

BUILDING HEALTHY COMMUNITIES FOR EVERYONE

**2013 Annual Conference
Alabama Chapter-American Planning
Association**

Florence, AL





BUILDING HEALTHY COMMUNITIES FOR EVERYONE

Building Inclusive Healthy Communities through the National Center on Health, Physical Activity and Disability (NCHPAD)

Amy Rauworth

Lakeshore Foundation

May 1, 2013

NATIONAL CENTER ON HEALTH PHYSICAL ACTIVITY AND DISABILITY



UAB | LAKESHORE
RESEARCH COLLABORATIVE
promoting the health and wellness of people with disabilities





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NCHPAD is the premier resource for information on physical activity, health promotion, and disability. We empower people with disabilities and health conditions to become healthier and more active.





What's New

Highlights

Calendar

Top Articles

[NCHPAD News: April 2013](#)

[Nutrition Spotlight: Growing Healthier](#)

[Public comment needed for proposed Call to Action on Walking!](#)

[NEW Article with Video: Adaptive Target Shooting](#)

[Kids Korner: Spring into Action!](#)

[NCHPAD blog- Endless CapABILITIES](#)

[Champion's Rx: A High-Intensity Daily Workout Program](#)

[14-week program to a healthier you!](#)

[ACSM/NCHPAD Certified Inclusive Fitness Trainer](#)

[NCHPAD Calendar](#)

Find us on



Browse by Disability

New Daily Workout Program

Champion's Rx





Advocacy



Live



Awareness



Imagine



Active



Knowledge

ACT2MOVE AND MOVE2ACT: HAMLET IN THE HOSPITAL

Apr 30, 2013



Dr. Bloom was rushed to the hospital on a Monday morning because he had aspirated on a piece of food. Thankfully, the food was removed from his lung, a very painful procedure, especially because it was performed with just a local anesthetic. He was put in ICU, given lots of medicine, hooked up to oxygen, and a liquid diet. I guess you could say, things didn't look so good.

[Read More](#)

WHITEWATER RAFTING? YES, YOU CAN!

Apr 25, 2013



It all depends on how you face the challenges of your disability. Life is an adventure and even with limited mobility you can create a rich, experiential life for yourself or someone in your family who has a disability. What if you knew that persons with visual impairments, autism, cerebral palsy, paraplegia, quadriplegia, and hemiplegia could have a blast whitewater rafting all year long?

[Read More](#)

ABOUT US

NCPAD promotes increased participation in physical activity among people of all abilities. This blog, is a site where readers and contributors can share information and generate new ideas.



National Center on Physical Activity and Disability (NCPAD)

[Like](#)

1,916 people like National Center on Physical Activity and Disability (NCPAD).



RECENT POSTS

ACT2MOVE and MOVE2ACT: Hamlet in the



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LAKESHORE



OUR MISSION

To enable people with physical disability and chronic health conditions to lead healthy, active, and independent lives through physical activity, sport, recreation, and research.

Lakeshore Rehabilitation Hospital

1973



Lakeshore Foundation

2001









LAKE
FO

THE COST OF
VICTORY
IS HIGH, BUT SO ARE
THE REWARD

LAKE
SHORE
FOUNDATION

DZ





TRAINING SITE

The U.S.O.C. designated Lakeshore Foundation as an official U.S. Olympic and Paralympic Training Site in 2003.





In 2006 Lakeshore Foundation launched Lima Foxtrot Programs for Injured Military to provide our severely injured service members with the tools they need to regain active and independent lives.





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UAB | LAKESHORE

RESEARCH COLLABORATIVE

promoting the health and wellness of people with disabilities

Established in October 2009 to create a world-class research program in rehabilitative science linking Lakeshore Foundation's extraordinary programs for people with physically disabling conditions with UAB's research expertise





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NCHPAD Goals 2012-2015

Goal 1. Expand National, State and Local Leadership in Disability and Community Health Transformation

Goal 2. Increase Knowledge Translation (Information, Consultation and Referral) in Physical Activity, Nutrition and Weight Management

Goal 3. Increase Inclusive Health Communications Media

Goal 4. Increase National and State Community Transformation Policy Recommendations that Include People with Disabilities

