Perspectives in the built environment have changed dramatically during the past decade. Not just in terms of architectural lines or viewshed, the very purpose of the cities and towns that surround us is being questioned and reevaluated through a lens that asks how the streets, sidewalks and buildings can better serve the people relying on those features every day. Architects, planners, political leaders and residents all are asking themselves, how can the structural makeup of a city contribute to a healthier population, and where do parks and open green spaces fit into that landscape?
Planners in Florida’s Miami-Dade County worked with municipal leaders, health professionals and residents to revitalize Bird Road, a portion of which is seen here. Initially, the thoroughfare lacked identity, was unfriendly to pedestrians and posed safety concerns (inset). Now, improved crosswalks, a network of public plazas and mixed-use development encourages residents to leave the car at home and bike or walk to their destination.
Changing Priorities

“Nearly every aspect of planning and engineering impacts health and well-being,” says Joanna Lombard, professor at the University of Miami School of Architecture. But, priority has not always been put on this perspective. The idea of engineering a city in terms of the health of its residents has been around since approximately the third century B.C., in literature that first outlined the proper purpose and layout of population centers. Interestingly, Lombard adds, the field of planning as separate from architecture began in response to growing concern about public health issues. “By the mid-twentieth century, both professions had massively diverged from considerations of healthy places as human experience became less significant than theories of form, flow and rather linear interpretations of efficiency,” Lombard says. “In architecture this was exemplified by the focus on buildings as isolated objects, and in planning the results can be seen in the extensive system devoted to single uses, such as highways, single-use zoning and all the elements of sprawl that we now understand contribute to ill-health, and mitigate against well-being.”

Then, starting in the early 1980s, researchers began to talk more about nature’s positive impacts, the benefits of exposure to natural daylight and regular social interaction. “[These] had been lost as priorities in architecture and planning, but architects began to increasingly consider issues of health with respect to the environment, as well as the interiors and materials of buildings,” Lombard continues. “Parallel to this movement, public health professionals examined the role of the built environment in health and in particular, chronic disease, and planners began to reevaluate the role of mixed-use and walkability.”

The convergence of all these shifting perspectives created the perfect environment for experimental cross-departmental collaborations, and, sure enough, architecture and planning researchers and practitioners now commonly work across boundaries to find innovative solutions for the built environment.

This evolution was not (and still is not) without its hiccups. In America, the car is still king and convincing public and private funders of the essentiality of bike lanes can still be quite a heavy lift. “Jane Jacobs in 1961 faced down Robert Moses in his campaign to bring the Lower Manhattan Expressway (LOMEX) through Washington Square Park and the West Village [in New York], advising her readers to bring a healthy dose of skepticism to ‘experts,’” Lombard says. “This is important, because Jacobs was decried in schools of architecture and planning and by the leading theorists of the era. She wasn’t a professional; she applied common-sense observations of the realities of human life, and she found the grand theories of the day to be severely lacking, if not dangerous. And now we know quite clearly that she was right. The professionals destroyed the hearts of American cities with highway and ‘urban renewal projects,’ and we are still dealing with the legacy of the idea that life can be neatly separated into uses and purposes without the ‘messy’ overlap of housing above shops, or streets that accommodate cars, bikes, elders, joggers, children and dogs, and correspondingly, methods of evaluation measured in numbers of cars, or miles per hour, and not in terms of lives lived well.”

Lombard distills the shift from engineering the built environment with an emphasis on its structural makeup — what it is — to one prioritizing who it’s intended to serve. “I think we need to put people first, understanding the need to accommodate and nurture the complexity of life, and the responsibility we share to provide an environment that enables and enhances the multi-
tude of daily interactions essential to human, environmental and economic health and well-being,” she says.

It is this standard, of “people-first,” that is increasingly informing how our cities and urban spaces are planned and revitalized. “Providing for the fullness of life gives us a standard to apply when we evaluate whether a particular initiative will be beneficial or harmful to the life of a city, and it can be applied to decisions that range from something as seemingly small as the width of sidewalk, and as large as a regional park system,” Lombard says.

Multiple Uses for Multiple Reasons

“I think the fundamental barrier [to including parks, green spaces and active transportation options in planning and engineering cities] is our tendency to specialize into single-purpose professions focused on single-purpose outcomes,” Bill Anderson, FAICP, principal and vice-president at AECOM, says. He, like Lombard, acknowledges collaboration among planners, architects, landscape architects, municipal leaders and park and recreation professionals is not a wholly new concept. But, similar to the medical profession that in recent decades has splintered into a collection of specialists with few general practitioners, fields dealing with the built environment have likewise become siloed as they grapple with multiple concerns, including health, environmental quality, value creation, economic development and aesthetics. “Now is the time to come back together — the objectives of health and sustainability are just too important to think otherwise,” Anderson says.

