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Public Health
Seattle & King County

Michael Hubner, Long Range Planning Manager
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Sent Via Email

May 6, 2024

RE: Comments on health equity content of the City of Seattle One Seattle Plan

Dear Michael,
Thank you for including our staff on the One Seattle Plan Inter-department Team (IDT) and for advancing a draft plan that responds to a broad array of community needs and ambitions, while addressing a myriad of GMA, regional, and local policy drivers. Since this plan guides City of Seattle's decisions about where to locate housing and jobs and where to invest in transportation, utilities, parks, and other public assets, it will have significant and long-term effects on health and health equity of residents and visitors.

Public Health – Seattle & King County (Public Health) appreciates the plan's attention to transit-focused growth, well-distributed destinations, walker/roller needs, and access to healthy food and open spaces, which help promote the health and wellness of residents and visitors.

While lacking a dedicated health or human services chapter or element, this plan largely realizes a 'Health in All Policy' approach, seeking to distribute health-inducing built environment characteristics more equitably and limiting exposures to harm.

Comments that follow offer additional opportunities to advance community health and promote health equity in Seattle's built environment, and align with the multi-county planning policy (MPP) of Vision 2050:

- **MPP-RC-3** Make reduction of health disparities and improvement of health outcomes across the region a priority when developing and carrying out regional, countywide, and local plans.

Public Health priorities for improvements to this plan, and the focus of our comments, include three primary areas:

1. Elevating health equity as a policy intent.
2. Addressing highway-adjacent health equity and environmental justice concerns.
3. Addressing deficits in access to public toilets, sinks, and drinking water.

1. <u>Elevating health equity as a policy intent.</u>

The One Seattle Plan includes many references to public health as a policy intent, as well as references to Public Health as an agency. Standing alone, the general term 'protect public health' can suggest a universal delivery approach, which may unintentionally steer limited resources away from where needs are greatest. This term will benefit from a companion imperative to 'advance health equity.' **Health equity** is the state in which everyone has a fair and just opportunity to attain their highest level of health.

A health equity focus is operationalized by a targeted universalism approach, targeting efforts and resources to people who and places where needs are furthest from the universal intended outcome. This approach reduces disparate environmental health risks, exposures, and harm while promoting and expanding environmental protective factors like access to healthy food and places to walk, learn, and play: especially where needs are greatest.

We recommend adding '**health equity**' to the **Glossary of Terms** and completing the currently included phrase 'protect public health" with '… and advance health equity' in several policies mentioned in the table of suggested changes at the end of this document.

2. <u>Addressing highway-adjacent health equity and environmental justice concerns.</u>

While the City of Seattle is not a high-capacity transit service provider, it is responsible for rezoning areas around high-capacity transit stops and stations. Unfortunately, many of these areas are adjacent to or are bisected by highways that carry well over 100k vehicles per day.

Sound Transit and Metro have sited high-capacity transit stops and stations adjacent to high volume highway corridors in the City of Seattle (I-5 and I-90), which continually emit harmful pollutants and create health concerns for the sensitive building occupants in adjacent and neighboring parcels. The pollutants are especially harmful for sensitive and overburdened populations, even for short durations, including those in schools, childcares, senior living sites, clinics, and income-restricted housing. The high-volume roadway structures are sources of noise, vibration, and air pollutants that are harmful to human health.[1,2]

While the Land Use chapter policy **LU 13.25** [Develop transitions between industrial areas and adjacent neighborhoods that support healthy communities, reduce adverse environmental impacts, and minimize land use conflicts] addresses ***industrial area*** conflicts, there is not a plan policy to reduce highway-adjacent land use conflicts. This is especially needed given that exhaust from motor vehicles is the main source of outdoor air pollution in most urban areas in the United States.[3]

To address this gap, **LU 1.6** could be updated to specify occupants of concern, highways of concern, and expected distances for incentives:

- **Proposed new Land Use policy – 1.6** Advance environmental justice and health equity by using incentives to sufficiently distance (over 500') sensitive building uses (daycare, school, senior living, clinic, income restricted housing) from air and noise pollution sources, including high volume highways (those with > 80k average daily vehicles), airports, rail yards, freight routes, and industrial facilities, while achieving no net loss of development capacity.

