

# VISION 2050



## Health

### Briefing Paper

March 2019



## Puget Sound Regional Council

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# Introduction

Environmental, economic and social factors affect the health of individuals and communities. While the region's residents overall are healthier than those in other parts of Washington or the country, health disparities exist and are exacerbated for people with low-incomes and communities of color. The region's aging population, existing inequities, and car-dependent built environment are important health issues to consider in VISION 2050. This paper will explore the existing policy context, data trends, and how local and regional policy can shape healthy communities.

## Policy Context

The Growth Management Act (GMA) promotes the integration of public health in community planning by stating that land use elements should address “planning approaches that promote physical activity.”<sup>1</sup> GMA also requires that local comprehensive plans consider active transportation options through bike and pedestrian planning to promote healthy lifestyles.

In 2004, the Puget Sound Regional Council (PSRC) partnered with local public health agencies to publish a VISION 2020 + 20 Update Issue Paper on Health and Planning, in preparation for the VISION 2040 planning process. At that time, considering the impacts of planning decisions on health of residents was reemerging as an area of focus, as planners and public health professionals were better understanding how the built environment can contribute to differential health outcomes. In the adopted plan, VISION 2040 included additional goals, policies, and actions to support a healthier region.

VISION 2040 integrates health into the multicounty planning policies (MPPs) throughout the plan, with a focus on health and the built environment in the Development Patterns chapter. The plan encourages healthy neighborhood design, access to and production of healthy food, active transportation alternatives, a safe transportation system, improved air and water quality, and preservation of the natural environment, including parks, open space, and agricultural lands. Specifically, MPP-

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<sup>1</sup> Chapter 36.70A.070(1), Revised Code of Washington.

DP-44 calls for addressing health in regional and local planning and decision-making processes.

Counties, cities, and towns followed suit by integrating health into countywide planning policies (CPPs) and comprehensive plans, to be consistent with the multicounty planning policies. Each county’s CPPs encourage safe and convenient nonmotorized access to achieve health benefits. Pierce County includes a specific chapter to address health and well-being, incorporating four new policies. Each set of countywide planning policies emphasizes design for healthy buildings and facilities and the role of agriculture and the local food economy to supply fresh, minimally processed foods. Pierce County CPPs recommend consideration of health impact assessments and emphasize the role of health in the decision-making process. King and Pierce counties include countywide planning policies to limit exposure to chemicals, and King County CPPs address reducing impacts of manufacturing/industrial centers on public health. Many cities and towns have worked with local public health agencies and integrated health policies into local comprehensive plans. The policies set forth in the regional and local plans have been implemented through a variety of programs, discussed later in this paper.

Coordinating health and planning has evolved as planners and public health professionals have continued to collaborate over the years. The American Planning Association and American Public Health Association have identified five domains of planning that directly affect health: active living; health food systems; environmental exposure; emergency preparedness; and social cohesion. Figure 1 describes the planning policy areas related to these domains.

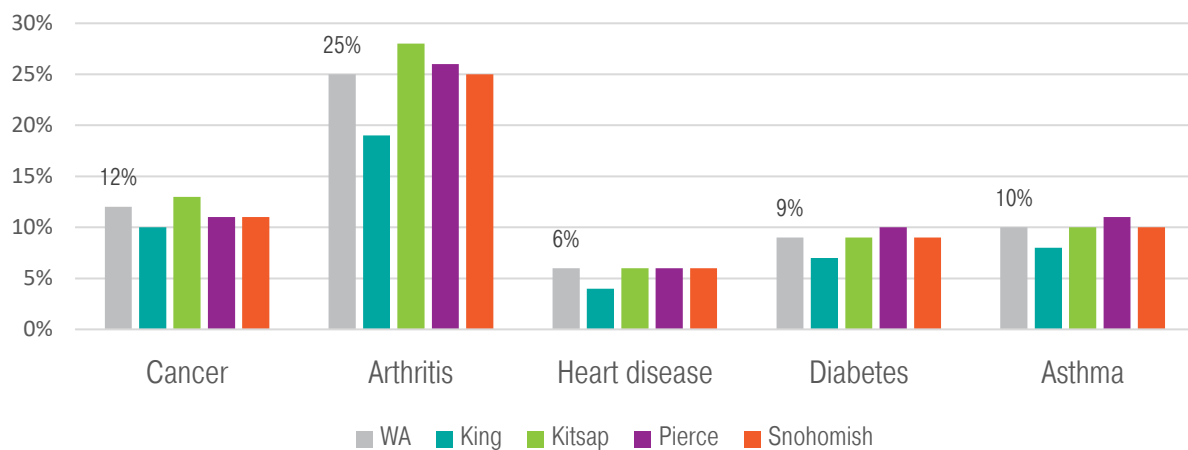
Figure 1: Five Domains of Planning that Impact Health