If these related groups all can cooperate in the interest of planning the healthiest, most sustainable communities possible, the next question is, what would those communities look like? How can we, as Lombard asks, put people first? Anderson suggests acknowledging that our towns and cities host a multitude of ages and ability levels, all of whom look for convenience and comfort in their day-to-day activities. “Last year the APA [American Planning Association] conducted a national survey of millennials and baby-boomers,” he explains. “A high percentage said they anticipate moving within the next five years, and of them, a high percentage said they wanted to move to a place that is different from where they currently live — one that is more walkable. Other research indicates that the millennial generation likes to live in more walkable, bikeable, mixed-use, compact urban communities…The baby boomers will want access to services and, as they age, not have to drive for every trip. I think more and more people prefer to live in multi-generational communities with a variety of housing types so that if they do move-down, they can stay within the same community. Homes and buildings will have to be more accommodating to people with disabilities as they age as well.”

The thread connecting the scenarios Anderson describes is active transportation, one of the most visible and well-used aspects of a health-conscious built environment. Anderson considers bike lanes and adequate sidewalks as some of the most important and simple additions to improve a city’s health quotient. “I’m amazed how many commercial districts, including higher density mixed-use districts, planned and built in the 70s and 80s have sidewalks that are no wider than in a single-family neighborhood,” Anderson says. “Even if an area is not yet ready for higher density, at least plan and require the right-of-way for wide sidewalks because the developed portion of a parcel will eventually evolve over time. Bike streets that are more than a stripe on the side of a road, as part of a complete street design, will encourage more people to bike. By linking these networks to transit, and making sure they connect to the most important destinations, especially employment centers, schools and commercial districts, communities and cities will become naturally healthy.”

Active transportation’s obvious partner is mixed-use spaces, that is, buildings or economic centers with more than one purpose — shops with residential apartments above them, for example. “The presence of mixed-use destinations is associated with higher levels of walking,” Lombard says. “Living within two minutes’ walking distance of a park increases the likelihood of meeting or exceeding the 10 minutes of walking a day that is considered a health baseline. Connectivity matters. Sidewalks, safe streets, safety in itself, are essential. Conversely, places with few sidewalks, limited access to green space and parks, that require car trips for every destination outside the home, are associated with higher incidences of disease.”

Finally, says David Rouse, AICP, ASLA, managing director of Research and Advisory Services for APA, enhanced connectivity between active transportation nodes and mixed-use development is the cherry on the healthy city sundae. “Walking paths and bike lanes are important, but more important is how these features connect,” he says. “Creating additional parks, bike lanes and sidewalks increases opportunities to engage in health-promoting activities, but it is more important that these features connect to each other or other types of transportation. I would add creating a safe, attractive environment for pedestrians and bicyclists as another important factor.”
With each revitalization effort and land acquisition, city leaders, planners and experts in health and well-being — including the medical community and park and recreation professionals — are bringing this new/old perspective to the table. The places we live, work and play today must encourage healthy behaviors, be attractive and facilitate deeper connections among residents. What follows are two examples of built environments that have embraced healthy living through creative planning solutions, collaboration and innovation.

Los Angeles, California
In 2009, the City of Los Angeles Department of Recreation and Parks (LADRP) completed its citywide Community Needs Assessment, which highlighted some startling deficits within its boundaries. “One of the key findings was that, even though [Los Angeles] had more than 420 parks and facilities and over 16,000 acres of parkland, the city’s park lands and facilities were not equitably distributed and many communities did not have parks located within a reasonable distance,” Darryl Ford, of LADRP’s Planning, Construction and Maintenance Branch, says. “Additionally, the Needs Assessment identified walking and biking trails, small neighborhood parks and fitness facilities as the three most-needed amenities.”

Los Angeles is about as built-out as an American city can be, so Ford and his colleagues had to find a creative way to increase park access and offer additional modes of active transportation for citizens to reach them. Thus, the 50 Parks Initiative was created with the goal of establishing 50 new parks in underserved areas of Los Angeles. When 50 Parks launched, Los Angeles, like many American cities, was in the midst of a severe economic downturn. Ford says city leaders saw the increasing number of abandoned lots and blighted space popping up across the city as opportunities to acquire land and expand park holdings. Not only would this approach increase residents’ exposure to nature and spaces for exercise, it would also help mitigate environmental concerns and raise property values of houses and businesses nearby the new parks.

