

City of Auburn Comprehensive Plan Update Health Impact Assessment

December 31, 2014

This project was made possible with funding from the Centers for Disease Control and Prevention in partnership with Seattle Children's Hospital, Public Health – Seattle & King County and the Healthy King County Coalition.

CTG Grant Number 1H75DP004595-01
Principal Investigators Brian Saelens PhD and James Krieger, MD, MPH

Project Sponsors

Lindsey Greto Grant Administrator, Seattle Children's Hospital
Brian Saelens, PhD Principal Investigator, Seattle Children's Hospital
Julie West Grant Manager, Public Health — Seattle and King County

Auburn HIA Team Members

City of Auburn Community Development & Public Works Staff

Kevin Snyder, AICP Director
Ingrid Gaub, PE Assistant Director of Engineering
Pablo Para, PE Traffic Engineer
Jeff Tate Assistant Director Community Development
Elizabeth Chamberlain, AICP Planning & Design Services Manager
Jeff Dixon Planning Services Manager

Additional City of Auburn Staff

Daryl Faber Director, Parks, Arts & Recreation
Julie Krueger Events Manager, Parks, Arts & Recreation
Ron Tiedeman Director, Innovation & Technology Department
Bill Pierson Assistant Police Chief, Auburn Police Department
Emily Pearson Community Services Assistant, Auburn Administration
Erica Sullivan Veterans and Human Services Coordinator, Auburn Administration

Tacoma-Pierce County Health Department

Amy Pow Principal Planner, Built Environment Program

Studio 3MW Consultant Team

Julia L. Walton, AICP
Marcia Wagoner
Casey Bradfield
Jessie Hartmann

Executive Summary

Project Background

The City of Auburn conducted a health impact assessment (HIA) to integrate health into its 2015 Comprehensive Plan Update process. The goals of the Auburn Comprehensive Plan Update HIA included strengthening health-related Comprehensive Plan goals and policies and providing guidance to improve community population-based health outcomes through City actions related to physical activity and healthy food.

The project was funded by a grant from the Centers for Disease Control and Prevention's Community Transformation Grants Small Communities Program (CTG), with an in-kind match from City. The grant was administered by Seattle Children's Hospital, in partnership Public Health Seattle and King County. The project team for the Auburn HIA included staff from the City of Auburn, Seattle Children's Hospital, Public Health Seattle and King County and Studio 3MW LLP). As the first City in the Puget Sound region to incorporate an HIA into its Comprehensive Plan, Auburn's leadership provides a replicable model and builds capacity to incorporate health into community-wide planning to make system-wide changes supportive of access to active living and healthy food.

HIA Process

The Auburn HIA was a two-phase project that took place concurrently with the City's Comprehensive Plan Update process (required by the state to be completed by June 30, 2015). The two phases of the Auburn HIA were 1) scoping and 2) completion of a full HIA. The scoping phase started before the City's visioning and update process. It identified potential health needs and issues in Auburn and potential methods to integrate health into the City's Comprehensive Plan Update by improving access to physical activity and healthy food. Community identity and placemaking was also identified as an overarching policy focus area that influenced urban form and community behaviors supportive of both physical activity and healthy food. The findings of the scoping phase were published in the fall of 2013 in the City of Auburn Comprehensive Plan Update Health Impact Assessment Scoping Report (Appendix A).

The second phase of the Auburn HIA built on the foundation laid by the 2014 Auburn Community Vision Report (Appendix B), and took place during the fall and winter of 2014. It incorporated findings from other recent community outreach and engagement efforts (Appendix C), including outreach conducted by the CTG-funded Washington Community Action Network (WACAN) to study health equity and access in Auburn (Appendix D).

An Auburn City Staff HIA Team provided in-house knowledge and developed health-related policy during the second phase of the Auburn HIA. The team consisted of staff from five City departments supported by staff from Seattle Children's Hospital, Public Health Seattle and King County, Tacoma-Pierce County Health Department and Studio 3MW LLP.

The second phase of the HIA included a baseline assessment, existing policy audit, initial policy recommendations and potential health impacts and other policy concepts being considered for incorporation into the Comprehensive Plan Update, and recommendations for implementation and monitoring. This report presents a summary of these activities.

Key Findings & Recommendations

Key findings of the Auburn HIA included identification of priority health focus areas in the City based upon geographic concentrations of populations with higher than average risk for poor health (households in poverty, populations with low-English proficiency, zero-car households, minority population, Hispanic population, population over 65 years old, and population below 18 years old), priority health-policy needs and policy, implementation

and monitoring recommendations. The Baseline Assessment revealed that the health focus areas also tended to be characterized by limited connectivity, few healthy food resources and the higher than average crime rates.

The following figure identifies pathways to improved health that guided HIA policy development and implementation recommendations.

Figure 1 Pathway to Improved Health

Policy Priorities & Recommendations

Based on findings, the HIA recommends that the City prioritize the following types of policies in order to improve community health outcomes related to physical activity and healthy eating. Specific policy recommendations are included in the sections of this report titled Draft Policy Recommendations (beginning on page 25) and Additional HIA Recommendations (beginning on page 35).

Physical Activity

Bicycle, Pedestrian and Transit Systems Improve sidewalk connectivity, improve the pedestrian environment, eliminate natural and man-made mobility barriers for pedestrian and bicyclists, improve transit access, improve traffic safety, pedestrian safety and personal security.

Parks & Recreation Expand existing programs, increase access to existing parks, adopt level of service standards for equitable geographic and population distribution of parks and recreation opportunities.

Healthy Food

Healthy Food Sources Increase the number and geographic distribution of affordable healthy food sources, increase geographic distribution, increase access to healthy food sources such as farmer's markets and community gardens.

Community Identity and Placemaking

Community Identity Improve sense of place, increase civic engagement, improve neighborhood safety, develop neighborhood plans, develop safe and pleasant streets that connect destinations and reflect community identity,

Mixed Use Nodes Increase mixed use areas, increase healthy living resources within walking distance of homes and schools, create walkable communities, attract transit oriented development, co-locate healthy living resources with other destinations.

Placemaking Develop community gathering places in City Districts.

Safety Improve perceptions of safety, improve traffic safety and reduce personal injury.

Health & Decision Making Ensure health is a key consideration in decision making, prioritize investments in health focus areas.

Implementation & Monitoring

The pathway to improved health for the Auburn Comprehensive Plan Update begins with the types of policies discussed above. The policies would be implemented through City regulations, programs, and decisions about investments and resource allocation. These actions would result in short term changes in the community, which would lead to behavioral changes, which would lead to improved health outcomes and related benefits in the long term. A list of implementation and monitoring recommendations is provided in the section of this report titled Implementation & Monitoring (beginning on page 43).

Limitations

The Auburn HIA project faced limitations related to time and data availability. The timeframe for the Auburn HIA was compressed, and was shorter than the Comprehensive Plan Update process. While this presented challenges, it also presented opportunities. For instance, the Auburn HIA was able to take a proactive approach and influence policy priorities before the City began updating Plan elements. Data limitations were primarily related to the baseline community health assessment, and included a lack of readily available data on certain subjects that would have been useful to study, format incompatibilities of existing datasets, and incomplete datasets. Nonetheless, sufficient information was available to complete a qualitative assessment that provided useful findings for the Auburn HIA. The project team worked with the best available information to complete the Auburn HIA.

Lessons for HIA Practice

One of the lessons learned from the Auburn HIA was the importance of completing a thorough baseline community health assessment following completion of the scoping phase of the HIA. All remaining steps in the HIA process build upon the findings of this assessment. Planning for ample time to conduct the baseline assessment, including coordination with government departments to obtain information, helps set an HIA process up for success.

Other contributions to HIA practice resulting from the Auburn HIA are this report and the interim tools used to develop it, such as those included in the appendices. As the first Comprehensive Plan Update HIA in the region, the Auburn HIA provides a model that can be replicated or modified by interested jurisdictions.

Lastly, the formation of the first multi-departmental staff team provided cross-functional training and team building within the City government. The process built staff capacity and increased understanding of community health issues and ways that local government might influence health.