<b>PLANNING DOMAIN</b>	<b>POLICY AREAS</b>
<b>Active Living</b>	Neighborhoods with mixtures of land uses connected by safe sidewalks and bike lanes and access to parks, trails, and open space
<b>Healthy Food Systems</b>	Access to healthy food and production of food
<b>Environmental Exposure</b>	Air quality; water quality; green infrastructure; and soil contamination
<b>Emergency Preparedness</b>	Natural hazards; climate change; and infectious diseases
<b>Social Cohesion</b>	Housing; community development; and public safety

## Health in the Puget Sound Region

Overall, Washington residents are healthier than in other states, with lower rates of obesity, diabetes, heart disease, and stroke mortalities.<sup>2</sup> The average life expectancy is 78.1 years.<sup>3</sup> In the region, King County residents have the lowest rates of chronic disease, as demonstrated in Figure 2.

Figure 2: Rates of Chronic Disease



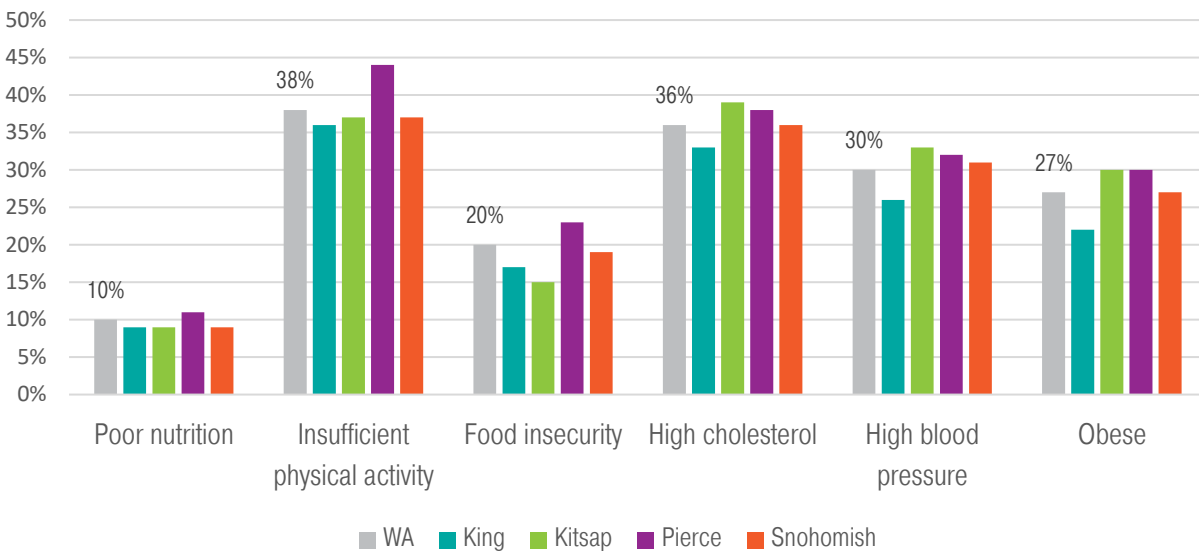
Source: Washington State Dept. of Health, Chronic Disease Profiles, 2017 (using Washington Behavioral Risk Factor Surveillance System, 2013-2015)

When comparing the risk behaviors and conditions that lead to unhealthy lifestyles, the region, as a whole, is comparable or better off than most other areas in the state. The results vary by county, with King County residents having the lowest rates of risk behaviors, as shown in Figure 3.

<sup>2</sup> Centers for Disease Control and Prevention, <https://chronicdata.cdc.gov/>, October 30, 2018.

<sup>3</sup> The US Burden of Disease Collaborators. The State of US Health, 1990-2016 Burden of Diseases, Injuries, and Risk Factors Among US States. Journal of the American Medical Association. 2018.

