foundation for a Healthy Kentucky:

- *Raise awareness*
- *Support policy development*

### Kentucky Environmental Education Council:

- *Local school based teams of teachers*
- *Students wanting to improve quality of live*
- *Connect these teams to resources and opportunities*

### Kentucky Injury Prevention Research Center/ Safety and Prevention Alignment Network/Safe Communities:

- *Marketing*
- *Promote and connect many partners with available resources*

### Kentucky Department of Aging and Independent Living:

- *Information, referral, promotion*

### Kentucky Heritage Council/ Kentucky Main Streets:

- *Education*
- *Advocacy, policy development*
- *Provide an audience for training*

### Kentucky Transportation Cabinet:

- *Build transportation network*
- *Training and development capacity - Local Training Assistance Program (LTAP)*
- *Facilitate state and local meetings*
- *Research at local level*

### Kentucky Department for Public Health:

- *Resources and education*
- *Create statewide networks*
- *Rapport at local level*

### Three Rivers Health Department:

- *Board of Health can work with mayors and local elected officials to promote policy and program initiatives*

# **Presentation:**

## ***Funding for Pedestrian Planning and Implementation***

In the next session, a brief overview of possible funding strategies for active transportation planning and implementation was given. The following programs and other opportunities were mentioned:

### Federal Highway Administration (FHWA) Programs:

- Transportation Alternatives Program (TAP)
- Surface Transportation Program (STP)
- Congestion Mitigation Air Quality Program (CMAQ)
- Highway Safety Improvement Program (HSIP)
- Recreational Trails Program (RTP)
- National Highway Performance Program (NHPP)

### Other U.S. Department of Transportation (USDOT) Programs:

- State or Metropolitan Planning Grants
- Federal Lands Access/Transportation Programs (FLAP/FLTP)
- Section 402 State and Community Highway Safety Grants
- Federal Transit Administration (FTA) Capital Funds
- FTA Associated Transit Improvement Funds
- TIGER grants

### Other Federal Funding Sources:

- U.S. Economic Development Administration Public Works Program
- Housing and Urban Development (HUD) Community Development Block Grants (CDBG)
- Centers for Disease Control (CDC) Community Transformation Grants (CTG)
- CDC Health Impact Assessment Grants (HIA)
- U.S. Department of Agriculture (USDA) Rural Business Opportunity Grants (RBOG)
- USDA Community Facilities Direct Loan and Grant Program

### Common Local Funding Sources:

- General Funds
- Local Gasoline Tax
- Transportation Utility Fee
- Vehicle Registration Fee
- Community Improvement District (CID)
- Tax-Increment Financing (TIF)

### Other Local Funding Sources:

- Hotel/Motel/Lodging Taxes
- Income/Payroll/Employer Taxes

- Traffic Violation Revenue
- Parking Utility Revenue
- Point-of-Sale Sidewalk Billing
- Development Charges

#### Private Foundation Sources

- Surdna Foundation
- Kresge Foundation
- Robert Wood Johnson Foundation
- Bikes Belong Foundation
- REI

The facilitators also discussed the importance of building public support for walking and walkable community design. While funding from sources such as those listed above is needed for construction of pedestrian facilities and large-scale and long-term planning processes, it was stressed that:

1. Funding does not obviate the need to build public support, and
2. When the public education and advocacy process is done well, the seemingly intractable problem of finding funds generally becomes much easier.

Therefore, community leaders with a vision for a more walkable environment should focus first on creating partnerships, developing messaging, implementing communication plans, organizing events that engage the community, developing relationships with decision makers, and implementing campaigns. One of the best vehicles for accomplishing all of this is a small-scale pedestrian planning process.

