



Advocating Walkable Communities for Everyone

Moving Ahead for Progress in the 21st Century (MAP-21): Changes to & Implications for Active Transportation in Federal Transportation Law

*A California WALKS Issue Brief |
Modified from the MAP-21 Working Group of
the Caltrans Active Transportation and Livable Communities (ATLC) Advisory Committee*

MAP-21 changes to previous federal transportation legislation

The new federal surface transportation act, MAP-21 (Moving Ahead for Progress in the 21st Century—a two-year bill commencing October 1, 2012) consolidates the many previous funding categories into a new *Transportation Alternatives* program (§ 1122). This program combines pedestrian and Safe Routes to School (SRTS) projects, along with Recreational Trails (RT) and Transportation Enhancements (TE) programs and is funded at two-thirds the prior levels of the former programs.

The Transportation Alternatives program will fund RT at 2009 levels, and the remaining funds are to be split 50/50 between state and local programming. In California, 93% of the local funds will go to Metropolitan Planning Organizations (MPOs)—such as SCAG, SANDAG, MTC, and SACOG—with regional populations of 200,000 or more. These MPOs were formerly responsible for TE programming. The state's portion of Transportation Alternatives funds may be distributed to local jurisdictions in a competitive grant process. Alternatively, states may choose to shift (or “flex”) this money into other roadway or highway programs under certain conditions, which would drastically reduce current state funding for active transportation projects.

Need for Active Transportation

According to the National Highway Traffic Safety Administration, in 2010 pedestrians and bicyclists suffered 27% of all traffic collision fatalities in California. The national average for traffic collision fatalities suffered by pedestrians and bicyclists in 2010 was 15%.¹ According to California Highway Patrol data for 2009, traffic collisions that year caused 3,076 deaths, 232,777 injuries, 25,328 hospitalizations, and 221,454 emergency department

treatments in our state, with nearly 23% of the deaths suffered by people walking or bicycling.²

There is tremendous need and demand for more funds to support pedestrian safety projects and programs in the state of California (such as the long-delayed local implementation of FHWA's template for a Pedestrian Safety Action Plan), as evidenced by the high number of grant applications for these projects and the statistically troubling injury and fatality data. Moreover, according to the 2009 National Household Travel Survey, 14.8% of trips in California are made on foot or by bicycle. But federal funding for walking and bicycling has amounted to less than 2% of the total surface transportation allocation.



Treatment of Safe Routes to School State Program

California has supported Safe Routes to School projects at \$24.25 million per year with state funds since its own program began in 1999—doubling its support when the federal program was created in 2005. A 2007 state study shows that SRTS programs are effective in their goals of improving safety (up to 49% for each project) and increasing walking and bicycling (from 20% to 200% for projects).³



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Implications of previous California legislation and data

AB 32 (Pavley) committed the state to reducing greenhouse gas (GHG) emissions to 1990 levels by 2020.

40% of GHG emissions in California come from motor vehicles, by far the largest source.⁴ SB 375 (Steinberg) created a new approach to transportation planning emphasizing reduced driving and increased walking and bicycling. One of the most cost-effective ways to encourage less driving and reduce GHG emissions is to facilitate walking and bicycling.

Pedestrians and bicyclists, including a significant number of children going to and from school, suffer a disproportionate share of transportation-related injuries and fatalities in this state. Pedestrians and bicyclists make up a fairly small percentage of overall travelers in California yet approximately one-quarter of traffic collision fatalities are suffered by people walking or bicycling, an unacceptably tragic and avoidable consequence of dangerous roads that bike/ped funding programs address.

A recent American Journal of Public Health study showed that 26% of kids in California are currently walking or bicycling to school, 13% higher than the national average.⁵ This amounts to approximately one million children walking and bicycling to school in California each day thanks to California's early commitment to Safe Routes to School.⁶ Given California's alarmingly high rates of pedestrian and bicyclist injury and death, continued and ultimately increased funding is essential to ensuring that our streets are safe for kids and everyone else to walk and bicycle.

