



April 16, 2014

Gregory S. Pettis, SCAG President
 818 West 7th Street, 12th Floor
 Los Angeles, CA 90017
 Telephone: (213) 236-1800

CC: Carl E. Morehouse, SCAG First Vice-President; Cheryl Viegas-Walker, SCAG Second Vice-President; Glen T. Becerra, Immediate Past President

RE: Health Scenario for 2016 RTP/SCS

Dear President Pettis and members of the Regional Council,

On behalf of the undersigned health organizations, we write to provide our recommendations for maximizing health outcomes in the upcoming 2016 Regional Transportation Plan and Sustainable Communities Strategy (RTP/SCS). Prioritizing health in the scenario development process is critical to achieving the goals of SB 375 and is a top priority for the health community because of the tremendous public health impacts of the built environment. Efforts to reduce vehicle dependency will help curtail preventable air pollution-related cardiac and respiratory diseases, cancers and health emergencies that end in ER visits, hospitalizations and even death. Evidence shows that communities where residents can take part in daily physical activity and active transportation can result in significant reductions in cancers, diabetes, heart disease, obesity and stroke, as well as billions in dollars in associated health costs.

Develop “Jobs, Health and Quality of Life” Scenario

Our organizations support the development of a “Jobs, Health and Quality of Life” scenario that offers the best way to maximize the health benefits from active transportation investments, transit opportunities, coordinated land use and conservation strategies, and job creation. We

believe this scenario, combined with a robust health analysis, will provide elected officials and the public with the information needed for effective decision making. This scenario should include the following:

- Incorporate public health recommendations of the RTP/SCS Public Health Subcommittee: Health organizations provided extensive recommendations to the Public Health Subcommittee established by the Regional Council in July 2012. These recommendations should be incorporated to the maximum extent possible in the 2016 RTP/SCS.
- Frontload Active Transportation Investments: Staff should design this scenario to frontload investments in the region's bikeways, first and last mile transit improvements, Safe Routes to School and Complete Streets projects. This scenario should prioritize these active transportation improvements in the FTIP and STIP ahead of projects that expand capacity for single occupancy vehicles with the goal completing of 80% of these projects during the first half of the 2016 RTP/SCS.
- Expanded Transit Opportunities: Staff should frontload existing and new funding for local transit operations, and prioritize operating assistance for those communities in which lower-income populations are concentrated. As above, this scenario should prioritize these investments in transit in the FTIP and STIP ahead of projects that expand capacity for single occupancy vehicles by implementing these projects during the first half of the 2016 RTP/SCS.

Expand Health Analysis Across All Scenarios

As SCAG works to develop scenarios to guide the development of the 2016 RTP/SCS, we urge SCAG to expand its health analysis and ensure health impacts and benefits are prioritized and compared across all the scenarios. The inclusion of clear, quantified traffic pollution-related health comparisons using the RapidFire model in the 2012 RTP/SCS provided policy makers and the public with an important snapshot of the differences between varied planning options. With the development of new modeling tools, the 2016 RTP/SCS can expand the range of diseases analyzed that are associated with the built environment, from asthma incidence and exacerbation, to heart disease, stroke and diabetes. Utilizing the Urban Footprint, tools such as I-ITHIM and new Activity-Based Models will allow SCAG to quantify the health benefits of transportation and land use scenarios and communicate those to elected officials and the public.

Creating a range of scenarios with clear health outcomes can best offer Regional Councilmembers, SCAG staff, and the public very clear choices about the explicit health benefits and outcomes of land use and transportation planning. We appreciate that SCAG is working through the Strategic Growth Council process to update the public health module of Urban Footprint and encourage SCAG to pilot Urban Footprint in the scenario planning process, as SACOG is doing.

Reviewing Near Freeway Impacts

We applaud SCAG for committing to pursue additional analysis in the 2016 RTP/SCS of traffic pollution impacts to include areas with housing within 1,000 feet of high-volume roadways. We urge SCAG to further engage those communities in the scenario development process so that the full range of health impacts within environmental justice communities are identified and examined, and appropriate policies included to reduce those impacts.

We wish to also thank SCAG for committing to seek input from a wide variety of stakeholders, and working with local public health departments and health organizations to develop a robust plan that prioritizes health. We encourage SCAG to develop an extensive public outreach plan to fully engage the public, including environmental justice communities, to understand the health benefits of the SCS/RTP. We also urge SCAG to continue to engage regional partners, including transportation agencies, on how they include health considerations in planning and project delivery.

We thank SCAG for committing to providing robust public health data and information to better inform regional policy in the development of the 2016-2040 RTP/SCS. We look forward to SCAG's leadership in prioritizing health in 2016 RTP/SCS and creating healthier more sustainable communities for the Southern California region.

Sincerely,

Katherine Lee
Advocacy Coordinator
American Lung Association in California

Nancy Perrin
President
California Society of Pulmonary
Rehabilitation

Dr. Sam Soret
Associate Dean for Public Health Practice
School of Public Health, Loma Linda
University

Gary Madden
Director, 2-1-1
United Ways Serving San Bernardino County

Luis Ayala
Executive Director
Los Angeles County Medical Association

Jim Mangia, M.P.H.
President and CEO
St. John's Well Child and Family Centers

Manal J. Aboelata
Managing Director
Prevention Institute

Eric Lerner
Climate Director
Health Care Without Harm

Robert Vinetz, MD, FAAP
Co-Chair
Asthma Coalition of Los Angeles County

Patricia Ochoa
Deputy Policy Director
Coalition for Clean Air

Joel Ervice
Associate Director
Regional Asthma Management & Prevention
(RAMP)

Heidi R. Flori, MD, FAAP
President
California Thoracic Society

Trudy Raymundo
Public Health Director
San Bernardino County Department of Public
Health

Lynda Barbour
Southern California Government Relations
American Cancer Society Cancer Action
Network