Figure 3: Health Risk Behaviors and Conditions



Source: Washington State Dept. of Health, Chronic Disease Profiles, 2017 (using Washington Behavioral Risk Factor Surveillance System, 2013-2015)

Social and economic factors, such as where a person lives, works, and plays, account for about 55 percent of a person’s total health.<sup>4</sup>

Individual behaviors, such as nutrition and limiting smoking or drug consumption, are estimated to impact 20 percent of a person’s overall health, while clinical care and genes and biology affect 25 percent of a person’s health. Making communities complete with services and amenities and more supportive of walking and biking can improve levels of physical activity and social interaction, while potentially lowering blood pressure and obesity rates.

Encouraging mixed-use, pedestrian-oriented development projects with housing affordable to all income levels can support residents’ physical and mental well-being. Ensuring access to healthy food



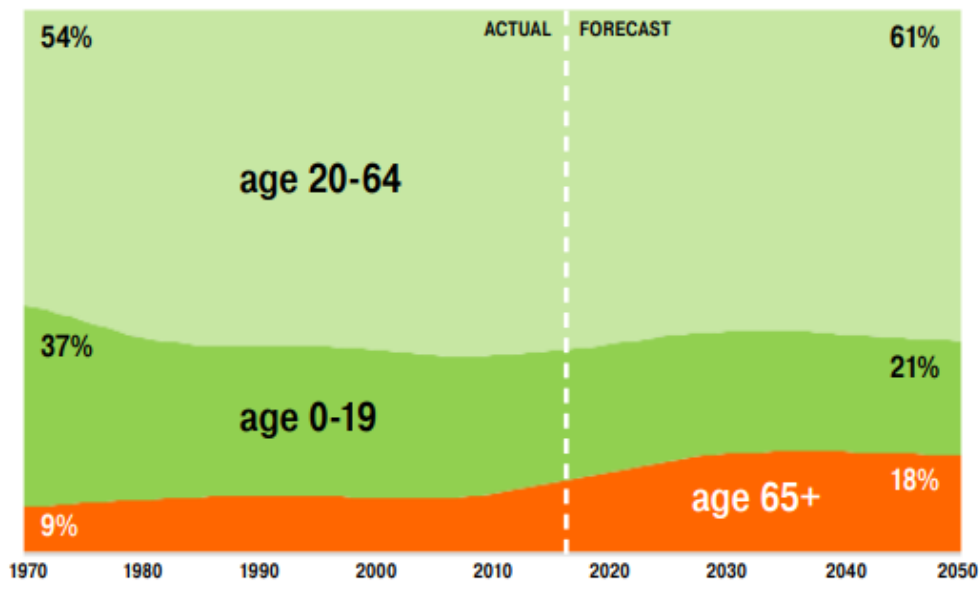
Source: [Fairness Across Places? Your Health in Pierce County](#), 2015. Tacoma-Pierce County Health Department.

<sup>4</sup> Fairness Across Places? Your Health in Pierce County, Tacoma-Pierce County Health Department, 2015.

and promoting local farmers markets and community gardens may improve nutrition and decrease food insecurity rates.

Demographics of the region are shifting, as baby boomers – people born between 1946 and 1964 – cross into the 65 and older category. The share of seniors is projected to increase steadily to 18 percent around 2030 and is expected to remain at that level through 2050, as shown in Figure 4.<sup>5</sup> Within an aging population, higher rates of disabilities, food insecurity, and poverty can result in negative health outcomes. Figure 5 shows the percentage of residents with disabilities in each county, compared to the state. As residents age, the population with disabilities increases significantly. Designing the built environment to ensure communities are accessible for people with disabilities and developed and retrofitted to incorporate sidewalks, bike lanes, and public transit routes that connect a mixture of residential, civic, and commercial uses can ensure older residents have greater ability to age in place and those with disabilities can stay socially and physically active in their communities.<sup>6</sup>