## **Review and Key Take-Aways**

In the final session of the day, the following key take-aways were noted:

#### **Funding:**

- KTC does not have unlimited funds
- Tax credits are available through the Main Street program

#### **Tools and data:**

- Incorporate AARP Livability Index into training program
- Injury data from KIPRC (including crash locations) is very valuable
- Foundation for a Healthy Kentucky conducts a large statewide poll to determine what are people thinking about particular issues
- Develop a "Pedestrian Comfort Index" equivalent to the "Bike Comfort Index"
- It's important to count bicycles and pedestrians

### Statewide outreach

- Connect with 69 local health departments
- Main Street program has 45 staffed offices in communities throughout the state
- Engage health care professionals throughout the state

### Messaging:

- Craft messages that all partner organizations can sign on to
- Align messaging from multiple agencies and private organizations
- Target elected officials with a coordinated communication campaign

### Policy change

- AARP has considerable legislative leverage

During wrap-up conversations, Troy Hearn, Bicycle/Pedestrian Coordinator with the Kentucky Transportation Cabinet, noted,

*"Highway design engineers enjoy incorporating pedestrian and bicycle features into projects because it's fun, cool, and different."*

## Recommendations

### **Recommendation #1: Work with AARP, Main Streets, and other partners to develop a statewide network of local champions**

Kentucky has a strong vision for safe, healthy, walkable communities throughout the state. The potential to realize that vision has two tremendous assets:

1. A "national model" strategy of reaching out to individual communities and training local leaders in the art and science of developing and adopting pedestrian plans
2. A diverse and highly engaged statewide partnership consisting of state agencies and non-profit organizations.

The primary challenge confronting these efforts is a lack of capacity. The training program has been developed by Troy Hearn with the Kentucky Transportation Cabinet (KTC), in collaboration with Shellie Wingate and Elaine Russell, with the Kentucky Department for Public Health (KDPH). All three of these innovators have numerous other programs and responsibilities for their state agencies, and the process of reaching out to engage individual communities is difficult and time-consuming. In fact, it is the main limiting factor on the growth and success of the program.

Therefore, our first recommendation is to work with partner organizations that already have statewide networks in place to educate and engage communities in the program.

This approach has already been implemented by KDPH. In 2012, they provided all of Kentucky's local health departments with funding and resources to conduct community walkability audits, and KTC professionals followed up with technical assistance to help each community interpret the results of the audit and start to address identified problems. Largely as a result of that initial outreach, 27 communities and 3 MPOs have developed, adopted, and started to implement pedestrian plans.

However, a renewed effort is now needed to bring more cities and towns in "through the front door" and make them aware of the benefits of this program and several partners are well-positioned to assist. AARP has 465,000 members in Kentucky, including thousands of active volunteers in communities throughout the state (two attended the workshop). With a focus on livability and age-friendly cities, the promotion and creation of pedestrian plans is well aligned with AARP's mission. Similarly, Kentucky Main Streets (a program of the Kentucky Heritage Council) has a strong statewide network, with offices in 45 different communities working to revitalize local economies and downtown historic districts. Paid staff in these offices already understand how walkable community design supports their work. Other partners with statewide include the University of Kentucky's Transportation Research Center and Kentucky Cooperative Extension. All of these organizations have the capacity to identify and engage "champions" in communities across the state, who can organize local coalitions to participate in trainings and develop pedestrian plans.

We recommend the Partnership for a Fit Kentucky revise and expand its current Communication Plan (developed in 2015) to include strategies for partner organizations with statewide networks to share the successes of the communities that have adopted pedestrian plans, with the goal of recruiting and training local champions to bring their communities into the program. We also encourage a "train the trainer" approach so that staff and volunteers with AARP, Main Streets, and others are able to facilitate the training.

## **Recommendation #2: Create the *Kentucky Pedestrian Planning Assistance for Communities* brand and update/expand program materials**

While this program has been very successful, it is not as well defined as it could be.

As an example, the program does not have clearly identifiable name. In order to grow and benefit more communities, we recommend the Partnership selects a name for the program and then promotes that name through all of its marketing and programmatic materials. The selection process should involve as many key partners as possible and should be formally adopted by the Partnership. To get this process started and for the purposes of this report, we suggest ***Pedestrian Planning Assistance for Communities***.

In addition to naming the program, the learning objectives, workshop curriculum, list of technical resources, and required or recommended activities for community coalitions to complete before and after the actual training should be formalized. This will be especially important if a "train the trainer" approach involving AARP volunteers or Main Street Program Directors is adopted.



By creating a *Pedestrian Planning Assistance for Communities* "brand" that includes a visually-appealing graphical design, the program will become more recognizable. Ideally, a dedicated web site will be created as the "go-to" place for information about the program - if agency rules require the program's online presence to exist as part of either the KTC or KDPH web site, careful attention should be paid to making it easy to find and navigate.