Introduction

Project Background

The City of Auburn, Washington conducted this health impact assessment (HIA) to integrate community health into its 2015 Comprehensive Plan Update process. The goals of the Auburn Comprehensive Plan Update HIA included strengthening and adding health-related goals and policies and implementation actions to the Comprehensive Plan, and providing guidance to improve community health outcomes through City and partnership actions.

The HIA was undertaken at the beginning of the planning process as a proactive method of fact finding and influencing community health through integrated policy development. As the first City in the region to incorporate an HIA into its Comprehensive Plan, Auburn's leadership with this HIA will provide a replicable model and build capacity in the region for integrating health and planning at the City-wide level.

The project was funded by a grant from the Centers for Disease Control and Prevention's Community Transformation Grants Small Communities Program (CTG), with an in-kind match from City. The grant was administered by Seattle Children's Hospital, in partnership Public Health Seattle and King County. The overall goal of the CTG grant is to make the healthy choice – eating healthy food and regular physical activity – the easy choice, by using community-based prevention approaches to reduce the burden of chronic disease and improve quality of life. To this end, the grant supports state and local governmental agencies in undertaking community activities to reduce chronic disease rates, address health disparities, develop stronger evidence-based prevention programming and improve overall quality of life.

The project team for the Auburn HIA included staff the City of Auburn, Seattle Children's Hospital, Public Health - Seattle and King County and Studio 3MW LLP, consultants.

Another goal of the HIA project was to build on previous efforts, incorporating health planning tools and resources developed in the Puget Sound region where possible. Public Health Seattle and King County and the Tacoma-Pierce County Health Department have developed tools for integrating health into comprehensive plans and for conducting HIAs. Examples of these tools include Public Health Seattle and King County's "A Tool for Planners: Linking Health-related Countywide Planning Policies to Comprehensive Plans" and Tacoma-Pierce County Health Department's "Healthy Community Planning Toolbox". These resources, and the stakeholders who developed them, helped to guide the work of the Auburn HIA Project Team.

HIA Process

The City of Auburn was selected (HIA screening process) to receive HIA Grant funding in a competitive grant process due to the strength of its application and ranking of existing health outcomes among King County cities. The Auburn HIA was a two-phase project that took place concurrently with the City's Comprehensive Plan Update process. The City is required by the state to complete its Comprehensive Plan Update by June 30, 2015. To meet this deadline, the City initiated its update in late 2013 with a visioning process, undertook policy development in 2014 and is planning to complete review and adoption in 2015.

The two phases of the Auburn HIA were 1) scoping and 2) completion of a full HIA. The scoping phase started in the summer of 2013, before the City's visioning process. It identified potential health needs and issues in Auburn related to physical activity and healthy foods and effective methods to integrate health into the City's Comprehensive Plan Update through the use of a full HIA. It also identified policy focus areas for the HIA based on priority health outcomes. The two primary policy focus areas were physical activity and healthy food. Community identity and placemaking was also identified as an overarching policy focus area that influenced community behaviors related to both physical activity and healthy food. Tobacco prevention was analyzed in the scoping phase and eliminated for HIA inclusion due to the limited means to influence tobacco prevention in

city-wide municipal government planning. The outcomes of the scoping phase were published in the fall of 2013 in the City of Auburn Comprehensive Plan Update: Health Impact Assessment Scoping Report (Appendix A).

The following draft HIA goals and objectives were developed by the project team during the Scoping Process and were used to guide the development of the HIA:

HIA Goals

Strengthen and add health-related goals and policies to the Comprehensive Plan.

Paint a picture of the community to further bring disparities into peoples' awareness.

Influence policy development and implementation priorities.

Build healthy community planning and HIA capacity in the region; provide leadership for the region.

Develop foundational umbrella policies which can cascade into other efforts and levels of planning.

Develop an HIA that community, staff, elected officials and planners can easily implement, using simple language, infographics and other means to communicate clearly.

Develop communication methods that emphasize improving quality of life rather than community deficiencies.

HIA Objectives

Define the HIA scope for the Auburn Comprehensive Plan Update and identify complete HIA contents & methods.

Focus on how the update can affect physical activity, healthy food and tobacco prevention outcomes.

Focus on the built and social environments for most effective health policy intervention and outcomes.

Focus on partnerships to influence topics, facilities or operations outside of municipal government jurisdiction (such as schools, transit agencies, etc.).

Conduct an inclusive outreach process with methods tailored to diverse communities and locations.

The City completed its community visioning process in the summer of 2014 and published the City of Auburn Community Vision Report (Appendix B) to present input received and initial guidance for future Comprehensive Plan Update policy and planning decisions. The Visioning process was guided by the following values:

Inclusive Auburn is rich in diversity and the visioning process needs to be designed in a manner that reaches as many segments of the population as possible (e.g. culture, age, socio-economic, spatial).

Cohesive The geography of Auburn and its history of annexation has resulted in neighborhoods that are geographically separated; while the visioning exercise should recognize the identity of individual neighborhoods it must emphasize that we are a single community.

Accessible The visioning exercise should not rely upon traditional formats of government interaction with the community and should instead favor an approach that emphasizes innovative ways to communicate and that brings the visioning process to the people.

The second phase of the Auburn HIA built on the foundation laid by the Scoping Document, and took place during the fall and winter of 2014. It incorporated findings from other recent community outreach and engagement efforts, including outreach conducted by the Washington Community Action Network (WACAN) to study health equity and access in Auburn (also funded by a CTG grant). Appendix C provides an overview of Commu-

nity Outreach and Partner Engagement Efforts and Appendix D provides a description of the WACAN Building a Healthier Tomorrow Report and findings.

An Auburn City Staff HIA Team was formed to provide in-house knowledge to inform activities conducted during the second phase of the Auburn HIA. This cross-functional team consisted of staff from five City departments (Community Development, Public Works, Parks and Recreation, Community Services and Information Services) as well as staff from Seattle Children's Hospital, Public Health Seattle and King County, Tacoma-Pierce County Health Department and Studio 3MW. The team met five times between August and November of 2014 to consider baseline conditions and develop policy recommendations. The team charter is included in Appendix E.

Activities completed during the second phase of the Auburn HIA included conducting a baseline assessment, conducting an audit of existing policies in the Comprehensive Plan for health-supportive policies, , developing initial policy recommendations, assessing the potential health impacts of these and other policy concepts being considered for incorporation into the Comprehensive Plan Update, and developing recommendations for implementation and monitoring. This report presents the results of these activities.

Baseline Assessment

Studio 3MW conducted a baseline community health assessment to provide foundational information for the HIA. It covered the following topics: community profile, community health outcomes, determinants of health, populations at greater risk for poor health, and existing City and partner efforts that support community health. Research questions for the baseline assessment included:

What are the existing population's health outcomes in Auburn?

What populations are at greatest risk in Auburn and where are they located and/or concentrated?

What social or cultural factors influence access to physical activity and healthy foods for populations at greater risk for poor health?

What physical activity and healthy food resources are available and how are they distributed spatially in the City and as relates to population health outcomes?

What barriers currently limit community access to physical activity opportunities and healthy food resources in Auburn?

Information sources included US Census demographic data, Geographic Information Systems (GIS) data provided by the City of Auburn, the City of Auburn's Community Vision Report, community health profiles and school health profiles prepared by Public Health Seattle and King County and the Tacoma-Pierce County Health Department, free and reduced lunch data for the Auburn School District, and a report on health equity and access in Auburn prepared by WACAN. The full baseline assessment report is provided in Appendix F. Key findings are discussed below.

Community Profile

Determinants of Health

The baseline assessment for the Auburn HIA studied the following determinants of health: population health outcomes, urban form, the public realm (parks, open spaces, public places and streets) physical activity and the food environment. Understanding how these determinants of health influence community members' ability to make healthy choices helped to identify needs and opportunities for City actions to improve access to healthy living resources.

Key findings are listed below. They suggest that community health outcomes could be improved through the following types of interventions: eliminating natural and man-made mobility barriers for pedestrian and bicyclists, improving sidewalk connectivity, improving the pedestrian environment, increasing the number of mixed use areas that provide goods and services, improving transit access, increasing the number of destinations located within walking distance of homes, increasing the number of healthy food sources within walking distance of homes and schools, improving safety and perceptions of safety, and eliminating affordability as a barrier to healthy food and physical activity.