The King County countywide planning policies (CPPs) that support this strengthened environmental justice approach include:

- **CPP EN-25** Prevent, mitigate, and remediate harmful environmental pollutants and hazards, including light, air, noise, soil, and structural hazards, where they have contributed to racialized health or environmental disparities, and increase environmental resiliency in frontline communities.
- **CPP DP-6** Adopt land use and community investment strategies that promote public health and address racially and environmentally disparate health outcomes and promote access to opportunity. Focus on residents with the highest needs in providing and enhancing opportunities for employment, safe and convenient daily physical activity, social connectivity, protection from exposure to harmful substances and environments, and housing in high opportunity areas.

- **CPP T-30** Develop a transportation system that minimizes negative health and environmental impacts to all communities, especially Black, Indigenous, and other People of Color communities and low-income communities, that have been disproportionately affected by transportation decisions.

3. Addressing deficits in access to public toilets, sinks, and drinking water.

Access to hygiene, sanitation, and drinking water is a foundational community amenity that promotes health and human dignity and facilitates equitable access to public spaces. The shortcomings of public toilet access are well documented, [4,5] and the issue was raised by residents as a priority in a participatory budget process.[6]

We recommend addressing the critical deficit in publicly accessible toilets, sinks, and drinking water facilities by adding a new policy in the Capital Facilities chapter, under Goal 3, such as:

- **Proposed new Capital Facilities policy – CF3.12** Reduce disease risk and improve resident, commuter, employee, and visitor experiences in public realms by expanding the times and places that restrooms are available, including extending public access to existing public and private facilities, and expanding a system of public-serving fixed and mobile toilet, sink, and drinking water facilities that have long or continuous operating hours and are prioritized to serve population groups, destinations, and events where needs are greatest.

[1] *https://www.urban.org/sites/default/files/2022-11/The%20Polluted%20Life%20Near%20the%20Highway.pdf*
[2] *https://oehha.ca.gov/air/residential-traffic-studies*
[3] *https://www.transportation.gov/mission/health/cleaner-air*
[4] *https://www.kuow.org/stories/seattle-is-toilet-poor*
[5] *https://www.seattletimes.com/seattle-news/politics/where-to-go-when-nature-calls-seattle-has-a-public-restroom-problem/*
[6] *https://www.seattletimes.com/seattle-news/politics/seattle-participatory-budgeting-allots-27m-to-public-restrooms-other-needs/*

Table 1: Summary of suggested policy improvements related to recommendations.

Reference (existing in draft):	Recommended improvement: in underline
LU 2.7 Encourage the preservation and expansion of the tree canopy throughout the city for the aesthetic, health, and environmental benefits trees provide, considering first the residential and mixed-use areas with the least tree canopy in order to distribute the benefits more equitably to residents.	**LU 2.7** Preserve and expand the tree canopy throughout the city for the aesthetic, health, and environmental benefits trees provide, considering first the residential and mixed-use areas with the least tree canopy in order to distribute the benefits more equitably to residents.
LU 5.3 Avoid setting minimum parking requirements for housing in areas well-served by transit. Consider removing minimum parking requirements for housing in other areas.	**LU 5.3** Eliminate minimum parking requirements for housing in areas well-served by transit. Work toward removing minimum parking requirements for housing in other areas.
LU 12.3 Allow limited nonresidential uses, such as small institutions, corner stores, and at-home businesses, in neighborhood residential areas to support small business development and enhance residents' access to everyday needs.	**LU 12.3** Allow limited nonresidential uses, such as small institutions, corner stores, and at-home businesses, without minimum parking requirements, in neighborhood residential areas to support small business development and enhance residents' access to everyday needs.
Add new GS1.	**GS1** Reduce cumulative environmental burdens to sensitive occupants through use of zoning incentives