Goal 5. Increase Training and Technical Support

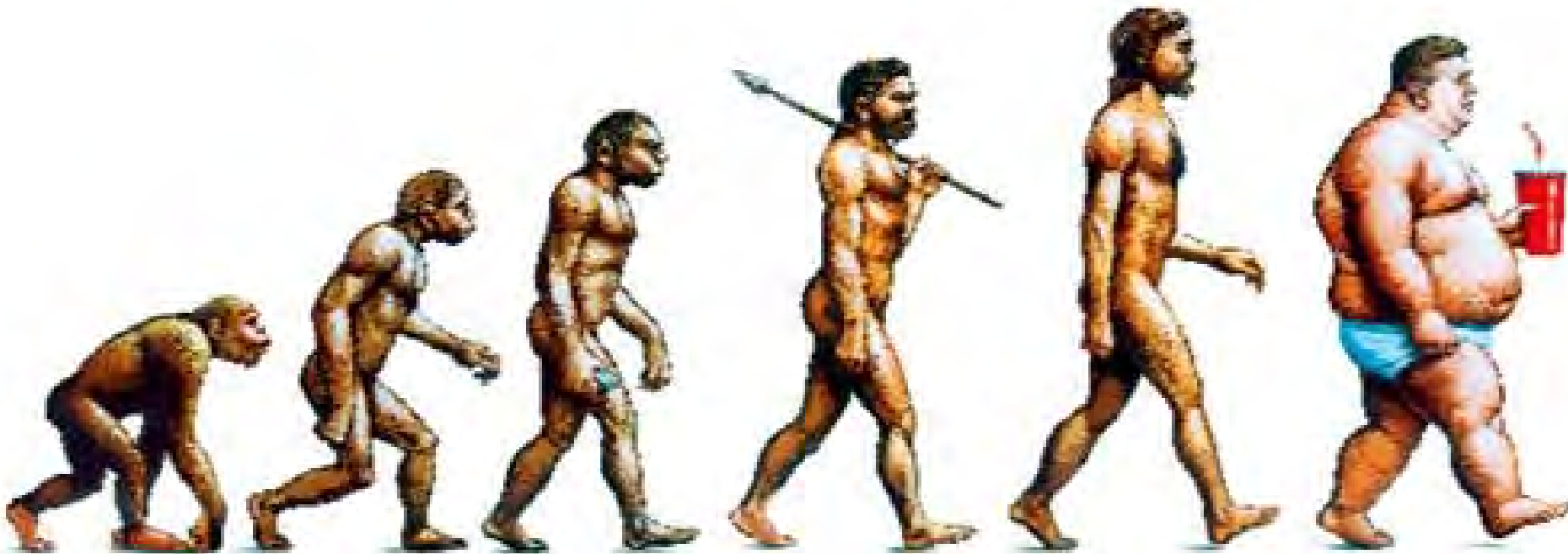
Funding provided by: Grant/Cooperative Agreement
#U59DD000906 from the Centers for Disease Control and
Prevention (CDC).





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National Trends: Chronic Disease in United States







Building Inclusive Healthy Communities

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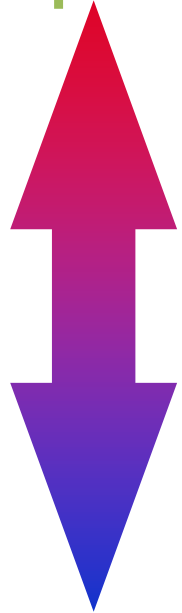




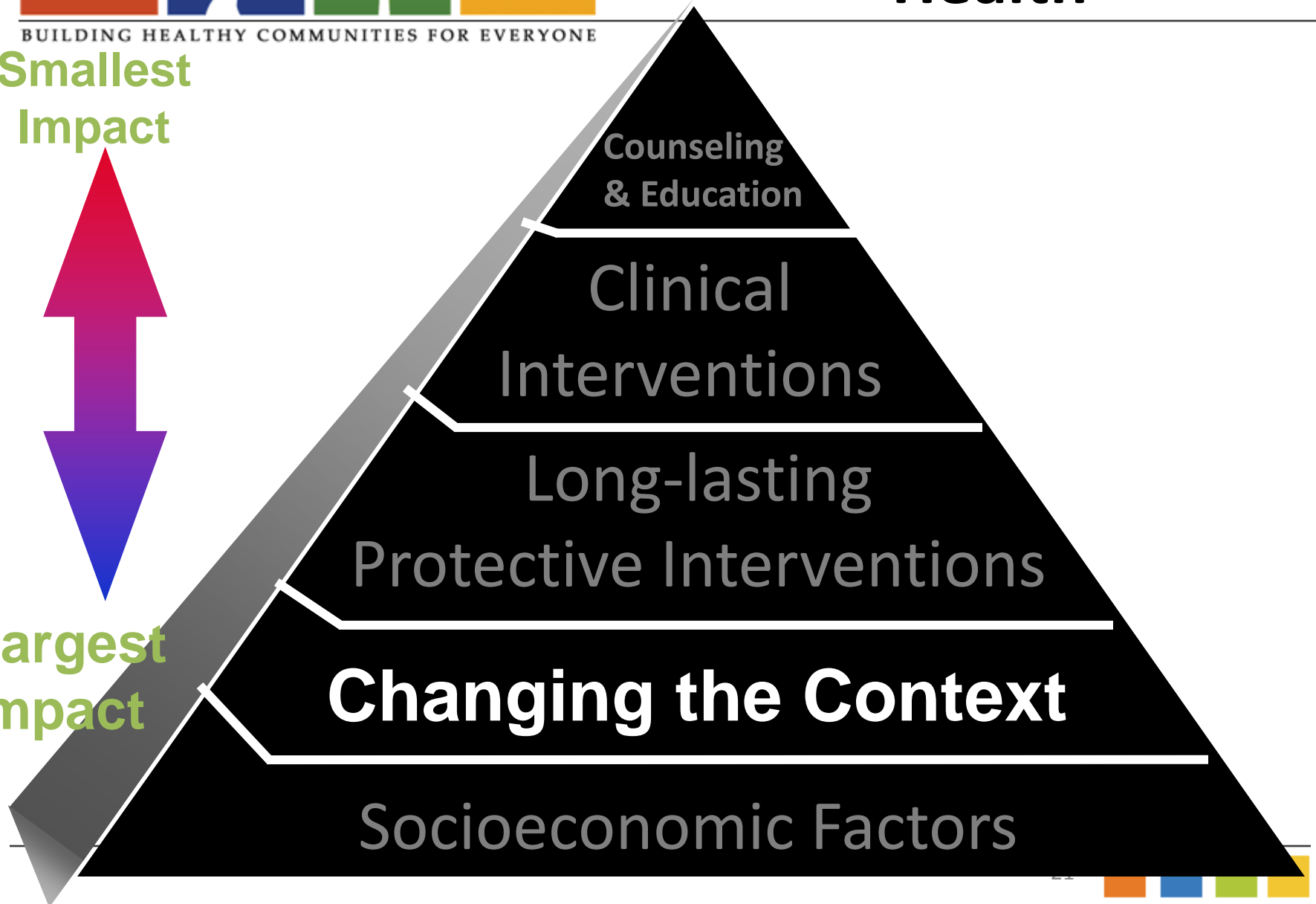
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Factors that Affect Health

