Complete Streets
Promote Good Health!

In Moses Lake, Washington, the community has adopted a Healthy Communities Action Plan, in direct response to a 127% increase in the adult obesity rate there. New zoning rules require wider sidewalks and other features that improve accessibility for pedestrians and cyclists.¹

Incomplete streets restrict physical activity

When streets are designed only for cars, they deny people the opportunity to choose more active ways to get around, such as walking and biking. Even where sidewalks exist, large intersections and speeding traffic may make walking unpleasant or even unsafe - discouraging any non-motorized travel.

Obesity in America has reached epidemic proportions in recent years. The latest data show that 32% of adults are obese,² the number of overweight or obese American children nearly tripled between 1980 and 2004.³ Health experts agree that a big factor is inactivity – 55 percent of the U.S. adult population falls short of recommended activity guidelines, and approximately 25 percent report being completely inactive.⁴ Inactivity is a factor in many other diseases, including diabetes, heart disease, and stroke. Incomplete streets mean many people lack opportunities to be active as part of daily life.

Post World War II growth patterns and street designs tend to favor the automobile over walking and bicycling. The health impacts are clear - one study found that, on a daily basis, each additional hour spent driving is associated with a 6% increase in the likelihood of obesity, while each additional kilometer walked is associated with a 5% reduction in this likelihood.⁵
Complete Streets make active living easy

Complete streets provide opportunities for increased physical activity by incorporating features that promote regular walking, cycling and transit use into just about every street. A report prepared by the National Conference of State Legislators found that the most effective policy avenue for encouraging bicycling and walking is incorporating sidewalks and bike lanes into community design — essentially, creating complete streets. The continuous network of safe sidewalks and bikeways provided by a complete streets policy is important for encouraging active travel.

Public health researchers recommend building more sidewalks, improving transit service, and shifting highway funds to create bike lanes to encourage more physical activity. One study found that 43% of people with safe places to walk within 10 minutes of home met recommended activity levels; among those without safe places to walk just 27% met the recommendation. Residents are 65% more likely to walk in a neighborhood with sidewalks.

Walkability has a direct and specific relation to the health of residents. A comprehensive study of walkability has found that people in walkable neighborhoods did about 35-45 more minutes of moderate intensity physical activity per week and were substantially less likely to be overweight or obese than similar people living in low-walkable neighborhoods.

Easy access to transit can also contribute to healthy physical activity. Nearly one third of transit users meet the Surgeon General’s recommendations for minimum daily exercise through their daily travels.

A community with a complete streets policy ensures streets are designed and operated to make it easy for people to get physical activity as part of their daily routine, helping them stay trim, avoid heart disease, and receive the many other benefits of physical activity. DuPage County, Illinois adopted its complete streets policy as a health measure, calling it their “Healthy Streets Initiative” and the Tacoma-Pierce County Board of Health (WA) adopted a resolution urging all Pierce County municipalities adopt and implement Complete Streets policies to promote healthy living.

Footnotes on following page or online at www.completestreets.org/factsheets

www.completestreets.org
The Benefits of Complete Streets

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1 U.S. Center for Disease Control and Prevention, 2006.
6 Teach Robbins, L., Morandi, L Promoting Walking and Biking: the Legislative Role. NCSL, December 2002.
9 Giles-Corti, B., & Donovan, R.J. (2002). The relative influence of individual, social, and physical environment determinants of physical activity. Social Science & Medicine, 54 1793-1812.