Suggested resources for the web site include:

- Program description
- Calendar of upcoming trainings
- Training curriculum and downloadable program materials
- Explanation of pre-training and post-training requirements for communities, including how to create a coalition and which stakeholders should be at the table
- Case studies and success stories from communities in different regions of the state
- Examples of actual, adopted pedestrian plans and master plans
- Guidance on obtaining funding for implementation
- Technical resource list

If KTC and KDPH leaders feel the curriculum needs to be evaluated and updated, it would be most efficient to complete this task as part of the program branding and marketing process. A review of national best practices in this area may be helpful for quality improvement, although we are not aware of any similar programs in other states.

Finally, partner organizations - especially those mentioned under Recommendation #1 above, who will be promoting the program in communities throughout the state - should receive an orientation to the web site and all program materials.

### **Recommendation #3: Document and disseminate successes of program and lessons learned for a statewide and national audience**

Kentucky's *Pedestrian Planning Assistance for Communities* program (if that is what it will be called) is a well-designed strategy which already has an impressive track record. But very few actors in the national walkable community movement know about it.

While this is a lower priority than Recommendations #1 and #2, it is important to document and disseminate the history of the program, the factors that have contributed to the positive collaboration between the State Transportation and Health agencies (as far as they are known), and individual community success stories. Many states, when attempting to emphasize walking and walkable communities as a health promotion strategy, run into challenges related to cultural differences between the public health and transportation professions. Differences in training, personality type, communication style, level of comfort with public engagement, understanding each other's work, and typical projects timelines, between engineers and health educators/promoters can all make it difficult to collaborate. The Kentucky Department for Public Health and Kentucky Transportation Cabinet appear to have found a solution to those challenges and this model should be shared.

Several first steps have been made in this direction. In October, 2015, Shellie Wingate made a presentation at National Walking Summit; in February, 2016, Shellie and Troy Hearn, along with a representative of the community of Winchester will present an America Walks webinar in February; and there may be opportunities to showcase Kentucky's *Pedestrian Planning Assistance for Communities* program during the state workshops America Walks will be facilitating in 2016. Other future possibilities include the possibility for Kentucky to participate in a Federal Highway Administration (FHWA) training webinar, targeted to State DOTs.

In addition to benefiting the field by sharing best practices, this national exposure may open up federal and state funding opportunities for Kentucky's program.

#### **Recommendation #4: Educate State Legislature on the need for a long-term funding source for active transportation**

Long-term sustainability for the *Pedestrian Planning Assistance for Communities* program and continued advances in walkability in Kentucky will depend on funding.

Therefore, our final recommendation is to form a committee to explore funding options for planning and building more walkable community projects. Federal, state, and local sources of funds for active transportation were described in the *Funding for Pedestrian Planning and Implementation* presentation given during the workshop (which was based on an Oregon DOT report referenced below).

KYTC and KDPH may not include lobbying activities with the Legislature; however, private-sector entities within the coalition, such as AARP, may want to take the lead in lobbying the State Legislature for dedicated funds for walkable community design and active transportation. An effective strategy may be to make a "multi-disciplinary" case for funding by stressing the quality of life, economic development, tourism, social equity, safety and health benefits. The early success of the *Pedestrian Planning Assistance for Communities* program should be presented.

The goal would be to create a new dedicated funding source for pedestrian and bicycle planning and infrastructure projects that goes beyond the federally-earmarked Transportation Alternatives Program (TAP) funds. Ideas may include a special sales tax or gas tax increase for "Vibrant Kentucky Communities," or a "carve-out" from an existing program.

#### Reference:

- Oregon DOT Report and funding for pedestrian planning and projects:  
<http://www.oregon.gov/LCD/TGM/Pages/walkbikefunding.aspx>

# Appendix 1: Summaries of Workshops in Montana, Arkansas, and Colorado

## Montana Workshop

A workshop was held on Wednesday, August 12th in Helena, Montana, in partnership with Montana Department of Public Health and Human Services, Montana Department of Transportation, Montana Department of Commerce, and Bike Walk Montana.

