Concurrently, smaller scale innovations like smartphone-controlled bike locks are starting to emerge, in addition to larger scale advancements like induction-charged buses. These designs will create challenges that agencies and the guidelines did not anticipate. Both Boston and New York conceived of their design guidelines as living, evolving documents that can be updated regularly.

**Takeaways**

As the next version of complete streets comes into focus, one can expect implementation challenges despite public and interagency buy-in. And though complete streets can cost more depending on the proposed features, cities have an obligation to take the long view.

A simple cost-benefit analysis of installing wider sidewalks and street trees might require more upfront capital costs, but this is not a sophisticated way of evaluating complete streets elements. Structural soils might be more expensive, but the operational costs over the long term will be lower as these trees will live longer and yield intangible benefits like shade, beauty, and improved air quality in cities.

Early criticisms, such as retail businesses suffering from lack of adjacent on-street parking or the public being concerned about unmet vehicular needs, have been repeatedly debunked. Streets that attract diverse users are seen as a key to economic revitalization, despite the fact that there will inevitably be some who do not benefit.

Cities have also learned that complete streets are not just about multimodal accommodations. Efforts to “green” the city are necessary complements; Chicago’s Green Alleys program is one example of a city recognizing that better allocation of streets also includes landscape elements.

Walking for Health—in Healthy Communities

*By Jay Walljasper*

IT’S CERTAIN that debates about health care will escalate this year as congressional elections draw near. But there’s a new twist in the discussion that might bring people together: the simple fact that physical activity, especially walking, shows remarkable promise for improving Americans’ overall health and reducing skyrocketing medical costs.

Recent medical studies show that engaging in physical activity for as little as 30 minutes a day can prevent or help treat conditions such as diabetes, breast and colon cancer, depression, dementia, anxiety, osteoporosis, cardiovascular disease, obesity, and high blood pressure.

More will emerge when the U.S. Surgeon General’s office releases a call to action on walking, which some observers compare to the landmark 1964 Surgeon General’s report on the dangers of smoking. The call to action was initiated by former Surgeon General Regina Benjamin, who was so impressed by medical data on walking that she added trails to her health clinic in rural Alabama. The project is being carried forward by interim Surgeon General Boris Lushniak.

This growing attention to the role of walking also focuses on taking steps to make our communities more walkable, which positions city planning as a key element of the solution.

Despite the interest of the surgeon general, the push for walking and walkability is not a top-down effort. A full-fledged walking movement is emerging, which made a high-profile debut at the National Walking Summit held last fall. The event attracted more than 375 participants representing 235 organizations from 41 states and Canada, ranging from the PTA to AARP, the NAACP, the PGA, the American Lung Association, and Marriott Inc. Key groups coordinating the movement include America Walks, a coalition of more than 400 locally based advocacy groups, and Everybody Walk!, a collaborative of organizations convened by the nine-million-member health care nonprofit Kaiser-Permanente.

CONTINUED ON PAGE 32
Tactical urbanism, or temporary, low-cost interventions often achieved through paint and off-the-shelf items, has offered tremendous support to the complete streets movement, though typically not formalized in city guidelines. Helping to alleviate blight or simply improve an average street through temporary measures can have profound positive effects.

Complementary to complete streets goals, but not necessarily under their auspices, advocates and city agencies should recognize and partner where appropriate to create streets that are complete in both conventional and unconventional ways.

Perhaps the greatest takeaway from the first decade of complete streets is that people value choice. Not every street can provide the same level of service for all users, but a true complete street offers choices.

Similarly, complete streets offer designers, planners, and engineers more tools in their toolbox for designing streets; technology is simply accelerating and growing the availability of those options. We’ve already seen how a decade of work can induce change; it’s exciting to speculate what the future will bring.

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Bob Sallis, a family physician from Fontana, California, who spoke at the summit, says, “Walking is like medicine for my patients. . . . If walking was a pill or medical procedure it would be on 60 Minutes.” Side effects, he adds, may include weight loss, improved mood, better sleep, and stronger bones.

Biking, jogging, dancing, swimming, gardening, aerobics, or playing sports will also boost your health, Sallis notes, but walking stands out as the most appealing and easiest exercise for most people. There’s no cost, and it doesn’t require special clothes, equipment, or facilities.

Walking is the nation’s favorite physical activity, according to a Centers for Disease Control and Prevention publication, with six in 10 Americans walking for at least 10 minutes in the previous week. Adults walk six percent more often than in 2005, and walking for transportation accounts for a surprising 11 percent of all daily trips, according to the U.S. Department of Transportation. This includes 35 percent of trips to work, 40 percent to stores, and 46 percent to school or church if these destinations are within one mile of home. These statistics drive home the point that better health is linked to creating more walkable communities.

Still, 52 percent of us don’t get the recommended minimum of 150 minutes of physical activity a week (double that for children), according to the CDC. Rates of inactivity are higher for women, seniors, and residents of the South and Midwest.

The aim of the walking movement is to get Americans back on their feet by encouraging us to make a habit out of taking a morning or evening stroll, walking the kids to school or sports practice, organizing a lunchtime hike with coworkers, or spicing up our weekends with a jaunt around town. But this depends on how safe, comfortable, and convenient it feels to walk in our communities. A host of factors—from vehicle speeds and fear of crime to the prevalence of sidewalks and mixed use developments—affect how often and how long people will walk.