Figure 4: Regional Population by Age Group



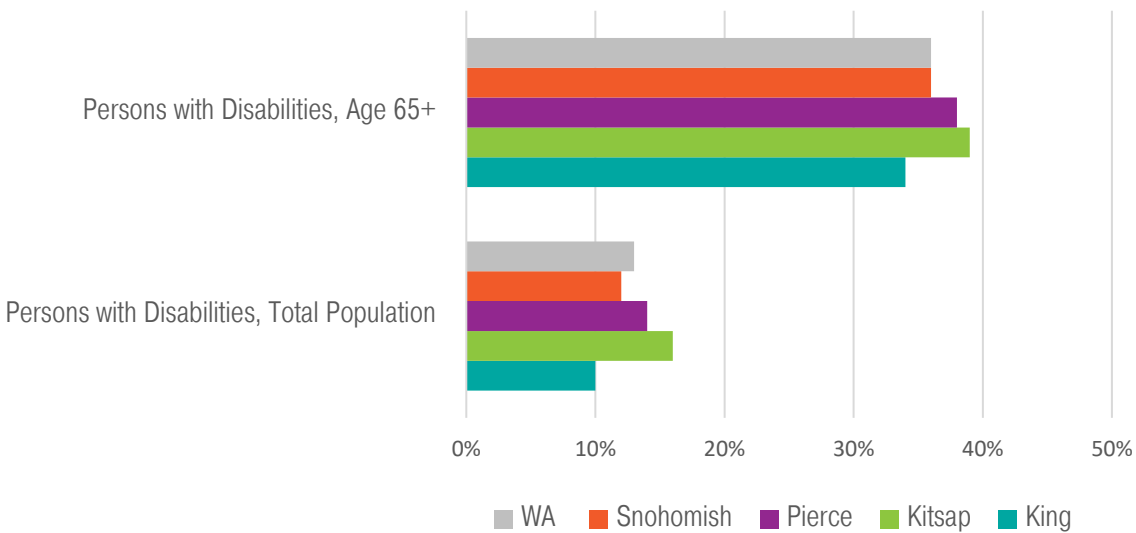
Source: U.S. Census, American Community Survey, PSRC

<sup>5</sup> PSRC, Puget Sound Trends, April 2018. <https://www.psrc.org/sites/default/files/trend-aging-201804.pdf>

<sup>6</sup> "Why Walkable Communities Are the Best Communities for Older Adults," Jeff Speck, AARP Livable Communities, October 2018.



Figure 5: Population with Disabilities



Source: U.S. Census, 2017 American Community Survey One-Year Estimates, PSRC

While many local and regional policies promote healthy communities and choices, implementation is the key to making communities healthier. Programs and initiatives that have been implemented over the last 10 years are discussed in the “Healthy Planning in Action” section and demonstrate why the region should continue to focus on health through 2050.

## Health Disparities

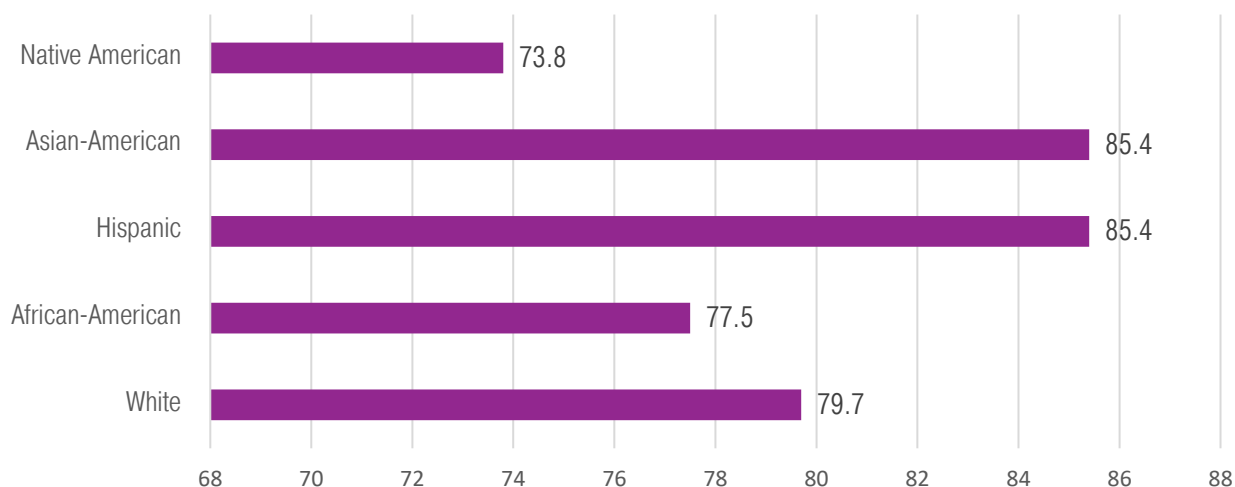
Overall, the region has better health outcomes compared to the rest of Washington State. Although access to transit, active transportation, and clean air and water are improving, progress has not been equitable. Health opportunities and outcomes vary by place, race, and income. Tacoma-Pierce County Public Health found a 17-year difference in life expectancy between the healthiest and least healthy zip codes in Pierce County.<sup>7</sup> Inequities are most prevalent in the Native American and African-American communities, as seen in Figure 6. People of color have a higher risk of being uninsured,