Auburn is located on the boundary of King and Pierce Counties. It covers approximately 30 square miles of land area, and is home to about 75,000 residents. The Muckleshoot Indian Reservation is partially located within the southern City limits. Historically an agricultural area, Auburn's population and housing density have increased in recent decades due to its proximity to the regional urban centers of Seattle and Tacoma.

Key community and geographic features contribute to urban form, mobility and access to goods and services. Geographic districts within the City include: The Auburn valley floor districts (North Auburn, South Auburn & Downtown) and hill districts (West Hill, Lea Hill, Lakeland, Southeast Auburn).

Auburn includes over 30 square miles in land area, views of rivers, wooded hillsides, natural areas and Mount Rainier, annexed hill areas developed to County standards without sidewalks and few connecting streets. These features form barriers to connectivity and physical activity and create isolated districts within the City.

Auburn is a diverse community in many ways. The City's median age is 33.5, more than ten percent younger than the State average. Approximately 30 percent of residents identify as a race or ethnicity other than white or Caucasian. Of these residents, approximately ten percent are Asian and Pacific Islander, five percent are African American, two percent are American Indian and Alaskan Native, and five percent are another race or ethnicity. Thirteen percent of residents identify as Hispanic or Latino. One quarter of residents speak a language other than English at home.

A higher proportion of Auburn individuals and families face financial hardship compared to those in King County and Washington State. Auburn's median income is \$54,329, about 24 percent lower than the King County median, and nine percent lower than the State median. The unemployment rate in Auburn is over ten percent. Approximately fifteen percent of Auburn families live on incomes below the federal poverty level. Over half of the students in the Auburn School District are eligible for free or reduced lunch.

Low-income and minority populations are generally at greater risk of poor health status and poor access to healthy living resources. These population groups make up a significant portion of Auburn's community; however, they are not uniformly distributed throughout the community.

Community Health Outcomes

Auburn has relatively poor community health outcomes. Compared to other cities in King County, it has the lowest life expectancy, highest rate of diabetes, one of the highest rates of obesity, and one of the highest rates of inactivity. The health outcomes of students in the Auburn School District are generally consistent with King County averages, but could be improved to reduce the risk of students developing chronic diseases as adults. Improving community health is an important issue for the City. This is one of the reasons it conducted the Auburn HIA.

Health Focus Areas & Populations at Greater Risk for Poor Health

Studio 3MW identified health focus areas by analyzing the spatial distribution of at greater risk for poor health and the health determinant findings discussed in the prior section. The indicators used for the analysis were: households in poverty, those with low-English proficiency, racial minorities, Hispanics, people over 65 years old or below 18 years old, and crime rates.

After identifying the health focus areas, Studio 3MW generalized them into two categories (Figure 2). Category B represents the highest scoring areas, which include parts of South Auburn and the I Street corridor. These include the two portions of the city with the highest 2013 crime rates. Both of these areas have higher than average poverty rates. Category B areas were assumed to have the highest need for health interventions. Category A represents the second highest scoring areas. Three of the Category A areas do not have higher than average rates of poverty (West Hill, Lea Hill North and Lea Hill South); residents of these areas face fewer access barriers than residents of the B Category health focus areas.

Key Findings

Urban Form

Figure 4, Urban Form, identifies natural and built elements of form that affect circulation and physical access (topography, natural systems, streets and building patterns).

Auburn is divided by man-made and natural barriers that limit people's ability to walk and bicycle throughout the City, and that also limit vehicular travel to some extent. Barriers include steep slopes that separate the City into three plateaus and a valley, as well as rivers, wetlands, rail lines, state highways and major

City roads.

Many areas of the City have incomplete sidewalk connections, due to changing development regulations and land use patterns over time. The City's poor sidewalk connectivity limits pedestrian movement. Downtown and Lakeland Hills are two exceptions with good sidewalk connectivity.

The Union Pacific and BNSF rail corridors that run north and south through the City are characterized by large block sizes, limited access points and large paved and fenced areas that discourage walking.

There are clear divisions between land uses in Auburn, with few mixed-use areas. Auburn's segmented land use pattern results in many residents living in areas that are not within walking distance of retail and services including healthy food retailers, medical care providers and gyms.

Multifamily housing is concentrated in the center of the City, located primarily along the edges of commercial areas. Multifamily housing in Downtown has high access to transit. Multifamily housing in the remainder of Auburn is characterized by relatively poor access to transit, limiting residents' mobility options.

Physical Activity

Figure 5, Community Destinations & Access, identifies community destinations and factors that contribute to safe and comfortable pedestrian and bicycle use (sidewalks, expanse of pavement/site barriers and pedestrian access).

Physical activity resources in Auburn include sidewalk, trails, parks and recreational facilities. These are distributed throughout the City, but networks are incomplete and not within walking distance of many residents.

People are more willing to walk or bike if they have a destination. Retail destinations are primarily located in the Auburn Valley. Other types of destinations are distributed throughout the City, but they are concentrated on the Auburn Valley floor.

Perception of safety is a physical activity barrier for Auburn residents. Concerns about traffic safety, crime and personal injury discourage walking and bicycling. Pedestrian collision rates are highest in the Auburn Valley along state highways and major City roads. Crime rates are highest in South Auburn and the I Street corridor.

High speeds, large intersections and ambiguous pedestrian areas are also barriers to physical activity.

Auburn has 28 developed parks, 23 miles of trails, and 247 acres of open space for passive recreation. Urban natural open space is located primarily on the hillsides and along rivers.

Parks are distributed throughout the community; many are located on the Auburn Valley floor. Some parks are co-located with schools. Size and location are related to when areas of the City were developed or annexed into the City. Passive open space and trails are primarily located in former rail right of ways and along rivers and on hillsides

There are currently no Level of Service standards for parks in the Comprehensive Plan related to population or geographic distribution.

Food Environment*

Figure 6, Food Environment, identifies factors that affect access to good nutrition including proximity and number of affordable healthy food outlets in relation to concentrations of employment, residents and schools.

Healthy food resources in Auburn include grocery stores, farmers markets and community gardens. These are concentrated in the center of the City. Residents living outside of this area may face access barriers to healthy food, such as time, distance and affordability

Healthy food sources are less widely distributed than all food sources within the City. As such, it is more convenient for people to obtain unhealthy food than healthy food.

The food sources located around schools influence children's and teens' diets. Schools in Downtown have access to a number of healthy food options, as well as unhealthy options. Schools outside of the center of the City are generally not located near healthy food options.

Affordability is a significant barrier facing residents in accessing healthy foods. Over 80 percent of residents surveyed for the WACAN Building a Healthier Tomorrow report stated that they would eat more fresh fruits and vegetables if they were more affordable.

People who live in areas that are within walking and biking distance of healthy food sources may choose not to go to them, despite their convenient location, if they perceive a safety risk.

Existing Community Health Support

As part of the baseline assessment, the Auburn City HIA Team identified existing City and partner efforts that support community health. Understanding these efforts helped to identify potential needs and opportunities for the Comprehensive Plan Update. Findings are listed below. A lot of good work is already being done by the City and partners such as medical providers, schools, community organizations and public health agencies. Some of this work could be expanded upon to have an even greater impact on community health.

City Efforts¹

The Comprehensive Transportation Plan has policies that promote connectivity and pedestrian infrastructure.

Development standards encourage sidewalks, bike lanes, open space, trail connections.

The Capital Improvement Plan and Transportation Improvement Plan have projects for non-motorized transportation improvements.

The City works to incorporate sidewalks and bike lanes into projects, and to promote public transit.

The City is working to provide pedestrian connections between Les Gove Park and Downtown, via F Street.

The City provides a variety of recreational programming, and recently added exercise equipment and wifi access to parks.

The City partners with schools on recreational programming.

The City provides cooking classes and supports community gardens and the farmers market.

¹ Specific policies in the City's existing Comprehensive Plan that support community health are discussed in the policy audit section below.

The City provides a home repair program for seniors and low-income residents.

The City has a Wellness Committee.

The City of Auburn participates in the Healthy Auburn Task Force, which is a volunteer group focused on promoting healthy living and related programming offered by its members. This group includes Auburn Valley YMCA, Auburn MultiCare Medical Center, Valley Medical Center, the Auburn School District, and Mosby Farms.