The following three workshop goals were established:

1. Strengthen relationships between Departments of Health, Transportation, and Commerce, and Bike Walk Montana;
2. Explore benefits of increased collaboration, communication, and coordination between agencies in promoting walking and walkable communities;
3. Present draft "Collaborative Framework" to agency directors, request feedback, and seek support for continuing collaborative process.

Prior to the workshop, the four partner organizations drafted a "Collaborative Framework for Walkable Communities" based on the following six "Aligning Principles:"

1. Safety: Walkability reduces fatal and serious injuries in Montana communities, by improving the safety of pedestrians and all road users.
2. Mobility and Access: Walkable communities provide mobility and access to services, education, employment, and social opportunities for all Montana residents.
3. Economic Vitality: Walkable communities are economically vibrant and resilient because they align with current and future trends in the preferences of Montana residents and tourists.
4. Quality of Life: Walkable communities contribute to Montana's quality of life through healthier lifestyles, expanded commuting options, and easier access to recreational and social opportunities.
5. Health and Environment: Walkable communities improve the health and well-being of Montana residents by encouraging active lifestyles and a healthy environment.
6. Equity: Walkable communities equitably support the lives and lifestyles of Montana residents of all ages, abilities, income levels, races, and national origins.

It was arranged that the Directors and Deputy Directors of Health, Transportation, and Commerce would attend the early afternoon session. The entire agenda was as follows:

- 8:00 am: Introductions and Project Background
- 8:30 am: Presentation on National Best Practices (Ian/Gary)
- 9:30 am: Presentation of Aligning Principles (agency staff)
- 11:00 am: Brainstorming for Better Collaboration
- 1:30 pm: Presentation to Department Directors (agency staff)
- 2:45 pm: Walking Meetings
- 3:15 pm: Review and Next Steps
- 4:00 pm: Adjourn

Between 6-10 staff from each department participated in the entire workshop, along with representatives of Bike Walk Montana and two other groups. After lunch, Director Mike Tooley (Montana Department of Transportation), Director Richard Opper (Public Health and Human Services), and Director Meg O'Leary (Commerce) received a presentation from their own staff plus Bike Walk Montana Executive Director Melinda Barnes, about the proposed "Collaborative Framework for Walkable Montana Communities," that had been developed and refined earlier in the day. All three Agency Directors expressed support for continuing the collaborative effort and Director O'Leary asked, "What can senior administrators do to help remove barriers?"

The key next step for the three state agencies was to hold individual meetings with their Directors about two weeks after the workshop to discuss future plans.

### **Arkansas Workshop**

The Workshop on Collaboration for Walkable Arkansas Communities was held on Tuesday, August 25th in Little Rock, AR. The partnership between the Arkansas Department of Health (ADH) and Arkansas Highway and Transportation Department (AHTD) was the primary focus of this workshop, along with engagement of local officials.

The following goals were agreed upon by the planning team, which consisted only of ADH and AHTD staff:

1. Strengthen relationship between Arkansas Department of Health (ADH) and Arkansas State Highway and Transportation Department (AHTD)
2. Develop shared understanding of the benefits of walkable communities between ADH, AHTD, and other partners
3. Develop Action Plan for providing Technical Assistance to communities to develop Bicycle and Pedestrian Plans

The entire morning session was for Health and Highway/Transportation agency staff only. Participation consisted of six ADH staff including the Deputy Director, and ten AHTD staff including the Chief Operating Officer and the Chief Engineer.

Facilitators Ian Thomas and Gary Toth gave an opening presentation titled "Collaboration for Walkable Communities," on national health care expenditures, importance of the built environment, a history of transportation planning in the U.S., and the need for health and transportation sectors to collaborate to solve serious health, safety, and cost problems. There followed a small-group discussion titled "ADH and AHTD: Where is the Common Ground?" during which the public health and transportation teams separately evaluated their own strengths and challenges in this work, and then identified ways to support each other effectively.