**Tacoma-Pierce County Public Health found a 17-year difference in life expectancy between the healthiest and least healthy zip codes in Pierce County.<sup>1</sup>**

<sup>7</sup> Fairness Across Places? Your Health in Pierce County: 2015 Health Equity Assessment Summary.

making them more vulnerable to negative health outcomes.<sup>8</sup> Health and social risk factors such as housing quality, alcohol-related deaths, obesity, and smoking are also highest in some of the most racially and ethnically diverse communities in the region, such as south King County.<sup>9</sup>

Figure 6: Life Expectancy by Race, State of Washington



Source: Henry J. Kaiser Family Foundation, Measure of America

Health risk factors and disparities increase when looking at income levels, while opportunities decrease. King County found that residents living in high-poverty areas live, on average, five years less than residents living in low-poverty neighborhoods. Obesity rates are also more prevalent among residents with the lowest annual household incomes.<sup>10</sup> Residents with lower incomes face more barriers to affordable, quality housing, health care, and healthy foods. Neighborhoods with higher concentrations of low-income residents may lack resources that support good health, such as community centers and green spaces, sidewalks, high-quality grocery stores, and housing. When considering the combined impacts of income level and race, some communities have fewer opportunities than others and require more attention to achieve equitable health outcomes.

Rural and more outlying suburban communities face additional challenges, as residents in rural areas typically have less access to services, transit, and employment

<sup>8</sup> King County Community Health Needs Assessment, 2018/2019.

<sup>9</sup> *ibid.*

<sup>10</sup> *ibid.*

opportunities. While the majority of the population lives in urban or suburban communities, the needs of residents in rural areas are important to consider in regional planning. As housing costs rise in urban and suburban areas, more low-income individuals and families may be displaced to less expensive rural areas. The increased transportation costs and commute times negatively impact their health.

Local public health agencies have worked extensively to better understand local health inequities and resulting disparities. All four counties collect extensive amounts of local data, which allows health professionals to partner with local planners to identify communities with the greatest health needs. Tacoma-Pierce County Health Department has used their health equity assessment to identify geographic priority areas. Kitsap Public Health District analyzes health disparities to inform work done by their Healthy Eating, Active Living Coalition.

## **Healthy Planning in Action**

GMA, VISION 2040, and local plans and policies promote consideration of health outcomes when making decisions. Implementation of these plans and policies is vital to making communities healthier. At all levels of government, much work has been done by health and planning organizations. Work by PSRC and other agencies since 2008 may help inform an update to health policies in VISION 2050.

The Washington State Department of Health has supported local health planning through the creation and maintenance of the Washington Tracking Network, a reliable data source for local, county, and statewide health statistics. In 2006, the state Legislature directed the establishment of the Governor's Interagency Council on Health Disparities. The council is charged with making policy recommendations to the Governor and legislature to protect disparate populations and conducting health impact reviews to determine how a policy or budgetary request may impact health or health disparities.<sup>11</sup> From this directive, the Washington State Plan for Healthy Communities was created and provides a framework for promoting health across the state and supports local health initiatives. The state has also integrated health impact assessments into the process when reviewing transportation projects.