The state and local governments likely will not realize savings by cutting walking and bicycling programs because of the substantial costs associated with transportation-related injury and death in California in terms of emergency response, hospital and outpatient costs, and lost wages and economic productivity. According to CHP data from 2009, total costs due to traffic collisions exceeded \$21 billion dollars in our state that year.⁷

Active transportation (walking, bicycling, and wheeling to destinations) has a direct health benefit, and can reduce the risk of heart disease, improve mental health, lower blood pressure, and reduce the risk of overweight and obesity related chronic disease such as Type 2 Diabetes.⁸

Programs that facilitate safe walking and bicycling increase social interaction and community cohesion and can help reduce crime and increase property values.

Pedestrian, bicycle and SRTS projects create jobs. A recent study showed that active transportation projects create more jobs per dollar spent than do road and highway projects without an active transportation component. For each \$1 million spent, bicycle and pedestrian projects created a total of between 9.5 and 11.4 jobs while road-only projects created 7.8 jobs per \$1 million spent.⁹

With very little school bus funding in California, Safe Routes to School serves the critical need of getting kids to and from school safely, helping to reduce parent driving to and from school and congestion on our over-crowded and aging roads and highways.

A 2007 study funded by the US Centers for Disease Control on preventing chronic disease found that Safe Routes to School projects around the nation have significant public health benefits for young people and the larger community, including adults.¹⁰

¹ National Highway Traffic Safety Administration (NHTSA), "Fatality Analysis Reporting System (FARS) Encyclopedia," 2010. Available at <http://www.fars.nhtsa.dot.gov/Main/index.aspx>

² California Highway Patrol, "2009 Annual Report of Fatal and Injury Motor Vehicle Traffic Collisions Statewide Integrated Traffic Records System (SWITRS)," 2009. Available at <http://www.chp.ca.gov/switrs>. Accessed August 29, 2011.

³ UC Berkeley Traffic Safety Center, "Safe Routes to School, Safety & Mobility Analysis: A Report to the California Legislature," January 2007. Available at http://www.dot.ca.gov/hq/LocalPrograms/saferoutes/documents/SR2S_Final_Report_to_the_Legislature.pdf

⁴ California Air Resources Board (CARB), "Climate Change Scoping Plan," 2008; see also Findings in Senate Bill 375 (2008).

⁵ Chaufan, C., Yeh, J., and Fox, P., "Safe Routes to School Program in California: an Update," American Journal of Public Health 2012.

⁶ California Department of Education.

⁷ *Ibid.* 2

⁸ Frank, L.D., Andresen, M., and Schmid, T., "Obesity Relationships with Community Design, Physical Activity, and Time Spent in Cars," American Journal of Preventive Medicine 27 (2004): 87-96.; see also, National Center for Chronic Disease Prevention and Health Promotion, "Physical Activity and Health: A Report of the Surgeon General," Centers for Disease Control and Prevention, U.S. Department of Health and Human Services 1999. Available at <http://www.cdc.gov/nccdphp/sgr/index.htm>; U.S. Preventive Services Task Force, "Guide to Clinical Preventive Services, 2nd ed." 1996: 611-624; and U.S. Department of Health and Human Services, "Physical Activity Fundamental to Preventing Chronic Disease," 2002. Available at <http://aspe.hhs.gov/health/reports/physicalactivity/>

⁹ Heidi Garrett-Peltier, "Bicycle and Pedestrian Infrastructure: A National Study of Employment Impacts," Political Economy Research Institute 2011. Accessed on July 19, 2012. Available at <http://www.peri.umass.edu/236/hash/64a34bab6a183a2fc06fdc212875a3ad/publication/467>

¹⁰ Watson, M., Dannenberg, AL., "Investment in Safe Routes to School projects: public health benefits for the larger community." Preventing Chronic Disease 2008; 5(3). Accessed July 20, 2012. Available at http://www.cdc.gov/pcd/issues/2008/jul/07_0087.htm.