The police department provides officers on foot and bike in parks. This has improved perceptions of safety in parks.

The police department has officers assigned to Community Response Teams (CRT). These officers are focused on building relationships with the community and working collaboratively to address crime problem areas.

CRT officers work closely with civilian code enforcement staff in the Community Development Services Department to address property maintenance issues that may attract crime.

The police department provides Crime Prevention Through Environmental Design (CPTED) information to interested property owners.

The City funds nonprofits that provide the following services for poverty reduction, health care, child neglect prevention and sexual assault.

Partner Efforts

Valley Medical Center is working to develop a program in which doctors provide patients with maps of the locations near their homes where they can exercise, if the doctor is prescribing physical activity.

Auburn School District has a number of programs related to healthy living, including:

- A Safe Routes to Schools Program.

- A summer lunch program, with 40+ sites including local parks.

- Participation in a farm to school collaborative.

- Participation in a learning network for districts that have high health disparities.

- An updated wellness policy designed to promote healthy food and physical activity.

- A new physical education curriculum designed for the districts' diverse student body.

The Auburn Food Bank provides a coupon for people to use to buy fresh produce at the farmer's market.

Hyde Shuttles offers shuttle service for low income residents and seniors.

Public Health Seattle and King County and the Tacoma-Pierce County Health Department have developed tools for integrating health into comprehensive plans and for conducting HIAs.

Public Health Seattle and King County regularly publishes community health profiles for the City of Auburn and the Auburn School District, to provide decision makers with information on health indicators and determinants.

Existing Policy Audit

Studio 3MW and City staff completed a policy audit for the Auburn HIA in order to identify existing policies in the Comprehensive Plan that support positive health outcomes, and to identify policy gaps and policies that could be augmented. A policy checklist was developed for use in conducting the audit. The checklist incorporated the needs and opportunities for supporting community health in Auburn that were identified during community engagement activities and during the baseline assessment. It also incorporated health-related policy guidance from the King County and Pierce County Countywide Planning Policies. Appendix G provides a detailed discussion of the policy audit and a copy of the checklist. Key findings are listed below.

Key Findings

Auburn has a number of policies in its current Comprehensive Plan that promote health. Many do not include specific details about actions the City could take to accomplish policy objectives. The policies:

- Promote opportunities for physical activity
- Encourage expansion of parks and open space systems
- Support multi-modal transportation systems
- Address the needs of non-driving populations
- Encourage expansion of pedestrian and bicycle networks
- Promote safe transportation systems
- Encourage working with community groups to prevent crime
- Support professional development and quality employment opportunities

Like many Puget Sound jurisdictions, Auburn's current Comprehensive Plan has some significant health policy gaps. Policy gaps include:

- Encouraging healthy food in the City
- Identifying community health as a priority outcome of City policies and programs
- Supporting improved access to healthy living resources for populations with poor health outcomes and in health focus areas
- Promoting colocation of healthy living resources with other community destinations
- Recognizing the relationship between economic prosperity and community health

The current Comprehensive Plan has policies whose intent could be clarified or expanded in order to more effectively support community health in Auburn. For instance:

- Policies that guide pedestrian and bicycle networks could promote or prioritize connectivity between residential areas, health focus areas and healthy living resources
- Policies that guide land use patterns could ensure that new development promotes physical, social and mental well-being (i.e. mixed use, walkable communities, public gathering places, diverse housing choices)

The Transportation Element could be strengthened by adding a greater emphasis on the relationship between the City's transportation goals and the City's land use and economic goals, and also by adding a list of specific implementation priorities linked to other city priorities and the health focus areas

The Parks, Recreation and Open Space Element could be strengthened by adding level of service standards designed to help improve access to parks, and also by adding priority parks projects

Draft Policy Recommendations

The City of Auburn was in the process of policy development for the Comprehensive Plan Update during the second phase of the Auburn HIA. Draft Plan elements were not available for review until after the Auburn HIA project ended. While this was not the original intent for the HIA process, it did present the opportunity to influence policy development before Plan elements were updated. The project team worked with the Auburn City Staff HIA Team to develop draft goals and policies to support community health. The team also reviewed health-related guidance provided by the Auburn Community Vision Report and the WACAN Building a Healthier Tomorrow report.

Auburn City Staff HIA Team Draft Goals and Policies

The Auburn HIA Team developed draft health-related goals and policies intended for incorporation into Plan elements later in the Comprehensive Plan Update process. The draft goals and policies were informed by HIA findings, as well as City staff knowledge of the types of policies that would be practical and feasible to implement in Auburn. They were intended to address health policy gaps and enhance existing City policies and programs that support health.

The draft goals and policies developed by the Auburn HIA Team are listed below. They are divided into four categories: healthy food, physical activity, community identity and placemaking, and health best practices.

Healthy Food Goal

G1 Address gaps in healthy food sources in Auburn, especially in residential areas.

Healthy Food Policies

- P1.1** Increase the geographic distribution of affordable healthy food sources throughout the City, such as community gardens and stores that sell fresh fruits and vegetables, and incentivize convenience stores and other small retail outlets that don't currently sell fresh fruits and vegetables to do so.
- P1.2** Update the zoning code to allow new mixed use centers in underserved areas, and recruit healthy food retailers to locate in these areas.
- P1.3** Promote healthy food options within a quarter mile of all high schools.
- P1.4** Expand on the City's current efforts to provide nutrition and healthy food programming that embraces the City's multicultural character, such as community kitchens, cooking classes, community gardens and farmers markets.
- P1.5** Consider development of a local food economy as a new economic development strategy for the City.

Physical Activity Goal

G2 Provide opportunities for all Auburn residents to be physically active.

Physical Activity Policies

- P2.1** Continue to improve non-motorized transportation networks.
- P2.2** Integrate land use and transportation planning, ensuring that land uses and transportation infrastructure support each other's various purposes throughout the City.

- P2.3** Increase the geographic distribution of parks and recreational facilities throughout the City, through strategic investment of public funds and through partnerships and incentives for private providers.
- P2.4** Improve access to existing parks while addressing safety concerns.
- P2.5** Continue to work with regional partners to develop and maintain trail systems that connect Auburn with regional destinations.
- P2.6** Build on partnerships with school districts to expand public use of school facilities for recreation and exercise, and to improve public access to facilities for this purpose, as appropriate.

Community Identity and Placemaking Goal

- G3** Foster positive community identity and placemaking throughout Auburn and its neighborhoods.

Community Identity and Placemaking Policies

- P3.1** Enhance City communication with residents to share information and promote greater engagement.
- P3.2** Consider implementing a neighborhood program modeled after the City of Renton's, that increases the amount of two-way communication between the City and residents and that strengthens social cohesion and neighborhood pride.
- P3.3** Work with community leaders to develop neighborhood plans. This could include small area plans, marketing and economic strategies, and plans for making neighborhood infrastructure improvements.
- P3.4** Use innovative techniques to engage with, and deliver services to, diverse community groups.

Health Best Practices Goal

- G4** Ensure that community health is a key consideration in City policies and programs.

Health Best Practices Policies

- P4.1** Emphasize areas with health disparities for investment.
- P4.2** Partner to reduce poverty as a barrier to accessing healthy living resources.
- P4.3** Serve transit-dependent populations and seniors who are aging in place.
- P4.4** Co-locate healthy living resources with community services and destination locations, to foster community activity hubs that enable healthy lifestyles.
- P4.5** Remove physical and transportation barriers to accessing healthy living resources.

Auburn Community Vision Report

The Auburn Community Vision Report is another source of health-related policy guidance for the Comprehensive Plan Update. While the report does not include adopted policy language, it does provide a detailed presentation of current issues and opportunities facing the Auburn community, as well as preliminary goal statements to help set the general direction of the Comprehensive Plan Update. The report includes nearly 100 health-related goals, issues and opportunities that provide excellent guidance for supporting community health. Many of these address needs identified during the baseline assessment, and policy gaps and areas for augmentation identified during the policy audit.