Smallest
Impact



Largest
Impact





Community Change Process

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Commitment

- Develop coalition

Assessment

- Capture community snapshot (local-level data)

Planning

- Prioritize targeted actions

Implementation

- Implement jurisdiction-wide strategies

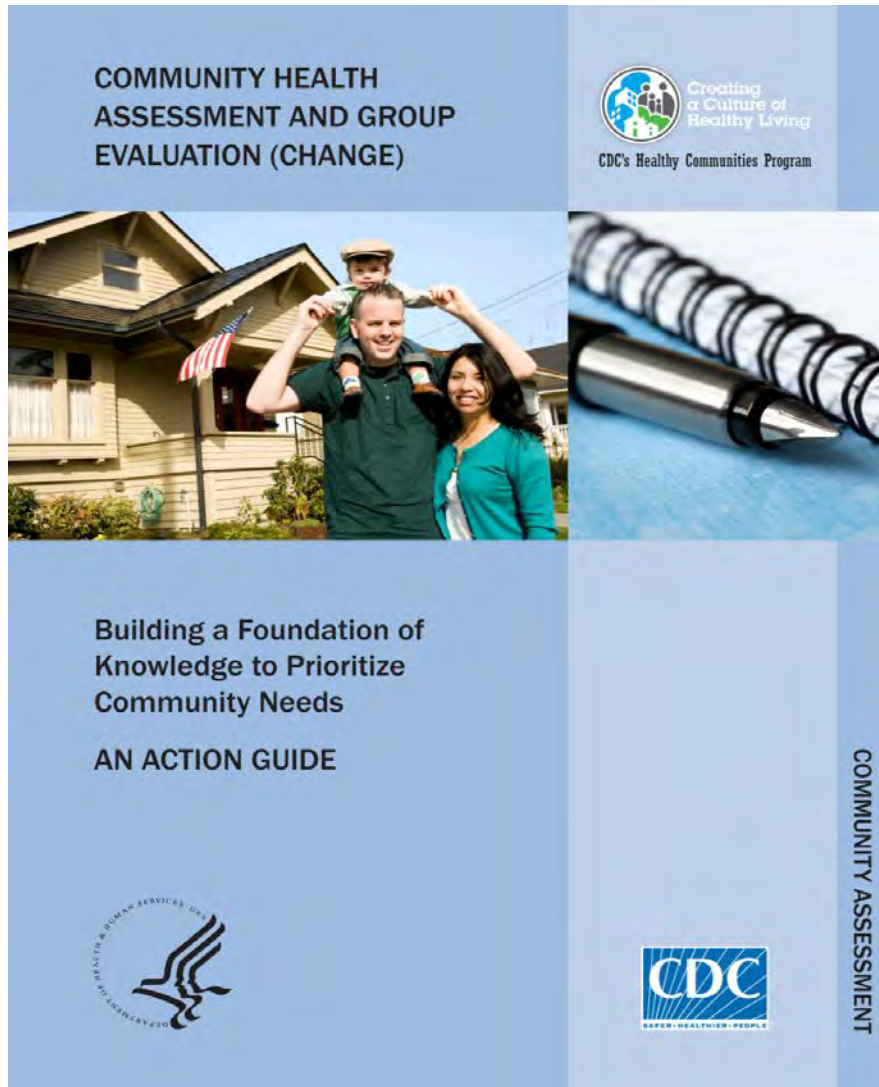
Evaluation

- Document success and lessons learned





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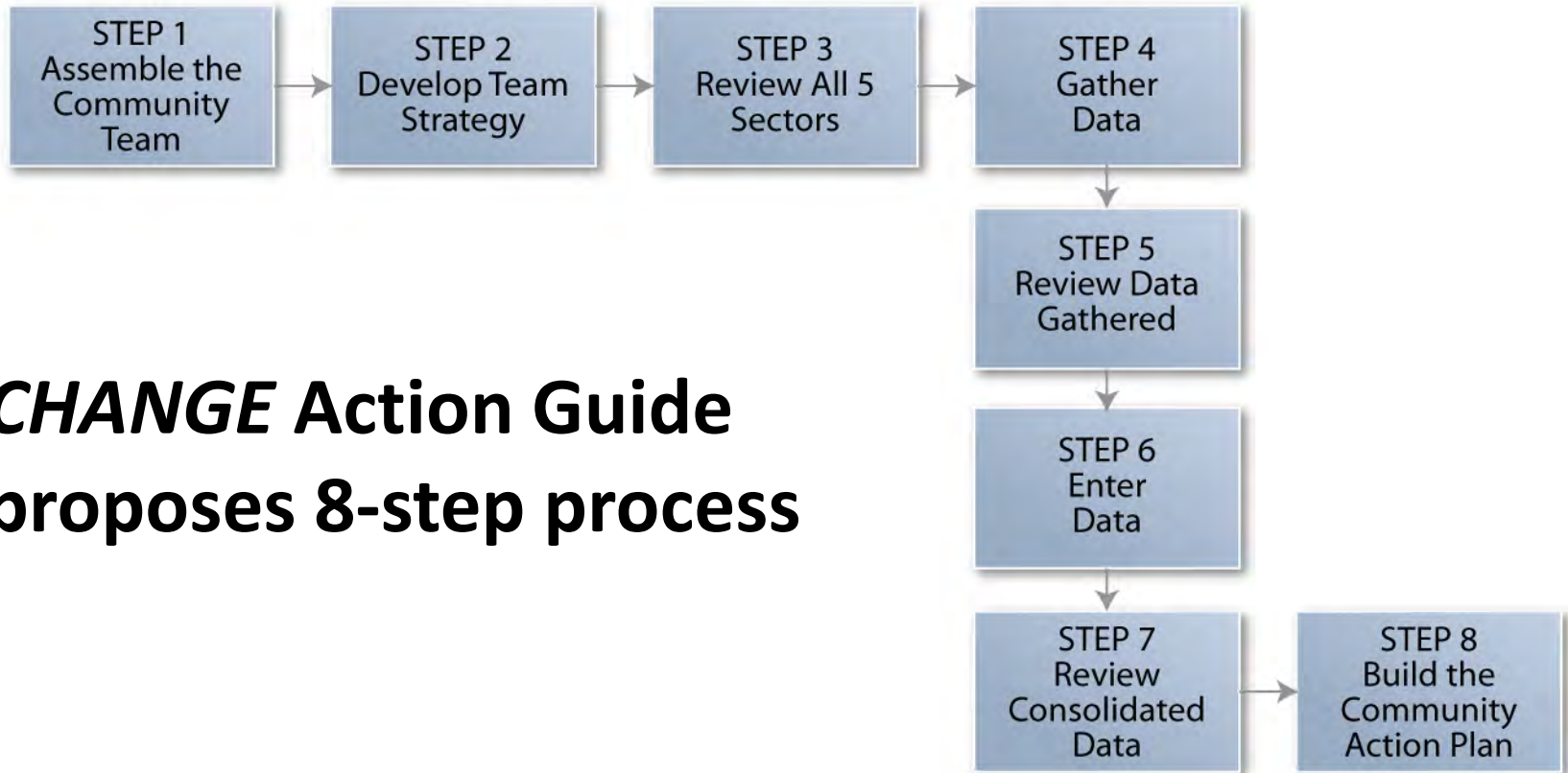
Topics covered:

1. Data Collection (pages 13-18)
2. Organizing and Using CHANGE Data (pages 32-38)
3. Developing and Revising Your CAP (pages 39-40)
4. Evaluation and Reassessment (pages 43-44)
5. CD-ROM: Resource List, Worksheets, **CHANGE** Sector Excel Files





CHANGE Action Guide proposes 8-step process





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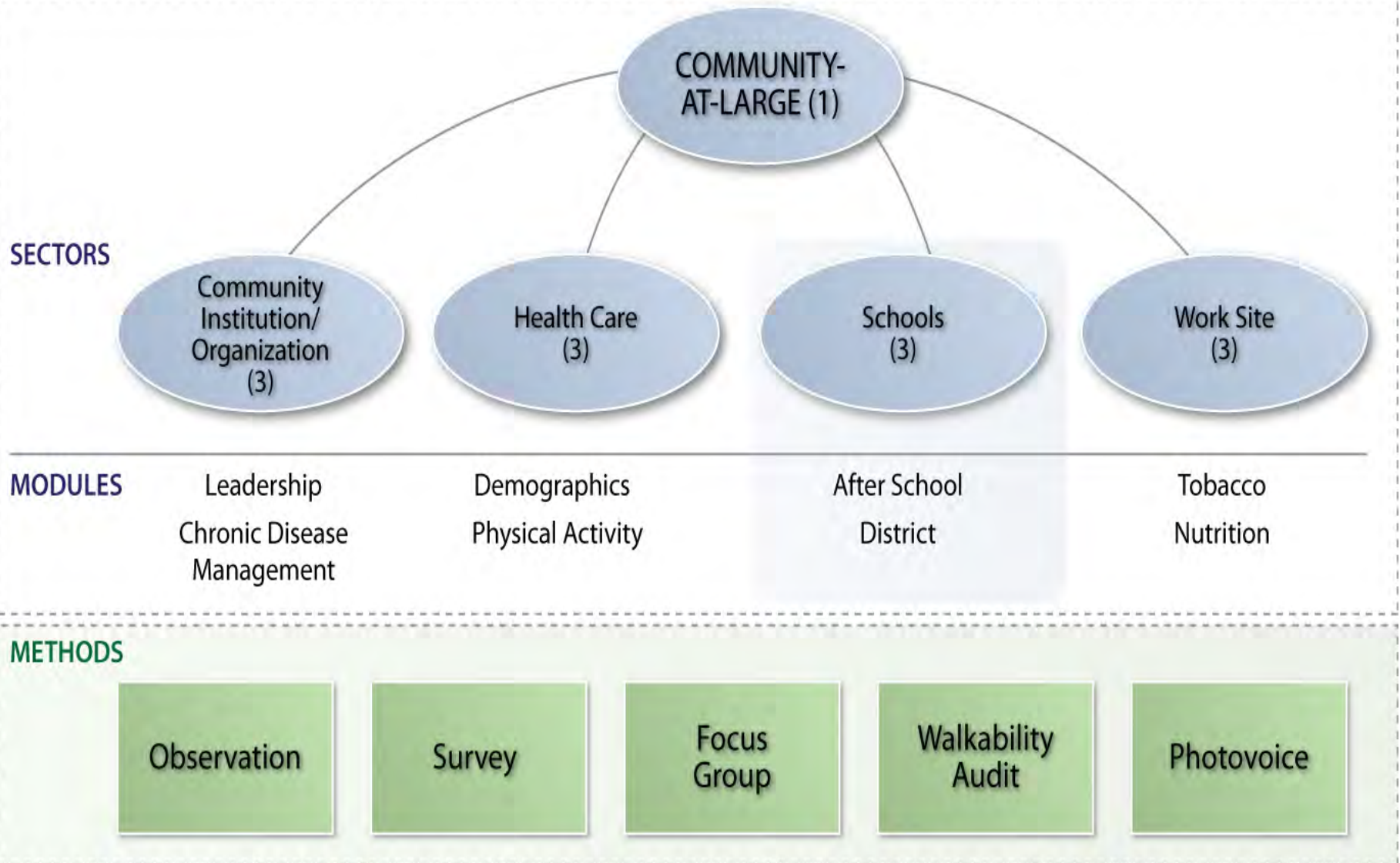
Community teams with broad participation from community leaders:





CHANGE Framework

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CHANGE:

Example Measures

Increase Access to Physical Activity & Recreation:

- Require bike facilities to be built for all developments
(e.g., housing, schools, commercial)
- Provide access to public recreation facilities (e.g., parks, play areas, community and wellness centers) for people of all abilities
- Require sidewalks to comply with the Americans with Disabilities Act (ADA) (i.e., all routes accessible for people with disabilities)
 - Enhance access to public transportation (e.g., bus stops or transit stations)
- Joint use agreements: School facilities (e.g., playgrounds, intramural fields, etc.) are available outside of school hours





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Gather Data

Determine what information you need to collect to better understand your community...and complete ***CHANGE***.

Example Methods:

- Survey data
- Community dialogue
- Photovoice
- Community audit and observation





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Barriers and Challenges

Schleien (1993)*
identified categories of
barriers to inclusive
services as
architectural,
programmatic, and
attitudinal.



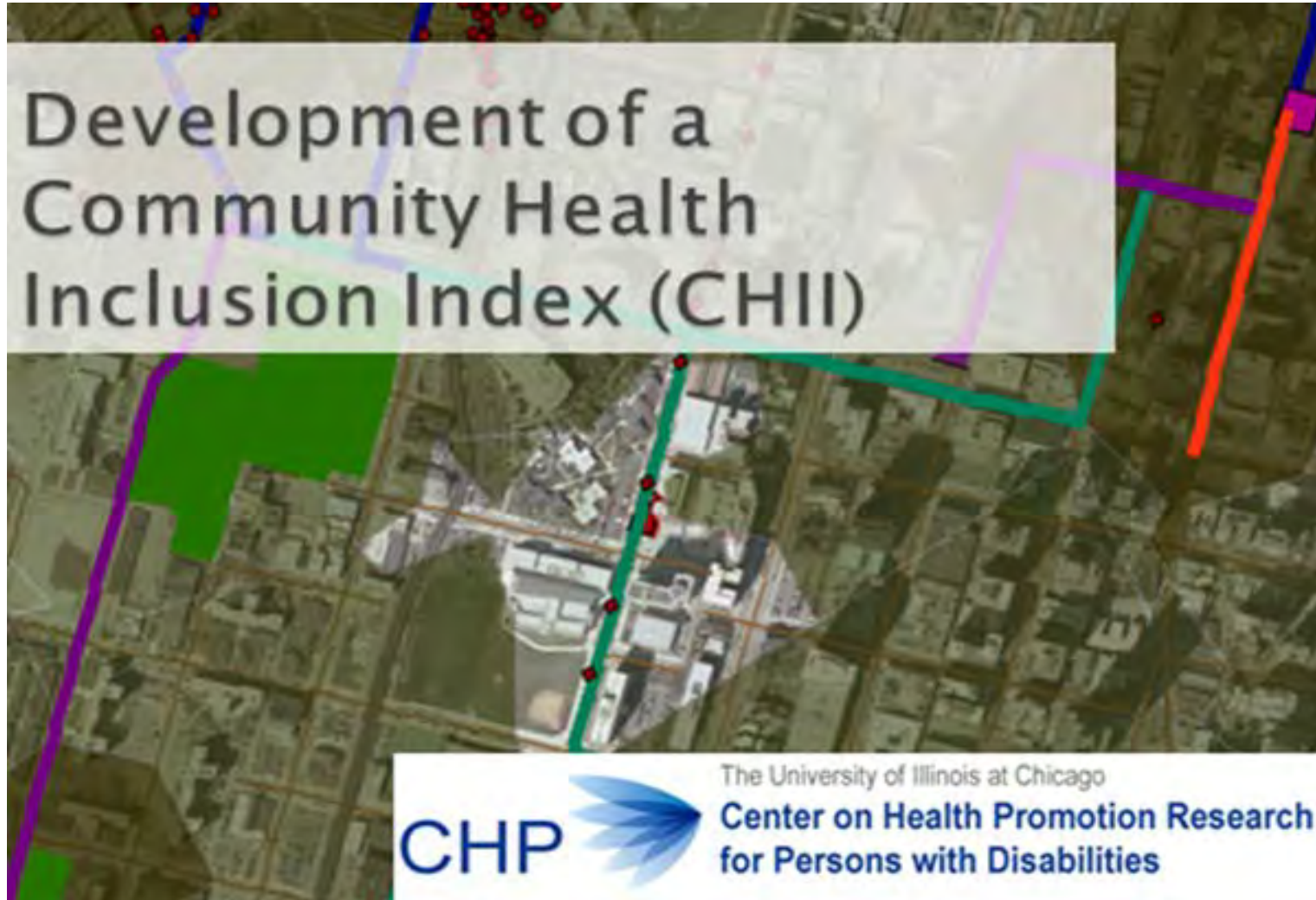
Architectural barriers include physical obstacles to inclusion such as access to buildings or outdoor facilities.





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Development of a Community Health Inclusion Index (CHII)



CHP



The University of Illinois at Chicago

**Center on Health Promotion Research
for Persons with Disabilities**





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Why Walkability?