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<sup>11</sup> Chapter 43.20.270, Revised Code of Washington

At the regional level, PSRC has been collaborating with local health districts, agencies, and member jurisdictions on a variety of health-related projects and initiatives:

- The **Regional Transportation Plan** addresses health outcomes and includes an Active Transportation Plan, which encourages a regional bike and pedestrian network. Transportation data and modeling tools such as Soundcast and the Household Travel Survey are used to better understand physical activity through bike and walk trips within the region. Regional project evaluation criteria, through the Transportation Improvement Program, address health through the reduction of emissions, provision of active transportation opportunities, accessibility to transit, and safety considerations. The Plan's Four-Part Greenhouse Gas Strategy is designed to complement statewide efforts to achieve statutory limits and improve air quality.
- The **Regional Food Policy Council** focused on food access, economic viability of the food system, and the environmental impacts of the food system. The council published Food Policy Blueprints in 2012 to assist local jurisdictions in adopting policies that support healthy food access and the local food economy. Much of the Council's work focused on health and equity.
- Completed in 2013, the **Growing Transit Communities Strategy** promotes thriving and equitable transit communities. The strategy included an **Opportunity Mapping** component that looked at health measures such as proximity to parks, toxic waste sites, and healthy food, among other measures. PSRC is updating these maps as part of the VISION 2050 update, and this work will be beneficial in understanding access to opportunity in the region.
- The **Active Communities Guidebook** (2012) and **Planning for Whole Communities Toolkit** (2014) were created in collaboration with Seattle-King County Public Health and offer recommendations and best practices for planning healthier communities, covering a variety of health-related topics.
- The **Regional Open Space Conservation Plan** was completed in 2018 and highlights the benefits of open space on mental and physical health. The plan includes strategies to conserve and enhance existing natural resources, fill gaps

in the regional open space network, increase tree canopy coverage, and improve access to the various types of open space and recreation.

In all four counties in the region, public health agencies have been successful in promoting healthy lifestyles in a variety of ways. Notable achievements include the Safe Routes to Schools work being done in Snohomish County; collaborations to expand equity in King County; Healthy Community Planning Toolbox apply “health-in-all-policies” in Pierce County; and partnerships like the Kitsap Healthy Eating Active Living Coalition, which uses extensive data on health disparities to identify focus communities and targeted partnerships and programs. The four local public health agencies regularly collaborate and share ideas, and they also share representation on select boards and committees at PSRC (including the Growth Management Policy Board, Transportation Policy Board, and Bicycle Pedestrian Advisory Committee).

## **Stakeholder Input**

Comments solicited through Taking Stock 2016 and VISION 2050 scoping encourage more inclusive health considerations when reviewing and updating regional policies.

**Taking Stock 2016** was an assessment of the collective efforts of the region’s counties and cities to implement VISION 2040, as viewed immediately following the 2015-2016 cycle of local comprehensive plan updates and looking ahead to the next update of VISION 2040. The report highlighted key VISION 2040 strategies that are positively influencing local plans and shaping the region as well as strategies and tools that require more work and may need to be reinvigorated in the next update.

Taking Stock found that many cities and counties have worked with local public health agencies, incorporated health into local plans, and adopted innovative policies to promote healthy communities. Challenges identified in planning for healthy communities include ensuring equitable opportunities for all residents – many jurisdictions felt that access to walking and biking facilities, healthy food, and parks and open space was not equitably distributed. Taking Stock found that PSRC could promote healthful planning by providing more technical assistance and education, through continued collaboration with the local public health agencies.

PSRC solicited comments on **scoping for VISION 2050** from February 2 through March 19, 2018 and held five in-person listening sessions. Commenters addressed several dimensions of health in regional planning and reinforced that planning healthy communities goes beyond just providing walking and biking facilities and parks. Comments encouraged local planning decisions to consider social cohesion, climate change, housing conditions, access to healthy food, and equity. Based on stakeholder input received through these two projects, the board discussed health as an area of interest in the VISION 2050 update.

## **Policy Considerations for VISION 2050**

VISION 2040 includes actions for PSRC and goals and policies for planning at the regional and local level, many of which have upstream benefits to health. The updated plan will identify key actions for PSRC, opportunities for regional collaboration, and guidance or requirements for local plans. VISION 2040 already promotes health in several multicounty planning policies. As mentioned, health and planning are integrated in five domains; and the health narrative in VISION could be expanded to address health more holistically and go beyond the physical built environment.

VISION 2040 also does not discuss the existing health inequities and resulting disparities in the region. Through the work of state and local public health agencies, it is clear that health opportunities and outcomes are dramatically different across communities based on place, race, and income. As PSRC continues to focus on social and racial equity, planners and policy makers should continue to collaborate with state and local public health agencies and use available resources to identify where health inequities and disparities are the highest. Policy makers may decide to prioritize investments and other actions that improve health outcomes in targeted areas.