The goals, issues and opportunities are divided into six categories 1) where we live, work and shop; 2) our community character; 3) how we get around; 4) our local economy; 5) our parks, services and facilities; and 6) our natural environment. The goals are shown below, and demonstrate the types of policy concepts covered by

the full list. Health impacts the health-related goals, issues and opportunities are summarized in Table 2 on page 36.

Goals for Where We Live, Work and Shop

- 1.2** Provide a variety of housing types that support a high quality of life for current residents and attract new residents to Auburn neighborhoods.
- 1.3** Promote and revitalize Downtown as heart and soul of the Auburn community, with thriving living, arts, culture and entertainment options.
- 1.4** Build on the distinctive character of each neighborhood to create a patchwork of unique places.
- 1.5** Ensure safe, well connected and accessible neighborhoods with healthy food, parks and local services in close proximity.

Goals for Our Unique Character

- 2.2** Continue to embrace and celebrate Auburn's diverse multi-cultural, multi-generational community and continuously strive for inclusive leadership and decision-making.
- 2.4** Enhance the visual quality of Auburn's built environment and rights of way, encouraging attractive, high-quality, environmentally sustainable development and landscape design.

Goals for How We Get Around

- 3.1** Develop an efficient, well-connected transportation system to support a variety of travel modes, including automobile, public transit, walking and biking.
- 3.2** Strive for efficient, well maintained and uncongested streets for travel within Auburn.
- 3.3** Improve the safety, connectivity and quality of the bicycle and pedestrian networks and related facilities.
- 3.4** Create a more walkable environment and pedestrian-friendly streetscapes.
- 3.5** Improve public transit service throughout the City and better connect the City to the region for residents, visitors and businesses.

Goals for Our Local Economy

- 4.1** Activate Downtown as the business core of Auburn while providing needed goods and services to all Auburn neighborhoods.
- 4.2** Protect Auburn's industrial and manufacturing job base while attracting a diversity of new jobs and businesses to the city.
- 4.3** Create a strong local economy that welcomes, encourages and promotes small, independent businesses.

Goals for Our Parks, Services and Facilities

- 5.1** Strive to become a "full service city," with a focus on places, spaces and services that support positive community interaction, community health and safety, and the social and economic sustainability of families.
- 5.2** Expand infrastructure and City services to all neighborhoods, including recently annexed areas.
- 5.3** Maintain Auburn's high quality parks and recreation facilities and ensure accessibility of parks and

facilities to all Auburn residents as the community grows and expands.

- 5.5 Work with neighborhood groups, emergency services staff, law enforcement and community-based organizations to improve community safety and disaster readiness and to prevent crime.

Goals for Our Natural Environment

- 6.1 Maintain a high degree of stewardship for Auburn's natural assets and resources.
- 6.2 Protect, preserve and restore natural habitat and biodiversity, including protected species and their habitats.
- 6.3 Promote stewardship of water resources by improving water quality and encouraging natural stormwater management.
- 6.4 Strengthen community connections to the White and Green rivers.
- 6.5 Create a comprehensive community plan for disaster preparedness and hazard mitigation.

WACAN Building a Healthier Tomorrow Report

The WACAN Building a Healthier Tomorrow report is another source of health policy guidance for the Comprehensive Plan Update. The report includes four recommendations for improving health equity and access in Auburn, which are listed below. The recommendations were based on input from community members on physical activity, access to healthy food and perceptions of safety. The outreach methods used to obtain community input included a survey, interviews and focus groups. WACAN engaged populations in low income zip codes that don't typically interact with government or participate in public meetings, and that are more likely to face health disparities.

Recommendations

- Increase healthy food options, including the number of affordable markets and/ or produce stands that reach all neighborhoods, especially those furthest from the city center.
- Financial incentives and subsidies that target the low-income community in Auburn making it easier to afford fresh produce and other healthy food.
- Increase outreach to immigrant communities to encourage participation in affordable and safe physical activities.
- Improve job quality by demanding an increase in wages and benefits.

Impact Assessment

Studio 3MW conducted an impact assessment of the health policy concepts contained in the Auburn City Staff HIA Team draft goals and policies, the Auburn Community Vision Report and the WACAN Building a Healthier Tomorrow report. The impact assessment reviewed each of the policy concepts against a series of criteria. The criteria included the direction of health impacts each policy concept would have on physical activity, healthy food and community identity and placemaking; whether each policy concept addressed priority health policy needs identified during the HIA process (listed below); and whether each policy concept would have a differential impact a certain population group or groups. Existence of research evidence for policy impacts on health outcomes was also considered (see Appendix H, List of Data Sources & Evidence Cited).

Priority Health Policy Needs Identified during the HIA Process

Physical Activity

Bicycle, Pedestrian and Transit Systems Improve sidewalk connectivity, improve the pedestrian environment, eliminate natural and man-made mobility barriers for pedestrian and bicyclists, improve transit access, improve traffic safety

Parks & Recreation Expand existing programs, increase geographic distribution of parks, increase access to parks

Healthy Food

Healthy Food Sources Increase number of healthy food sources, increase geographic distribution, increase access to healthy food sources

Community Identity and Placemaking

Mixed Use Nodes Increase mixed use areas, increase healthy living resources within walking distance of homes and schools, create walkable communities, co-locate healthy living resources with other destinations.

Safety Improve perceptions of safety, improve traffic safety, reduce crime.

Economic Development Eliminate affordability as a barrier to healthy living, attract new businesses to Auburn, recognize the link between community prosperity and health.

Health & Decision Making Ensure health is a key consideration in decision making, prioritize investments in health focus areas shown in Figure 2 on page 15.

Community Identity and Placemaking Improve sense of place, increase civic engagement, improve neighborhood safety, develop neighborhood plans.

Findings

As shown in Tables 1–3 on the following pages, all of the policy concepts in the Auburn City Staff HIA Team draft goals and policies, the Auburn Community Vision Report and WACAN Building a Healthier Tomorrow report would have a positive impact on health. Studio 3MW recommends that the City incorporate as many of these concepts into the Comprehensive Plan Update process as possible, prioritizing those that have health impacts for multiple policy focus areas, those that address priority health policy needs identified during the HIA,

and those for which there is supporting research evidence. Research evidence is located in Appendix H, List of Data Sources & Evidence Cited.

Table 1 Health Impact Analysis — Draft Goals & Policies by the Auburn City Staff HIA Team

Policy	Keywords	Direction of Health Impacts by Policy Focus Area			Health Needs Addressed	Differential Impact
		Physical Activity	Healthy Food	Community Identity & Placemaking		
G1	Healthy Food	⊥	⊥ ⊥ ⊥	⊥	Healthy Food Sources	NA
P1.1	Healthy Food Sources	⊥	⊥ ⊥ ⊥	⊥	Healthy Food Sources	NA
P1.2	Mixed Use	+	+	+	Healthy Food Sources Mixed Use Nodes	NA
P1.3	Food Around Schools	+	+	+	Healthy Food Sources	Students & Families
P1.4	Healthy Food Programming	NA	+	+	Healthy Food Sources Community Identity &	NA
P1.5	Local Food Economy	NA	⊥ ⊥	⊥ ⊥	Healthy Food Sources	NA
G2	Physical Activity	+	+	+	Bike, Ped & Transit Parks & Recreation	NA
P2.1	Non-Motorized Transportation	+	+	+	Bike, Ped & Transit	Youth Seniors Zero-Car Households
P2.2	Integrated Planning	+	+	+	Bike, Ped & Transit Mixed Use Nodes Health & Decision Making	NA
P2.3	Parks Distribution	⊥ ⊥ ⊥	NA	⊥	Parks & Recreation	NA
P2.4	Parks Access	+	+	+	Parks & Recreation Safety	NA
P2.5	Regional Trails	+	+	+	Bike, Ped & Transit Parks & Recreation	NA
P2.6	School Partnerships	+	+	+	Parks & Recreation	Students & Families
G3	Community Identity & Placemaking	+	+	+	Community Identity & Placemaking	NA
P3.1	Communication	NA	NA	⊥ ⊥ ⊥	Community Identity &	NA
P3.2	Neighborhood Program	NA	NA	+	Community Identity & Placemaking	NA
P3.3	Neighborhood Plans	+	+	+	Community Identity & Placemaking	NA
P3.4	Service Delivery	NA	NA	⊥ ⊥ ⊥	Community Identity &	NA
G4	Health, Key	⊥ ⊥	⊥ ⊥	⊥ ⊥	Health & Decision Making	NA
4.1	Health Disparities	+	+	+	Health & Decision Making	Populations at Greater Risk for Poor Health
4.2	Economic Development	+	+	+	Economic Development	Low Income Populations