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Call to Action on Walking



ABOUT

Biographies of Current Officials

Duties

Commissioned Corps

Internships, Scholarships, and Employment

History

Previous Surgeons General

Text Size: [A](#) [A](#) [A](#) [Print](#) [Tweet](#) [Post](#) [Send](#) [Share](#)

Biography of the Surgeon General Regina M. Benjamin, MD, MBA



Regina M. Benjamin, MD, MBA is the 18th Surgeon General of the United States. As America's Doctor, she provides the public with the best scientific information available on how to improve their health and the health of the nation. Dr. Benjamin also oversees the operational command of 6,500 uniformed public health officers who serve in locations around the world to promote, and protect the health of the American People.

From her early days as the founder of a rural health clinic in Alabama – which she kept in operation despite damage and destruction inflicted by hurricanes Georges (1998) and Katrina (2005) and a devastating fire (2006) – to her leadership role in the worldwide advancement of preventive health care, Dr. Benjamin has forged a career that has been recognized by a broad spectrum of organizations and publications.

Dr. Benjamin has a B.S. in chemistry from Xavier University, New Orleans, an M.D. degree from the University of Alabama at Birmingham and an MBA from Tulane University. She attended Morehouse School of Medicine and completed her family medicine residency in Macon, Ga. Dr. Benjamin holds 18 honorary degrees.





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Background

- Walkability indices have been created for ambulatory individuals
 - ▶ No equivalent indices for people with mobility disabilities.





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Built Environment





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Future Research

- Future research should develop a rollability index to further explore the causal relationship between the built environment and BMI for wheelchair users
- ▶ Wheelchair users may be impacted by other factors
 - sidewalk complaints,
 - local transportation
 - availability of disability resources,
 - stop light timing





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Universal Design and Health Promotion

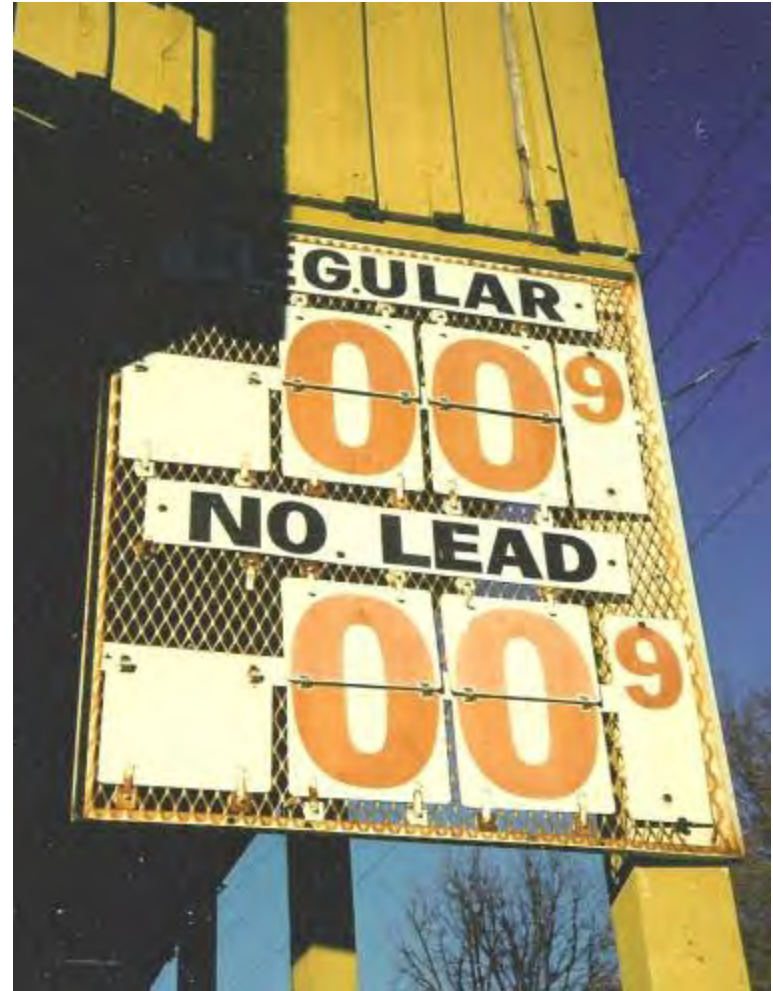




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Some things we may not live to see...

...but most of us will live
long enough to
experience disability for
ourselves because of...





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Modern medical care





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Returning war veterans





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The way we live, work, ...





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...and play





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What is universal design?

Universal Design is the design of all products and environments to be usable by people of all ages and abilities, to the greatest extent possible.

- Ronald L. Mace





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Accessible vs. Universal

- Accessible Design: for people with disabilities
- Universal Design: for everyone, *including* people with disabilities





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The 7 Principles of Universal Design

1. Equitable Use
2. Flexibility in Use
3. Simple and Intuitive Use
4. Perceptible Information
5. Tolerance for Error
6. Low Physical Effort
7. Size and Space for Approach and Use