Larger regional trends already addressed through VISION policies also impact health disparities. Auto-dependent built environments discourage walking and biking, often through the separation of land uses and auto-oriented development. Supporting policies that encourage developing and retrofitting urban areas to better support compact walkable development, as well as sidewalks and bike lanes to connect people to jobs and services, will promote physical activity and make healthier choices more

affordable and accessible. As the Regional Growth Strategy is developed and job growth is distributed throughout the region, expanding economic opportunities to communities with significant health disparities may also produce better health outcomes.

As PSRC boards consider updating VISION, some questions to consider include:

- How can VISION 2050 better describe how health and planning informs local decision-making?
- How can the multicounty planning policies promote health equity, especially in low-income communities where the greatest disparities exist?
- Should multicounty planning policies more directly address challenges in the existing built environment that impede positive health outcomes?

## **Next Steps**

Discussions at the Regional Staff Committee and Growth Management Policy Board meetings in winter 2018-2019 will inform updates to VISION 2050. Board and committee discussions during these meetings will be reflected in the final draft plan that will be presented for review in the summer of 2019, in anticipation of the scheduled adoption of VISION 2050 in the spring of 2020.

# Appendix A: Goals, Multicounty Planning Policies (MPPs), and Actions related to Health

## ENVIRONMENT

*Overarching Goal: The region will care for the natural environment by protecting and restoring natural systems, conserving habitat, improving water quality, reducing greenhouse gas emissions and air pollutants, and addressing potential climate change impacts. The region acknowledges that the health of all residents is connected to the health of the environment. Planning at all levels should consider the impacts of land use, development patterns, and transportation on the ecosystem.*

**MPP-En-3** Maintain and, where possible, improve air and water quality, soils, and natural systems to ensure the health and well-being of people, animals, and plants. Reduce the impacts of transportation on air and water quality, and climate change.

**MPP-En-4** Ensure that all residents of the region, regardless of social or economic status, live in a healthy environment, with minimal exposure to pollution.

**MPP-En-15** Reduce the use of pesticides and chemical fertilizers to the extent feasible and identify alternatives that minimize risks to human health and the environment.

**MPP-En-18** Reduce levels for air toxics, fine particulates, and greenhouse gases.

## DEVELOPMENT PATTERNS

*Overarching Goal: The region will focus growth within already urbanized areas to create walkable, compact, and transit-oriented communities that maintain unique local character. Centers will continue to be a focus of development. Rural and natural resource lands will continue to be permanent and vital parts of the region.*

*Built Environment and Health Goal: The region's communities will be planned and designed to promote physical, social, and mental well-being so that all people can live healthier and more active lives.*

**MPP-DP-11** Support the development of centers within all jurisdictions, including town centers and activity nodes.

**MPP-DP-14** Preserve and enhance existing neighborhoods and create vibrant, sustainable, compact urban communities that provide diverse choices in housing types, a high degree of connectivity in the street network to accommodate walking, bicycling, and transit use, and sufficient public spaces.



**MPP-DP-35** Develop high quality, compact urban communities throughout the region’s urban growth area that impart a sense of place, preserve local character, provide for mixed uses and choices in housing types, and encourage walking, bicycling, and transit use.

**MPP-DP-37** Support urban design, historic preservation, and arts to enhance quality of life, improve the natural and human-made environments, promote health and well-being, contribute to a prosperous economy, and increase the region’s resiliency in adapting to changes or adverse events.

**MPP-DP-38** Design public buildings and spaces that contribute to a sense of community and a sense of place.

**MPP-DP-43** Design communities to provide an improved environment for walking and bicycling.

**MPP-DP-44** Incorporate provisions addressing health and well-being into appropriate regional, countywide, and local planning and decision-making processes.

**MPP-DP-45** Promote cooperation and coordination among transportation providers, local governments, and developers to ensure that joint- and mixed-use developments are designed to promote and improve physical, mental, and social health and reduce the impacts of climate change on the natural and built environments.

**MPP-DP-46** Develop and implement design guidelines to encourage construction of healthy buildings and facilities to promote healthy people.

**MPP-DP-47** Support agricultural, farmland, and aquatic uses that enhance the food system in the central Puget Sound region and its capacity to produce fresh and minimally processed foods.