4.3	Transit-Dependent Populations	++	++	+	Bike, Ped & Transit	Youth Seniors Zero-Car Households
4.4	Co-location	+-	+-	-	Mixed Use Nodes	NA
4.5	Barriers	++	+	+	Bike, Ped & Transit Safety	Youth Seniors Zero-Car Households

Table 2 Health Impact Analysis — Goals, Issues & Opportunities from the Auburn Community Vision Report

Goal, Issue or Opportunity	Direction of Health Impacts by Policy Focus Area			Health Policy Needs Addressed	Differential Impact
	Physical Activity	Healthy Food	Community Identity & Placemaking		
Community-wide Planning	+++	+++	+++	Health & Decision-making	
Housing	+++	+	+++	Mixed Use Nodes, Affordable Housing, Economic Development	Low income populations, middle class residents, seniors
Downtown	+++	+++	+++		Downtown residents, Auburn Community
Healthy Foods	++	+++	+	Proximity & Access to Affordable Healthy Foods	Low income populations
Retail & Services					
Safety	+++	++	+++	Civic Engagemet, Crime, Safety, Bike, Ped & Transit, Economic	Health Focus Area Populations
Equity & Diversity	NA	NA	+++	Civic Engagemet, Crime, Safety, Economic Development, Civic Engagement, Healthy Food Sources , Bike, Ped	Health Focus Area Populations
Facilities & Services	++	++	+	Economic Development, Healthy Food, Bike, Ped & Transit, Civic Engagement, Parks &	Families, Youth, Seniors
Connectivity & Access	+++	+++	++	Bike, Ped & Transit, Safety, Parks & Trail Access, Walkable	NA
Economy	+	+	+	Economic Development, Employment	Low income populations, Health Focus Area populations
Parks & Recreation	+++	++	+++	Parks & Recreation Access, Access to Nature	
Natural Resources	+	+	++	Environmental Health, Access to Nature	

Table 3 Health Impact Analysis — Recommendations from the WACAN Building a Healthier Tomorrow Report

		Direction of Health Impacts by Policy Focus Area				

Recommendation	Keywords	Physical Activity	Healthy Food	Community Identity and Placemaking	Health Needs Addressed	Differential Impact
1	Healthy Food Distribution	+	+++	+	Healthy Food Sources Mixed Use Nodes	NA
2	Healthy Food Affordability	NA	+++	+	Healthy Food Sources Economic Development	Low Income Populations
3	Outreach, Immigrant Communities, Physical Activity	++	NA	+	Parks & Recreation Community Identity & Placemaking	Immigrant Communities
4	Job Quality	+	+	++	Economic Development Community Identity & Placemaking	Low Income Populations

Additional HIA Recommendations

Studio 3MW recommends that Auburn consider incorporating the following policy concepts into its Comprehensive Plan Update to further strengthen access to opportunities for physical activity, healthy food and fostering a stronger community identity and sense of place. These concepts add detail to provide more specific examples of how the City might implement the more general Auburn City Staff HIA Team policies. These recommended actions would further enhance existing city programs that support health, and are consistent with the guidance provided by the Auburn Community Vision Report.

Recommendations

Physical Activity

Update the City's Bicycle and Pedestrian plan, identifying a complete network, priority routes (including those that connect residential areas with schools, parks and healthy food sources), level of service standards for priority routes, and priority projects for investment including health focus areas.

Develop a stand-alone Parks, Recreation and Open Space (PROS) Plan that includes level of service standards for population-based and geographic distribution of parks, plus projects related to health priorities.

Conduct targeted outreach to populations at greater risk for poor health to promote participation in affordable, safe recreational programming.

Adopt a complete streets policy and standards to guide investments in future street projects and ensure they support multi-modal transportation options and objectives.

Healthy Food

Improve neighborhood safety in and around healthy food sources.

Conduct targeted outreach to populations at greater risk for poor health to promote participation in City programming on food cultivation, nutrition and healthy cooking.

Improve transit, bicycle and pedestrian connectivity between healthy food sources, neighborhoods and employment centers.

Community Identity and Placemaking

Develop small area plans to guide development of mixed use nodes.

Partner with employers to increase the number of living wage jobs with benefits.

Partner with educational institutions to provide professional development opportunities targeted to populations at greater risk for poor health.

Recruit and incentivize transit-oriented development that provides higher-density housing and a mix of uses, in Downtown and along frequent bus routes.

Invest in design improvements and development of community gathering spaces to promote a sense of place and encourage social interaction and community activities (i.e. signage, landscaping, way finding, outdoor furniture, public art).

Develop sub-area plans to implement the Community Placemaking Concept recommendations on the following pages.

Community Placemaking Concept

During Auburn City Staff HIA meetings, the group discussed ideas for developing mixed use centers, nodes and key corridor plans to catalyze investments in community health and a stronger identity and sense of place throughout the City. Studio 3MW developed a Community Placemaking Concept Map (Figure 7) identifying locations of potential mixed use centers and nodes, as well as initial goals, policies and action items to guide development in these areas and in the corridors around them. Six out of the eight total centers and nodes are located in health focus areas. Investing in these areas will benefit community members most vulnerable to poor health outcomes. These centers and nodes would also support addition of retail and services in health focus areas.

Figure 7 Community Placemaking Concept Map

Overarching Goals for Centers and Nodes

- Develop plans for centers and nodes that promote integrated land use and multimodal transportation, to achieve increased physical activity, walkability, visual identity, economic development and mixed use in concentrated activity nodes.
- Redefine the City's economic development corridors to create specific sub-districts with distinct character and features such as increased connectivity and mobility, distinctive streetscapes, mixed land use, local serving businesses and services supported by a vibrant, walkable urban form.
- Define a more viable urban form that integrates new and existing development and retains the viability of existing businesses.

Policies & Action Items for Centers and Nodes

- Define walkable, mixed use activity nodes in North and South Auburn to develop community identity and provide public gathering places, retail and services close to home.
- Narrow the width of the City's economic development corridor land areas to existing commercial uses to create more compact, dense development while preserving existing housing and neighborhoods in adjacent residential areas.
- Identify corridor sub-districts areas, develop vision statements and create sub-area plans for them. Work with local businesses and residents to identify district character.
- Implement the vision for each area with code changes, infrastructure and incentives to improve livability, vibrancy and the investment climate.
- Conduct multimodal traffic corridor analyses to implement district visions and to improve the sense of place, safety, connectivity, service to adjacent land uses and provide for all modes of travel.
- Investigate corridor design, connectivity and land use options to enable lowered speed limits while maintaining reasonable traffic flow on Auburn Way and Harvey Road and identify methods to enable safe, frequent crossings of Auburn Way and Harvey Road.
- Develop a distinctive gateway, streetscape and wayfinding palette that is distinctive to Auburn and add detail that identifies the character of each local district.

Increase overhead and pedestrian street lighting for improved visual quality, safety, and visibility.

Develop City recruitment capacity to attract key uses and businesses to centers and nodes.

Attract and recruit retail and services that support daily life in each district.

Increase access to healthy food near residential neighborhoods by enabling and recruiting healthy food purveyors such as grocery stores, small grocers, farmer's markets and community food gardens to locate in mixed use centers and nodes.

Require pedestrian and vehicular connections between commercial sites to increase connectivity, physical activity, enable shared parking and access management.

Require clear and direct pedestrian circulation from streets to building entrances through parking lots and other areas.

Goals for Downtown

Improve the visual prominence, distinctive qualities and cohesion of the Downtown center.

Visually integrate the east and west sides of Auburn Way with mixed use development, prominent building forms, streetscape improvements and multiple highly visible pedestrian crossings.

Promote east-west pedestrian and bicycle connectivity through downtown, linking destinations on both sides of Auburn Way to the transit center, urban trails, hospital and other key destinations.