In the afternoon, the workshop expanded to include staff from other state agencies, metropolitan planning organizations, statewide non-profit groups, the Arkansas Coalition to Prevent Obesity and local elected officials. Four small-town mayors participated in a panel discussion focused on individual walkability projects they are leading in their own communities:

- Mayor Rick Elumbaugh (Batesville, AR)
- Mayor Jill Dabbs (Bryant, AR)
- Mayor Frank Hash (El Dorado, AR)
- Mayor Chip Johnson (Hernando, MS)

In the final session, the entire group started to develop a statewide plan to provide planning assistance to communities to promote walking and walkable design. One of the main outcomes of the workshop was that local communities are currently leading the way in Arkansas, and that there are important next steps state agencies can take to support their efforts.

## **Colorado Workshop**

The final State Agency Collaborative Workshop was hosted by the Walk Colorado Working Group on Thursday, September 10th in Denver, CO.

The goals for this workshop were:

1. Document existing collaborations among state agencies, organizations, and communities, that support walking and walkable community design
2. Identify opportunities and barriers regarding increased collaboration, communication, and coordination of walkable community advocacy, planning and implementation activities
3. Strengthen relationships among all partners and develop additional goals, strategies, and action steps for the "Walk Colorado Collaborative Action Plan"
4. Establish next steps for the "Walk Colorado Partnership"

The Walk Colorado Working Group consists of team that attended the Action Institute on Walking and Walkability in Nashville, representing three state government agencies and three non-profit organizations:

- Colorado State Department of Public Health and Environment (CDPHE)
- Colorado Department of Transportation (CDOT)
- Colorado State Department of Local Affairs (DOLA)
- Colorado Health Foundation
- Colorado Municipal League
- Walk Denver

In the morning, the six Walk Colorado Working Group members participated in a "Collaboration Multiplier" asset-mapping exercise, based on the following questions:

1. Why is walkability important to my organization?
2. What desired outcomes or organizational goals do we have in this area?
3. What assets, strengths, and expertise does my organization bring to a partnership focused on walkable communities?
4. What existing programs, partnerships, and data can we contribute to this project?
5. What barriers and challenges do we face, with which other partners can help us?

The results from this exercise, which have not been analyzed yet, will provide a foundation for the Walk Colorado Collaborative Action Plan.

In the afternoon, other government partners joined the workshop, representing the Injury Prevention and Chronic Disease Units of CDPHE, Safe Routes to School and Traffic Safety Divisions of CDOT, State Office of Tourism, State Department of Education, Bureau of Land Management, and the Governor's Office. New private-sector, non-profit and advocacy partners in attendance for the afternoon session included AARP, the Sonoran Institute, Urban Land Institute, Great Outdoors Colorado, LiveWell Colorado, Colorado Health Institute, Walk2Connect, and the Fort Collins Partnership for Age-Friendly Cities.

To start the afternoon session, facilitators Ian Thomas and Gary Toth delivered a presentation on "Collaboration for Walkable Communities" and Tom Schmid from the Centers for Disease Control and Prevention discussed the U.S. Surgeon General's Call to Action on Walking and Walkable Communities, which had been issued the previous day.

In the final session of the workshop, everyone participated in small-group discussions around the following three questions:

1. How is my group promoting walkability?
2. What assets, strengths, expertise, and programs do we bring?
3. How do we generate excitement about walkability?

The output from these discussions will further inform the Walk Colorado Collaborative Action Plan.

## **Appendix 2. Summary of Collaborations between Health and Transportation Departments in Other States**

Based on research conducted in early 2015, about 20 states are actively engaged in collaborations between the Health and Transportation Departments to expand walkable and livable communities throughout their states. The following summary highlights recent and ongoing work in the five most active states, other than Colorado, Montana, Arkansas, and Kentucky.

### **Oregon: Memorandum of Understanding**

In 2013, Oregon Department of Transportation (ODOT) and the Oregon Health Authority, Public Health Division (OHA-PHD) established a Memorandum of Understanding (MOU), in which both parties agreed to “communicate, coordinate and collaborate on activities that support their mutual goal to improve the link between public health and transportation policies and programs in Oregon.”