Because planners and designers were working with small parcels in many cases, Ford said collaboration with neighborhood residents was essential to make sure each park, regardless of its size, would serve their needs. “For each new park site, the city and/or its community partner organizations engaged in a collaborative planning and design process with area stakeholders in order to customize each park to the needs of local residents,” Ford says.

The 50 Parks Initiative serves as a case study for those municipal leaders who might believe their city is too dense to add new parkland. There are always opportunities to increase green space and encourage healthier lifestyles in residents, he says. “The key to identifying those opportunities is to work closely with local stakeholders and residents, as generally they will be most familiar with the needs and challenges in their individual communities.”

Greensburg, Kansas
It’s not just urban spaces that can benefit from training a health-concerned eye on the built environment. Greensburg, Kansas, a very small town of 777 residents, according to the U.S. Census Bureau’s most recent estimates, recently underwent a revitalization project that saw a number of health-related improvements. It should be noted this initiative was made possible in the wake of a devastating 2007 tornado that destroyed some 90 percent of the town. Greensburg had already been struggling in the lead-up to the 2008 economic downturn, losing residents at a fast clip and, thus, working with a diminished tax base. Still, planners, city leaders and residents endeavored to capitalize on the tornado’s devastation by making several health-related improvements to Greensburg’s quaint downtown. Stakeholders established a Sustainable Comprehensive Master Plan that has informed Greensburg’s continued revitalization. “Early in the process, the design team created a maps atlas that documented the existing conditions and opportunities,” says Jim Schuessler, ASLA, director of landscape architecture services for BNIM, which worked on the project. “Within the atlas were city-wide diagrams showing opportunities for connection, road hierarchy, green infrastructure and parks and open space. The Master Plan documented opportunities for future projects [including the goal of creating] a loop trail around the city connecting many of the natural environments, lake and stream corridor to the school, city park and other key community assets.”

BNIM worked with the Greensburg community to develop 12 goals oriented toward making the city socially, economically and environmentally sustainable. “The goals included water, wind, health, built environment and community,” Schuessler says. “Within the built environment goal, the design team was tasked with building a community that encourages interactions between residents, welcomes guests and serves as a model. Thus, there were many health- and wellness-related components to each and every project.”

Greensburg’s Main Street was the logical hub of this process, and Schuessler said particular attention was paid to making sure connectivi-
ty was enhanced throughout the new space. Because the town’s layout centered around a tight core, Schuessler said planners had to be particularly creative regarding the streetscape, as well as attuned to the daily movements of life in Greensburg. Those visiting downtown today will see wide sidewalks, landscaped bumpouts at each corner with seating, mid-block crossings, trees and buildings “built to the sidewalks,” to encourage walkability. For a larger dose of green space, residents need only mosey down to the nearby Kiowa County High School—naturally, it’s within easy walking distance—where a newly designed central courtyard provides respite for the entire community.

Smarter Living
As the saying goes, “A spoonful of sugar helps the medicine go down.” Substitute sugar, in this instance, with “thoughtful engineering,” and you’ve perhaps hit on a fine weapon in our ongoing fight against chronic disease. If our cities are engineered with active transportation and green infrastructure in mind—if the tools for improving our health and well-being are built right into the landscape—won’t that make it easier to adopt healthy behaviors?

Anderson believes it just might, with an ecological benefit to boot. “Planning has had a long relationship with the environmental movement, but we’re now talking about something more fundamental than clean air and clean water,” he says. “Many people are rethinking how we plan our cities and communities to reduce our greenhouse gas emissions through more mobility options, technology, building and community design, and the relationship between land use and transportation. Communities and planners are also responding to the aging of the baby boom generation...It’s not just a tremendous increase in the number of people of retirement age, people are living longer. How we plan our communities so people can age in place, if not their homes, at least their neighborhoods that are familiar with friends and families is an important objective.

“Related, but broader, is planning for healthy communities — designing our communities so people exercise by living their daily lives. Planning communities and destinations that are more accessible by walking and biking, safely and efficiently, along routes that are interesting and enjoyable, is a growing urban design objective. Planning communities where people breathe clean air, drink clean water and have access to healthy food is a growing consideration. Planning and the public health community, as well as allied advocacy organizations, are coming together to create these types of places for the people, not just seniors, but all ages, for healthier outcomes.”

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