Goals for North Auburn

Improve the image and safety of the North Auburn Way Corridor.

Increase connectivity and access between Auburn Way and I Street.

Protect and improve livability of the I Street residential area by improving wayfinding, access to existing parks, recreation and schools, developing a more full complement of retail, services and facilities that support daily life, improving safety and connectivity to transit and Auburn Way.

Increase street lighting in the North Auburn District for safety and visibility.

Policies & Action Items for North Auburn

Develop a North Auburn Way district corridor plan to improve access, crossings, signage, streetscape, landscaping, walkability and access to transit. Improve vehicular, pedestrian and personal safety and reduce crime through a subarea planning process.

Develop neighborhood entry signs, wayfinding and streetscape improvements that distinguish the I Street corridor and connections to its assets.

Develop a mixed use activity node in a central location (such as the Saar's site) by adding retail, services and a public gathering space in underused parking areas. Provide access from both Auburn Way and I Street and facilitate shared parking provisions. Improve pedestrian access with on and off site facilities.

Identify frequent through-block connections between I Street and Auburn Way. Design connections for visibility and safety.

Connect the existing urban trails in the I Street Neighborhood.

Provide a new east-west trail in the Bonneville Power Administration right-of-way.

Develop a neighborhood safety plan by engaging residents to understand safety perceptions and concerns,

identifying potential actions to improve neighborhood safety, and identifying priorities.

Increase connectivity and access between Brannen Park, Cascade Middle School and the Green River Trail. Implement the Safe Routes to Schools program by prioritizing sidewalks on routes to schools and parks.

Develop a joint mini-City Hall, public service center and police station to increase access to public and human services and improve public safety.

Increase physical activity programming at Cascade Middle School and in Brannen Park through collaboration and joint use agreements between the parks department and school district.

Identify a potential location for a second farmer's market in the North Auburn District.

Identify areas in existing parks or on school properties for community gardens.

Goals for South Auburn District

Improve the image and safety of the South Auburn Way Corridor.

Protect and improve the livability of the South Auburn residential area by improving legibility and wayfinding, access to existing parks, recreation and schools, developing a more full complement of retail, services, services, healthy foods and facilities that support daily life, improving safety, connectivity and access to transit and Auburn Way.

Increase street lighting in the South Auburn District for safety and visibility.

Policies & Action Items for South Auburn District

Develop a South Auburn Way district corridor plan to improve access, crossings, signage, streetscape, landscaping, walkability and access to transit. Improve vehicular, pedestrian and personal safety and reduce crime through a subarea planning process.

Develop neighborhood entry signs, wayfinding and streetscape improvements that distinguish the South Auburn Way corridor and connections to its assets.

Develop a mixed-use activity node on the corridor concentrated around Les Gove Community Campus and neighboring opportunity sites.

Connect existing urban trails to the South Auburn district.

Increase connectivity and access between schools and parks in the district and implement the Safe Routes to Schools program by prioritizing the addition of sidewalks on routes to schools and parks.

Improve safe access to school and park properties.

Increase shared use of school and church properties and facilities in the district.

Identify areas in existing parks or on school properties for community gardens.

Implementation & Monitoring

Policies are effective when implementation actions are outlined and executed. The pathway to improved health for the Auburn Comprehensive Plan Update begins with policies. The policies are then implemented through City regulations, programs, and decisions about investments and resource allocation. These actions result in short term changes in the community, which lead to behavioral changes, which lead to improved health outcomes and related benefits in the long term. See Figure 4 below.

Figure 8 Pathway to Improved Health

Figures 5–7 list suggested implementation actions for the policy recommendations included in this HIA for physical activity, healthy food and community identity and placemaking. The figures also include indicators that can be used to monitor outcomes of implementation actions from the short term to the long term.

Implementation Actions²

The implementation actions listed in Figures 9–11 are explained in greater detail below.

Physical Activity

- Increase sidewalk connectivity: identify priority gaps that need to be fixed in order to improve sidewalk connectivity, build sidewalks to fill the gaps.
- Expand bicycle networks: identify priority projects to expand bicycle networks, build bicycle infrastructure.
- Partner with transit providers: identify transit service priorities for connecting transit-dependent Auburn residents with healthy living resources, work with transit providers to provide priority service.
- Update bike/ped plan: incorporate health policy concepts, identify priority routes, level of service standards, and priority projects.
- Adopt complete streets code: develop a draft complete streets code and adopt it.
- Increase distribution of parks: obtain new parkland and develop recreational facilities in underserved areas.
- Partner on regional trails: identify Auburn’s priority projects for regional trail improvements and work with regional partners to achieve them.
- Partner with schools: work with schools to determine opportunities for public use of school facilities for recreational programming.
- Improve neighborhood safety in and around parks: improve pedestrian connectivity and traffic safety, increase police presence, work with neighborhood groups to deter criminal activity.
- Develop PROS Plan: use the parks element of the Comprehensive Plan as a foundation for developing a stand-alone Parks, Recreation and Open Space Plan that identifies level of service standards and priority parks projects.
- Update transportation and land use plans: review and update plans to ensure that they are mutually supporting and that they identify priority projects with multiple benefits.
- Conduct outreach to populations at greater risk for poor health: determine outreach techniques most likely to be successful with populations at greater risk for poor health, conduct outreach to promote

² Note: Implementation actions with numbers in red directly support the Auburn City Staff Team’s draft goal and policy recommendations

participation in affordable, safe recreational programming offered by the City and other community partners.

Healthy Food

- Update zoning code to allow mixed use nodes: update the City's future land use map, zoning map and zoning code to allow for the mixed use nodes and centers shown in the Community Concept Map in Figure X (or other mixed use nodes that provide services within close proximity of residential and employment areas).
- Recruit and incentivize affordable, healthy food retailers: identify health food retailers that the City would like to attract, develop a strategy for recruiting them that includes incentives such as expedited permitting, tax incentives or promotional support.
- Increase distribution of community gardens: identify city properties and work with community groups to identify additional properties in underserved areas that can be used for community gardens, install gardens, promote gardens to local residents.
- Improve neighborhood safety in and around healthy food sources: increase frequency of transit service, improve pedestrian connectivity and traffic safety, increase police presence, work with neighborhood groups to deter criminal activity.
- Improve transit, bicycle and pedestrian access: identify priority transit service improvements and bicycle and pedestrian projects needed to connect healthy food sources, neighborhoods and employment centers.
- Ensure City food and nutrition programming is culturally appropriate, and increase participation opportunities: review programs to determine if changes are needed, update programs if needed.
- Conduct outreach to populations at greater risk for poor health: determine outreach techniques most likely to be successful with populations at greater risk for poor health, conduct outreach to promote participation in food and nutrition programming.

Community Identity and Placemaking

- Include health as a key consideration: work internally to ensure that health is included as a key consideration in City decision making processes about policies, regulations, programs and projects.
- Invest in health focus areas: during decision making processes about where to invest City resources, refer to the health focus areas map shown in Figure X and consider these areas for priority status.
- Recruit healthy living resources to mixed use nodes: identify health living resource providers that the City would like to attract, develop a strategy for recruiting them to mixed use nodes, for instance public private partnerships and ensuring uses are permitted outright in the zoning code.
- Develop small area plans for mixed use nodes: work with local stakeholders to develop visions for mixed use nodes, develop small area plans to guide land use patterns and infrastructure investments, develop guidelines to ensure walkability and support for economic development.
- Develop plans to implement Community Placemaking Concept recommendations described on pages 39-44.
- Recruit and incentivize transit-oriented development (TOD): identify areas in Downtown and along frequent transit routes where there is opportunity for TOD, identify potential TOD developers, develop TOD recruitment strategies that could include public private partnerships and ensuring uses are permitted

outright in the zoning code.

Partner to reduce poverty: work with partners such as employers, government agencies, non-profits, educational institutions and community groups to develop economic development and poverty reduction plans.

Partner with employers: work with existing employers to identify opportunities to increase jobs with livable wages, identify and attract additional employers who offer quality jobs.

Partner with schools: work with school to provide professional development opportunities targeted to populations at greater risk for poor health.

Implement neighborhood program: develop and implement a neighborhood program modeled after the City of Renton's.

