



RESEARCH BRIEF

“Safe Streets” for some: Local active transportation responses to COVID-19

Overview

The COVID-19 pandemic significantly disrupted daily travel and physical activity. Stay-at-home orders, street reallocation projects, and other local policies changed active transportation environments. We looked at cities' criteria for creating and locating street closures providing “Safe Streets” or safe, socially distant spaces for people to walk, bike, or roll.

Main Question

Why did cities reallocate physical infrastructure for “Safe Streets,” and what were the location and prioritization criteria?

Did “Safe Streets” cities have different public health messaging or transportation planning processes?

Study

We conducted a content analysis of COVID-related issuances from executive offices and relevant departments in the largest cities in 50 US states and the District of Columbia, including documents issued between March and September 2020. Trained researchers coded more than 600 documents.

Nearly half of cities (47%) encouraged physical activity during the pandemic, and 63% of issuances explicitly permitted outdoor activity. Although 86% of cities encouraged essential trips on public transit, only 24% encouraged active transportation. Of the cities that indicated a need for more physical activity space, 23 created a “Safe Streets” program to address this need. Most cities mentioned a rationale for the programs—to provide space for exercise, alleviate crowding, or provide safe active transportation routes. Some used public feedback to guide placement decisions (35%), and several welcomed public input to adjust initial actions. Geographic equity was a criterion in 35% of programs, and 57% considered inadequately sized infrastructure in decision-making.

The Bottom Line

Within the first six months of the pandemic, fewer than half of states' largest cities created new spaces for physical activity or active transportation. This infrastructure can be a public health tool. Improvements in the built environment can encourage active living.² Several examples highlight community-driven pilot programs that created safe spaces for physical activity and active transportation that other cities can replicate.

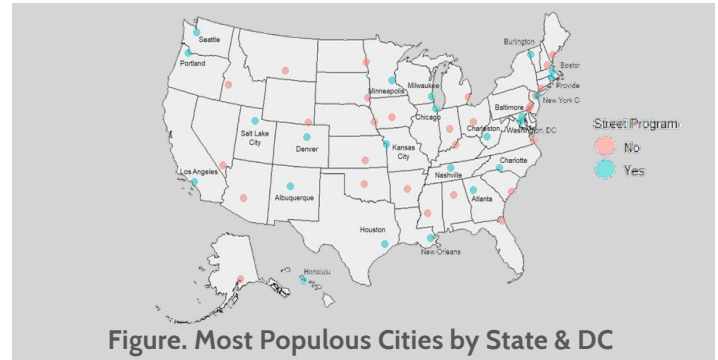


Figure. Most Populous Cities by State & DC

Spotlight on results

- “Safe streets” provided open spaces for exercise (96%), alleviated crowding on existing infrastructure (74%) & provided safe, active transportation routes (74%).
- No city mentioned CDC’s Physical Activity Guidelines, but 61% linked physical activity with its health benefits. In contrast, all cities mentioned CDC’s COVID-19 guidelines, like social distancing.
- Geographic equity was present in a third of safe street programs & two cities relied on bike/ped masterplans in decision-making.
- Seattle, Providence, New York City, Boston, and Salt Lake City made permanent infrastructure changes.

Call to Action

Active transportation infrastructure is a public health tool providing safe physical activity spaces. Most cities recognized the link between physical activity and its health benefits, and some used safe street programs to offer additional spaces for activity and active transportation. Transportation officials can work with public health departments to prioritize equitable access to safe physical activity and transportation infrastructure. Potential public health responses include allocating resources for fast-response pilot programs, strengthening interdepartmental collaboration, action-ready bike/ped masterplans, and fast-tracking active transportation infrastructure.

Source

1. Dean MD et al. 2023. “Safe streets for some: A review of local active transportation responses across the U.S. during the COVID-19 pandemic.” *J. Transport & Health*. DOI: 10.1016/j.jth.2023.101603
2. Hunter RF et al. 2021. “Effect of COVID-19 response policies on walking behavior in US cities.” *Nature Communications* 12:3652.

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