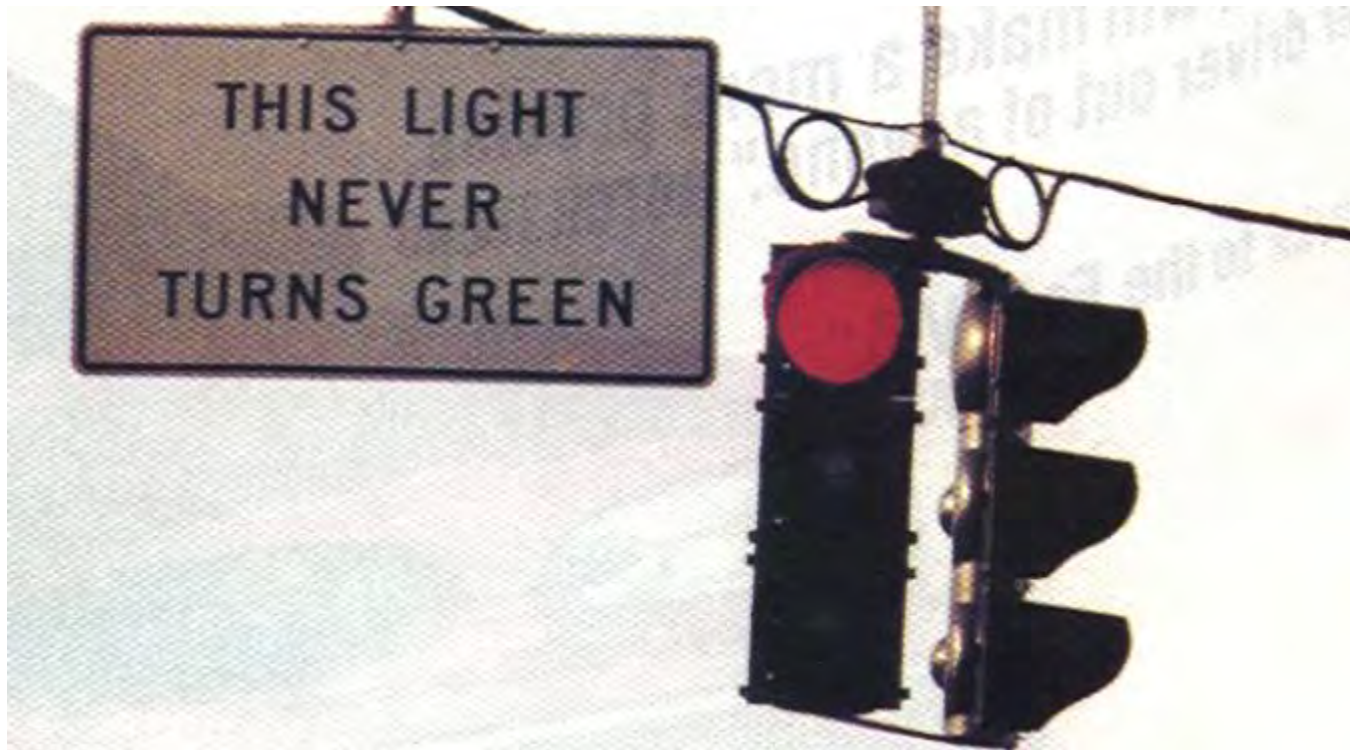




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Principle 3: Simple and Intuitive Use

Use of the design is easy to understand, regardless of the user's experience, knowledge, language skills or concentration.





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Principle 4: Perceptible Information

The design communicates information effectively to the user, regardless of the environment or the user's abilities





Principle 5: Tolerance for Error

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The design minimizes hazards and negative consequences of accidental actions.





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How can communities

Get from Here...



To Here...







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Incomplete Streets



Uninviting bus stops: no sidewalks, curb cuts, or comfortable place to wait





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Incomplete Streets



Inaccessible sidewalks: no curb cuts = no way to safely cross, move along roads





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Incomplete Streets



Wide, fast-moving roads: dangerous for bicycling, walking/wheeling across





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We know how to build good streets...





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...but too often, we don't.





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The Solution: Complete Streets



A Complete Streets policy ensures that the entire right of way is planned, designed, and operated to provide safe access for all users.





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Why Have a Complete Streets Policy?

To ensure that all users are part of routine, everyday transportation practice.

- Reverse the ‘burden of proof’
- Assume pedestrians, bicyclists, and transit users will be there, *unless proven otherwise.*





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Improve Community-Scale Urban Design

Why have a Complete Streets policy?

To gradually create a complete network of roads that serve all users.





Why have a Complete Streets policy?

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To provide flexible solutions to community transportation needs.





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Why Have a Complete Streets policy?

To take advantage of all opportunities to create better streets:

- Planning
- Design
- Maintenance
- Operations





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Building Partnerships

Policy development should include all stakeholders:

- Members of the community
- Elected officials
- Transportation agencies





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Building Partnerships

Policy development campaigns are a valuable tool for:

- Changing transportation priorities
- Establishing a new ideal for streets
- Communicating with the public





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Benefits: People with Disabilities

Complete Streets improve mobility, independence; reduce need for costly paratransit service.