Both groups recognize that transportation is intrinsically linked with health and that social determinants of health, such as living conditions and travel behaviors, are a key factor in the overall health of the population. The MOU identifies that ODOT and OHA-PHD will work together to meet Oregonian’s mobility and health needs through:

- Shared communication and planning
- Shared encouragement of active transportation
- Collaborative research and data analysis
- Leverage resource and funding opportunities

#### Reference:

- *Health and Transportation White Paper (Oregon Bicycle and Pedestrian Plan)*, <http://www.oregon.gov/ODOT/TD/TP/BikePed/HealthWhitePaper.pdf>

### **Minnesota: Interagency Agreement and Statewide Pedestrian System Plan**

In 2014, following the creation of an interagency agreement between the Minnesota Department of Transportation (MnDOT) and the Minnesota Department of Health (MDH), the two agencies developed the Minnesota Statewide Pedestrian System Plan.

Goals of the plan:

- Gain a better understanding of pedestrian needs and challenges
- Develop and prioritize recommendations for new projects, policies, and programs
- Provide recommendations to clarify roles and responsibilities of partners

Process for plan development:

- Stakeholder Visioning (August 2014)
- Project Advisory Committee (25 stakeholder groups)
- Minnesota Walks: Current & Future Steps Towards a Walkable Minnesota
- Public outreach and engagement

Reference:

- *Minnesota Statewide Pedestrian System Plan*, Minnesota Departments of Transportation and Health - <http://minnesotawalks.org/page/910>

### **Massachusetts: Healthy Transportation Compact and Healthy Transportation Policy Directive**

Massachusetts may have been the first state to legislate collaboration between its health and transportation agencies. As far back as 2009, the State Legislature established a Healthy Transportation Compact, which "Directs the Massachusetts Department of Transportation (MassDOT) to partner with other agencies and consider health in transportation."

Later - in 2013 - MassDOT established the Healthy Transportation Policy Directive with the following goals:

- To formalize commitment to transportation networks that serve all mode choices
- To ensure all MassDOT projects provide customers safe, comfortable, healthy transportation options
- To achieve designated mode shift goal

Reference:

- *Healthy Transportation Policy Directive*, Massachusetts Dept. of Transportation - <http://www.massdot.state.ma.us/Portals/0/docs/GreenDOT/DirectiveHealthyTransportation.pdf>

### **Iowa: Governor's Healthiest State Initiative**

Iowa's "Healthiest State Initiative" was announced by Governor Terry Branstad in 2011. Its goal is to "make Iowa the healthiest state in the nation by 2016."

This privately-led, public initiative intended to inspire Iowans and their communities throughout the state to improve their health and happiness. Partners include:

- Iowa Department of Public Health
- Iowa Department of Transportation
- Iowa Trails Council and Iowa Bicycle Coalition
- American Heart Association
- Blue Zones, Wellmark, and AARP



Reference:

- *Iowa's Healthiest State Initiative*, <http://www.iowahealthieststate.com>

**North Carolina: Statewide Bicycle and Pedestrian Plan**

In December, 2013, the Board of the North Carolina Department of Transportation adopted WalkBikeNC - the state's Bicycle and Pedestrian Plan.

The 18-month collaborative process included the following partners:

- NC Department of Transportation
- NC Department of Health and Human Services
- NC Department of Environment and Natural Resources
- NC Department of Commerce
- Blue Cross and Blue Shield of North Carolina Foundation
- Davis Wealth Management Foundation.

The five principles of the plan are:

1. Mobility: Expand walking and biking network
2. Safety: Improve safety for walking and bicycling
3. Health: Embrace health and wellness in transportation decisions
4. Economy: Foster robust economic growth
5. Environment: Encourage stewardship

Reference:

- *WalkBikeNC*, <http://www.walkbikenc.com>

## Appendix 3. Evaluation of Kentucky Workshop

The following evaluation was administered at the end of the workshop. 14 responses were received from the 26 participants (54% response rate). Responders were asked to indicate whether they "strongly agree," "agree," "are neutral," "disagree," or "strongly disagree" with each of seven statements about the workshop.