#### **DP-Action-11: Land Use, Mobility, and Health Toolkit**

The Puget Sound Regional Council, together with its member jurisdictions, will explore land use and planning practices and tools that promote and improve physical, social, and mental health. These practices and tools will promote and encourage greater multimodal travel to, from, and within designated regional growth centers. TELUMI (the Transportation Efficient Land Use Mapping Index developed by the University of Washington under a WSDOT research grant) is an example of such an analytical tool.

## **HOUSING**

*Overarching Goal: The region will preserve, improve, and expand its housing stock to provide a range of affordable, healthy, and safe housing choices to every resident. The region will continue to promote fair and equal access to housing for all people.*

**MPP-H-1** Provide a range of housing types and choices to meet the housing needs of all income levels and demographic groups within the region.

**MPP-H-2** Achieve and sustain – through preservation, rehabilitation, and new development – a sufficient supply of housing to meet the needs of low-income, moderate-income, middle-income, and special needs individuals and households that is equitably and rationally distributed throughout the region.

**MPP-H-3** Promote homeownership opportunities for low-income, moderate-income, and middle-income families and individuals.

**MPP-H-9** Encourage interjurisdictional cooperative efforts and public-private partnerships to advance the provision of affordable and special needs housing.

## **ECONOMY**

*Overarching Goal: The region will have a prospering and sustainable regional economy by supporting businesses and job creation, investing in all people, sustaining environmental quality, and creating great central places, diverse communities, and high quality of life.*

**MPP-Ec-8** Promote economic activity and employment growth that creates widely shared prosperity and sustains a diversity of family-wage jobs for the region's residents.

**MPP-Ec-11** Address unique obstacles and special needs – as well as recognize the special assets – of disadvantaged populations in improving the region's shared economic future.

**MPP-Ec-12** Foster appropriate and targeted economic growth in distressed areas to create economic opportunity for residents of these areas.

## **TRANSPORTATION**

*Overarching Goal: The region will have a safe, cleaner, integrated, sustainable, and highly efficient multimodal transportation system that supports the regional growth strategy and promotes economic and environmental vitality, and better public health.*

**MPP-T-1** Maintain and operate transportation systems to provide safe, efficient, and reliable movement of people, goods, and services.

**MPP-T-4** Improve safety of the transportation system and, in the long term, achieve the state's goal of zero deaths and disabling injuries.

**MPP-T-7** Develop a transportation system that minimizes negative impacts to human health.

**MPP-T-10** Promote coordination among transportation providers and local governments to ensure that joint- and mixed-use developments are designed in a way that improves overall mobility and accessibility to and within such development.

**MPP-T-11** Prioritize investments in transportation facilities and services in the urban growth area that support compact, pedestrian- and transit-oriented densities and development.

**MPP-T-14** Design, construct, and operate transportation facilities to serve all users safely and conveniently, including motorists, pedestrians, bicyclists, and transit users, while accommodating the movement of freight and goods, as suitable to each facility's function and context as determined by the appropriate jurisdictions.

**MPP-T-15** Improve local street patterns – including their design and how they are used – for walking, bicycling, and transit use to enhance communities, connectivity, and physical activity.

**MPP-T-16** Promote and incorporate bicycle and pedestrian travel as important modes of transportation by providing facilities and reliable connections.

**MPP-T-22** Implement transportation programs and projects in ways that prevent or minimize negative impacts to low-income, minority, and special needs populations.

**MPP-T-23** Emphasize transportation investments that provide and encourage alternatives to single-occupancy vehicle travel and increase travel options, especially to and within centers and along corridors connecting centers.

**MPP-T-25** Ensure mobility choices for people with special transportation needs, including persons with disabilities, the elderly, the young, and low-income populations.

## **PUBLIC SERVICES**

*Overarching Goal: The region will support development with adequate public facilities and services in a coordinated, efficient, and cost-effective manner that supports local and regional growth planning objectives.*

**MPP-PS-1** Protect and enhance the environment and public health and safety when providing services and facilities.

**MPP-PS-4** Do not provide urban services in rural areas. Design services for limited access when they are needed to solve isolated health and sanitation problems, so as not to increase the development potential of the surrounding rural area.

**MPP-PS-10** Replace failing septic systems within the urban growth area with sanitary sewers or alternative technology that is comparable or better.

**MPP-PS-16** Encourage health and human services facilities to locate near centers and transit for efficient accessibility to service delivery.

**MPP-PS-20** Protect the source of the water supply to meet the needs for both human consumption and for environmental balance.