	to locate schools, day-cares, clinics, senior living, and income-restricted housing sufficiently distanced from sources of intense or consistent air and/or noise pollution, and/or other emissions.
CE 2.3 Focus and tailor efforts within neighborhoods to reduce vehicle traffic and encourage walking and biking, such as by establishing a zero emission neighborhoods strategy.	**CE 2.3** Focus and tailor efforts within neighborhoods to reduce vehicle traffic and encourage walking and biking, such as by completing Americans with Disabilities Act (ADA) Transition plan projects and establishing a zero emission neighborhoods strategy.
T 3.10 Improve access to transit by supporting first-/last-mile connections, including on-demand shared rides to trunk line stations and improved safety and walking infrastructure connecting to transit stops and stations.	**T 3.10** Improve access to transit by supporting first-/last-mile connections, including on-demand shared rides to trunk line stations and improved safety and walking infrastructure connecting residences and destinations to transit stops and stations.
T 2.16 Develop strategies that prioritize walking, biking, transit, and public spaces on streets over parking.	**T 2.16** Develop strategies and adjust street operations to prioritize walking, biking, transit, and public spaces on streets over parking.
T 6.1 Work toward Seattle's Vision Zero goal to end traffic deaths and serious injuries on city streets by 2030 by focusing on the most effective and equitable ways to reduce harm.	**T 6.1** Work toward Seattle's Vision Zero goal to end traffic deaths and serious injuries on city streets by 2030 by focusing on the most effective and equitable ways to reduce harm, including slowing vehicle travel times, allocating right of way space for walker/rollers and bicyclists, and removing vehicle parking spaces.
T 7.3 Limit freeway capacity expansions intended primarily to accommodate drive-alone users to allow only spot improvements that enhance safety or remove operational constraints in specific locations.	**T 7.3** Eliminate freeway capacity expansions intended primarily to accommodate drive-alone users and allow only spot improvements that enhance safety or remove operational constraints in specific locations.
T 8.6 Focus resources for maintenance and improvements in neighborhoods that have been historically subject to underinvestment or are currently underserved.	**T 8.6** Focus resources for maintenance and improvements in neighborhoods that have been historically subject to underinvestment or are currently underserved, including completing ADA Transition Plan for Right-of-Way (ROW) projects in these areas first.
H 4.5 Remove zoning and building code barriers that prevent the development of comparatively lower-cost forms of housing, particularly in residential neighborhoods with a history of racial exclusion.	**H 4.5** Remove zoning and building code barriers, including minimum parking requirements, that prevent the development of comparatively lower-cost forms of housing, particularly in residential neighborhoods with a history of racial exclusion.
H 3.15 Consider using substantive authority available through the State Environmental Policy Act to require that new development mitigate adverse impacts on housing affordable for lower-income households.	**H 3.15** Consider using substantive authority available through the State Environmental Policy Act to require that new development mitigate adverse impacts on housing affordable for lower-income households, especially when units are located within 500' of a high-volume highway, railyard, airport, port, or industrial facility.
CE 5.2 Incentivize green building certification for new development from third party organizations that align with the City's climate goals.	**CE 5.2** Incentivize green building and health and wellness certifications for new development from third party organizations that align with the City's climate and equity goals.

CF 2.7 Adapt existing capital facilities to be resilient to the impacts of climate change, natural hazards, and human-made disasters.	**CF 2.7** Adapt existing capital facilities to be resilient to the impacts of climate change, natural hazards, and human-made disasters, <u>including features that support sheltering of displaced residents during or following climate and seismic disruptions.</u>
CF 2.8 Promote physical activity in the design of capital facilities through features such as the placement and design of stairs, elevators, and indoor and outdoor spaces.	**CF 2.8** Promote physical activity in the design of capital facilities through features such as the placement and design of stairs, elevators, and indoor and outdoor spaces <u>and inclusion of ample bicycle parking facilities.</u>
CF 6.5 Coordinate pedestrian and bicycle infrastructure to make it easy and safe for students and families to walk, bike, and roll to school.	**CF 6.5** Coordinate pedestrian and bicycle infrastructure <u>and adjust street operations</u> to make it easy and safe for students and families to walk, bike, and roll to school.
Addition and adjustment to **Glossary of Terms** – • ~~**Master plan**~~ **Campus or system plan -** A document that describes the long-term expectations for growth on a large property controlled by a single entity, such as the campus of a college or hospital. *– replace 18 references to 'Master' and 12 references to 'Master plan(s)'. Remove this definition and cease to use this offensive word or phrase in the One Seattle Plan.*	
Places to add "advance health equity" after the phrase "protect public health": • LU 1.3 • LU G4 • LU17.11 • LU 17.2 • T 4 • Water system discussion narrative	

We appreciate the myriad policy innovations built into the draft plan and are grateful for the opportunity to share perspective on further opportunities to better center and advance health and health equity in a final version. As questions arise or if we can help with additional background information on health outcomes today, please reach out to environmental health planner Richard Gelb (Richard.gelb@Kingcounty.gov) for further assistance.

Thank you for your consideration.

Sincerely,

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