### Statement 1: "I liked the general format of the workshop."

#### Responses:

- Strongly agree: 7
- Agree: 6
- Neutral: 1
- Disagree: 0
- Strongly disagree: 0

#### Comments:

- Too much "reporting out"
- There was too much time "reporting out" and reiterating thoughts
- Great combination of presentations and group interactive opportunities
- I liked the "large-to-small" scale approach
- Loved the walking meeting
- Walking meeting was a fun opportunity
- Well planned, organized and presented
- Liked the open communication and ability to network
- Enjoyed the opportunity to discuss assets, strengths and barriers through a walking meeting
- Lot of interaction and discussion
- Excellent facilitators
- Making introductions took over 1 hour
- No afternoon break

### Statement 2: "I have increased my understanding of ways to collaborate to promote walkable communities."

#### Responses:

- Strongly agree: 7
- Agree: 7
- Neutral: 0

Comments:

- It's great that transportation and health are working together
- Very excited about the mix of individuals and organizations in the workshop - curious what next steps are
- Great chance to discuss issues with several people from a lot of different areas
- Learned of opportunities and abilities to connect

Statement 3: "The facilitators were knowledgeable and helpful."

Responses:

- Strongly agree: 10
- Agree: 3
- Neutral: 1

Comments:

- Absolutely, great job
- Used a lot of personal experience in discussions and were very good at asking leading questions
- Facilitators allowed several participants to dictate conversation that was not engaging to everyone
- Facilitators were knowledgeable and communicated their knowledge in an engaging format

Statement 4: "The *Best Practices in Walkable Community Design* presentation provided a valuable national context."

Responses:

- Strongly agree: 4
- Agree: 8
- Neutral: 1

Comments:

- Good local examples
- I would have liked to see some success stories, ie. one or two communities that have made the changes and reaped the benefits - this is the kind of thing that gets people excited about what can be done

Statement 5: "The *PFK Vision and Previous Pedestrian Planning Activities* session provided a valuable statewide context."

Responses:

- Strongly agree: 7
- Agree: 4
- Neutral: 2

Comments:

- I would have liked to see some local success stories, although we may not have any yet

Statement 6: “The *Partnership Asset Mapping and Future Planning* discussion was helpful in expanding the partnership.”

Responses:

- Strongly agree: 5
- Agree: 5
- Neutral: 3

Comments:

- Lot of good discussion
- This was helpful in getting us to think in practical terms - next steps and the role each organization could play
- We covered this information in group discussion format - it was helpful in opening my eyes to new resources
- Allowed to run a little too long - hard to stay engaged during reporting out, so late in the day; I look forward to getting the write-up of the resources
- Just too long with all the reporting
- Took too long

Statement 7: “The *Funding for Pedestrian Planning and Implementation* presentation included useful information.”

Responses:

- Strongly agree: 4
- Agree: 6
- Neutral: 2

Comments:

- Very rushed

## Appendix 4. Resource Links

- Partnership for a Fit Kentucky: [www.fitky.org](http://www.fitky.org)
- Kentucky Transportation Cabinet Walk/Bike Program: <http://bikewalk.ky.gov>
- KTC and KDPH's *Pedestrian Master Plan Training for Healthy Communities Grants* webinar - <http://transportation.ky.gov/Bike-Walk/Documents/2014%20Pedestrian%20Master%20Plan%20Training%20Webinar%20with%20KY%20Health.pdf>
- Kentucky Heritage Council Strong Towns Conference Sept. 24-25: <http://www.heritage.ky.gov>
- Kentucky Main Street program: <http://www.heritage.ky.gov/mainstreet>
- Kentucky Environmental Education Council, Let's Go Outside License Plate: <http://keec.ky.gov/LetsGoOutside/Pages/default.aspx>
- Kentucky Trail Towns: <http://www.kentuckytourism.com/outdoor-adventure/sites-services/trail-town>
- Kentucky Trail Towns How To Guide: <https://elcr.org/wp-content/uploads/2014/03/4-Trail-Town-How-to-Guide.pdf>
- AARP Livable Communities : <http://www.aarp.org/livable-communities>
- Oregon DOT Report and funding for pedestrian planning and projects: <http://www.oregon.gov/LCD/TGM/Pages/walkbikefunding.aspx>
- America Walks: <http://americawalks.org/>
- Webinar - Surgeon General's Call to Action on Walking and Walkable Communities: What Does It Mean for You and Your Organization? <https://attendee.gotowebinar.com/register/1721698138944259074>
- 2nd National Walking Summit in Washington, D.C. Oct 28-30, 2015: <http://walkingsummit.org>