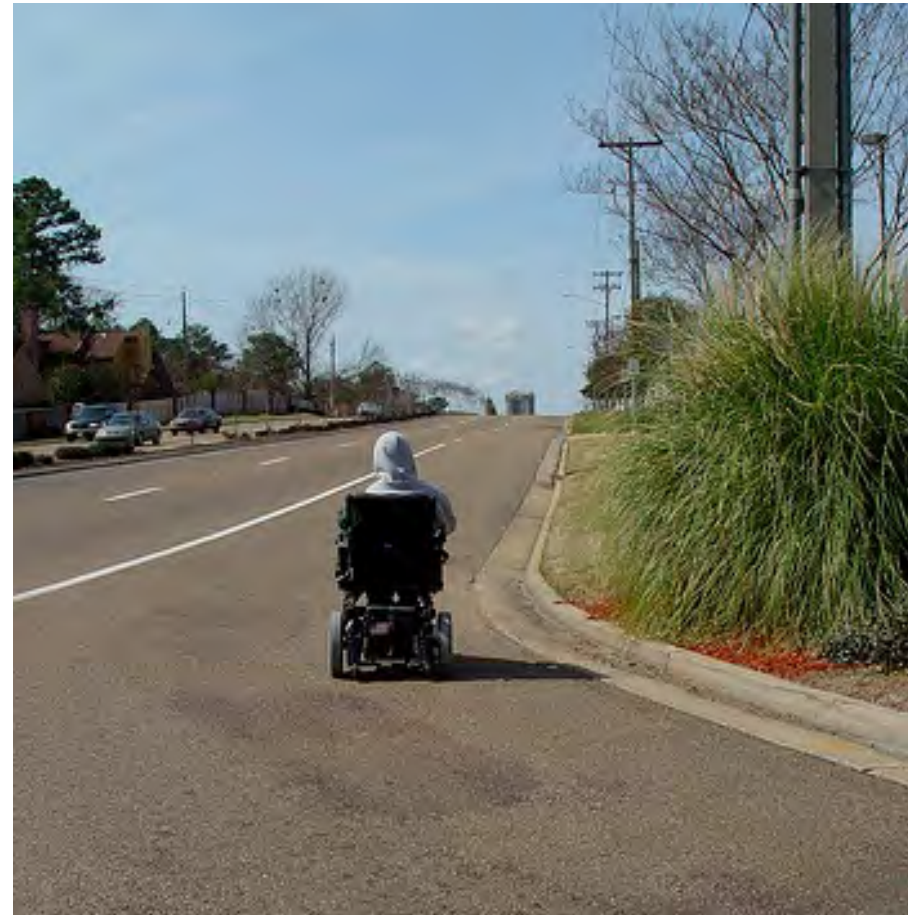


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Benefits: People with Disabilities

ADA requires sidewalks to be accessible.

ADA does not require sidewalks where none exist.





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Benefits: People with Disabilities



Complete Streets changes that: if there's a need, sidewalks must be provided.

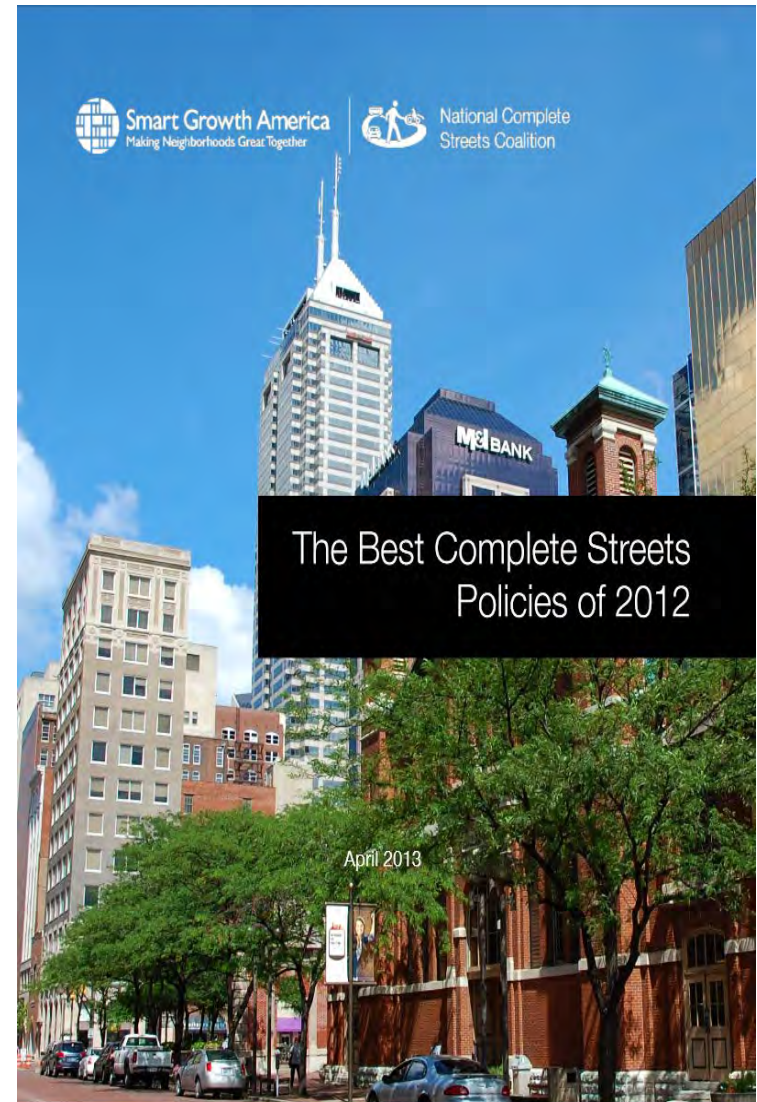




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Measuring Results

- **In 2012, 125 communities adopted Complete Streets policies.**
- **In total, 488 Complete Streets policies are now in place nationwide, at all levels of government.**





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Measuring Results

Effective implementation means:

- Restructure procedures, policies, and programs
- Rewrite/update design guidance
- Offer training opportunities to planners and engineers
- Create new performance measures





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Inclusion

"Inclusion is not a strategy to help people fit into the systems and structures which exist in our societies; it is about transforming those systems and structures to make it better for everyone. Inclusion is about creating a better world for everyone."

-Diane Richler, President, Inclusion International





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Thank you!
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1-800-900-8086

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"Improving Accessibility for All Through Complete Streets Policies" Stefanie Seskin, Deputy Director of the National Complete Streets Coalition, June 16, 2011, Chicago, IL.

"Building Healthy Communities: Using CHANGE to Understand Community Needs" Shannon Griffin-Blake, Ph.D. CDC's Healthy Communities Program, June 14, 2011, Chicago, IL.

1997 NC State University, The Center for Universal Design-Jim Mueller