Increase remote delivery of City services: identify remote service delivery options likely to be successful in Auburn, conduct pilot programs and evaluate successes and challenges.

Develop neighborhood plans: collaborate with community leaders to develop neighborhood plans to guide land use, infrastructure, economic development and design improvements.

Make design improvements in community spaces: identify design improvements for community gathering spaces that will promote a sense of place and encourage social interaction (i.e. signage, landscaping, way finding, outdoor furniture, public art), consult relevant plans, engage community members in design discussions, make design improvements.

Indicators & Monitoring

It is recommended that adoption of health indicators and a monitoring program be an early implementation action in the Comprehensive Plan Update. The City HIA Staff Team charter and activities could be extended to include periodic monitoring according to specified timeframes.

The indicators shown in the logic models (Figures 5–7) are explained in greater detail below.

Changes in Community

Sidewalk Connections The City could measure sidewalk connectivity by tracking the number of new sidewalk connection projects, or by using GIS tools to measure sidewalk connectivity.

Bike Network The City could measure expansion of the bicycle network by tracking the number of new bicycle projects, or by tracking the miles of new bicycle routes added by new projects.

Transit Service The City could request measures of change in transit service from transit providers, such as number of stops made per day in the City, number of routes serving the City, and number of riders getting on in the City.

Parks The City could measure the number of residents within a certain distance (i.e. 1/4 mile) of parks using GIS tools and data on the location of parks and the City's population.

Traffic Safety Pedestrians and Bicyclists: The City could measure improvements in traffic safety for pedestrians and bicyclists by the number of traffic safety projects, by the number of pedestrian and bicycle accidents, and by opinion surveys.

Healthy, Affordable Food Retailers The City could measure the number of new healthy, affordable food retailers in the City by defining this use and tracking it during permit application processes.

Community Gardens The City could measure the number of residents near community gardens in the same way it measures the number of residents near parks.

Investment The City could measure investment in health focus areas by tracking the number or total amount of public projects in these areas.

Healthy Living Resources The City could measure the number of new healthy living resources in the City in the same way it measures the number of new healthy, affordable food retailers.

TOD Projects The City could measure the number of new TOD projects in the same way it measures the number of new healthy, affordable food retailers. It could also track the number of housing units and new retail spaces created in these projects.

Poverty The City could utilize data from the U.S. Census to track poverty rates.

Design Improvements The City could measure design improvements in community gathering spaces by tracking the number of projects, or the total amount spent.

Actions Implemented For implementation actions that are difficult to quantify (i.e. develop a PROS plan), the City can measure whether or not the action has been implemented, and look to mid-term behavioral indicators for insight into whether the actions have been effective.

Behavioral Changes

Physical Activity The City could utilize health profiles published by Public Health Seattle and King County to track changes in the percent of residents and students who are physically active.

Mode Share The City could utilize Census Transportation Planning Products to track changes in the number of trips made by foot, bike and public transit.

Healthy Food Purchases The City could survey food retailers to determine whether they have experienced increased purchases of healthy food.

Program Participation Rates The City could utilize Parks Department program participation records to determine whether or not more people were participating in health-related programming. Depending on data availability, it might also be possible to track participant age ranges and what part of the City they live in.

Food Cultivation The City could utilize Parks Department program participation records to track the number of people participating in community gardens. The City could also survey residents and ask whether they grow food at home.

Food Preparation The City could survey residents to determine whether they use healthy food preparation techniques at home.

Eating Healthy The City could survey residents to determine whether they eat healthy.

Communication with City The City could conduct an internal departmental survey to determine whether there is increasing or decreasing citizen communication with the City, the City could also survey residents and ask whether they communicate with the City.

Health Outcomes

Healthy Life Expectancy The US Department of Health and Human Services' Healthy People 2020 program offers resources for jurisdictions interested in measuring healthy life expectancy.

Chronic Disease The City could utilize city health profiles published by Public Health Seattle and King County to track changes in the percent of residents with certain chronic diseases.

Evaluation & Reporting

Project Goals

The Auburn HIA was successful in meeting many of the goals developed by the project team during the scoping process. Due to the timing of the HIA process and the Comprehensive Plan Update process, it was not possible to add health-related policies to the Comprehensive Plan. While this was not the original intent, it presented the opportunity to influence policy development before Plan elements were updated. The HIA report provides a picture of Auburn through the health lenses, and highlights community needs and opportunities for improving quality of life that can be used to inform other planning efforts, in addition to the Comprehensive Plan Update. As the first Comprehensive Plan Update HIA in the region, the Auburn HIA provides a replicable model and builds capacity in the region for health planning.

The evaluation of the degree to which the HIA achieved the original goals and objectives identified in the Scoping document is summarized below.

HIA Goals Successfully Completed

- Strengthen and add health-related goals and policies to the Comprehensive Plan.
- Paint a picture of the community to further bring disparities into peoples' awareness.
- Build healthy community planning and HIA capacity in the region; provide leadership for the region.
- Develop foundational umbrella policies which can cascade into other efforts and levels of planning.
- Develop an HIA that is easy for community, staffs, elected officials and planners to implement and understand, using simple language, infographics and other means to communicate.
- Develop communication methods that emphasize improving quality of life rather than community deficiencies.

Degree of Success Unknown at Time of HIA Publication

- Influence policy development and implementation priorities.

HIA Objectives Successfully Completed

- Define the HIA scope for the Auburn Comprehensive Plan Update and identify complete HIA contents & methods.
- Focus on how Comprehensive Plan Update can affect physical activity, healthy food and tobacco prevention outcomes. (tobacco not included in HIA)
- Focus on the built and social environments for most effective health policy intervention and outcomes.

HIA Objectives Partially Successful

- Conduct an inclusive outreach process with methods tailored to diverse communities and locations.
- The extent of inclusive outreach was limited due to HIA timing and resources. However the City Visioning process achieved this goal and had direct influence on the HIA.

HIA Objectives to be completed in Implementation Phase

Focus on partnerships to influence topics, facilities or operations outside of municipal government jurisdiction (such as schools, transit agencies, etc.).

Lessons Learned for HIA Practice

One of the lessons learned from the Auburn HIA was the importance of completing a thorough baseline community health assessment following completion of the scoping phase of the HIA. All remaining steps in the HIA process build upon the findings of this assessment. Planning for ample time to conduct the baseline assessment, including coordination with City Departments to obtain information, helps set an HIA process up for success. This approach also builds health planning capacity within several City Departments and among the individual staff team members.

Other contributions to HIA practice resulting from the Auburn HIA are this report and the interim tools used to develop it, such as those included in the appendices. As the first Comprehensive Plan Update HIA in the region, the Auburn HIA provides a model that can be replicated or modified by interested jurisdictions.

Lastly, the formation of the first multi-departmental staff team provided cross-functional training and team building within the City government. The process built staff capacity and increased understanding of community health issues and ways that local government might influence health.

Reporting & Distribution

The HIA document is advisory to the Comprehensive Plan Update, is intended to be included as an appendix and to be made available on the City's website.

The City of Auburn will distribute the HIA to the City Departments, the Staff HIA team members, community partners and stakeholders who participated in the HIA process and implementation partners including the YMCA, Auburn School District and Valley Medical Center and social service agencies. City staff is responsible for ongoing publication of monitoring and implementation progress.

Seattle Children's, Public Health – Seattle and King County and the consultants will distribute the HIA to professional organizations and make presentations to professional associations and at conferences to share methodologies, lessons learned and implementation progress. The HIA will also be distributed to those who participated in the Visioning process including neighborhood groups, homeowner's associations and others with whom the City has had contact.

Appendices

City of Auburn Comprehensive Plan Update HIA Scoping Report
City of Auburn Community Vision Report
Summary of Community Outreach and Partner Engagement Efforts
Washington Community Action Network Report: Toward a Healthier Tomorrow
Charter for Auburn City Staff HIA Team
Baseline Assessment Technical Memo
Policy Audit Technical Memo
List of Data Sources & Evidence Cited
King County City Health Profile, Auburn
King County Auburn School District Health Profile
Auburn Demographics & Health Data, Tacoma–Pierce County Health Department
Auburn Vision Report: Health Impacts Analysis—Goals, Issues and Opportunities