

SAINT PAUL PEDESTRIAN PLAN

Steering Committee Summary 1.31.18

The Saint Paul Pedestrian Plan steering committee met on January 31, 2018. Presentations included an overview of the planning process and a review of existing conditions presented in the memo, "How Saint Paul Supports Walking: Existing Policies and Programs." Both the plan overview and the memo will be posted on the project webpage.

Saint Paul's leadership is committed to advancing equity through this planning process. To create a shared definition of equity and how it relates to walking, steering committee members participated in a facilitated discussion. Steering committee members were asked to discuss how equity should be considered in the pedestrian plan, and what would define an equitable walking network in Saint Paul. Steering committee members divided into four groups, and discussed three questions about walking equity: *What does equity mean when we talk about walking in Saint Paul?*; *What inequities exist in Saint Paul's walking network today?*; and *What outcomes demonstrate success?*. Each groups discussion notes are below. These definitions will be used to create a vision statement and as potential criteria for prioritizing walking that the public can weigh in on via the forthcoming community survey.

What does equity mean when we talk about walking in Saint Paul?

Group 1

- All neighborhoods are equally safe to walk in, regardless of demographic differences
- Equity prioritizes neighborhoods where there are greater challengers (more small kids, elderly)
- It's about more than race- about ability and availability
- Everyone gets some stuff (consistent lighting, crosswalks), though not every neighborhood will look the same and will retain their ow
- Every place is different, but safety needs are met based on different challenges
- Data driven investment versus who calls the most
- What does walking equity look like in Highwood Hills (unpaved streets, no lighting)?
- Community desires versus property owner desires (plus community now versus future community)

Group 2

- Focus on areas with poor health
- Acknowledge inequities (present) and encourage/educate to create better outcomes
- What do affluent neighborhoods have?
- Homeownership
- Analyze share of transportation costs per household (especially in lower-income areas)

Group 3

- Being able to access our city no matter ability
- Uniform infrastructure across all neighborhoods
- Equality of results, not necessarily of inputs (some areas need more)
- Define whose responsibility it is to maintain and build? If it's based on ability to pay or complain, it's not equitable

Group 4

- We don't make infrastructure improvements based on complaints
- Transparent, consistent process for improvements. Obvious and understandable as well (non-English, no jargon, etc.)
- Equal access regardless of ability, location, and driver education
- Efficiency in access (point A to B) is walking as easy as driving?
- How to prioritize clearing ice berms? Proximity to schools, etc.
- Removing barriers- institutional, historic disinvestment, physical, reinvest
- A complete sidewalk network throughout the City of Saint Paul
- Less consideration for individuals/more barriers to opting out

What inequities exist in Saint Paul's walking network today?

Group 1

- Complaint-driven system to get action
- Funding availability
- Sidewalk assessment policy
- Historic/cultural prioritization of cars over other modes. Contextualize this: it took years, decades to get to this point, will take a while to get out
- Certain neighborhoods have more sidewalk gaps than others
- Quality/maintenance of sidewalks vary greatly
- Uneven snow removal for pedestrian infrastructure
- Health is not an amenity! Language is important. "Amenity" makes it sound like "nice to do" rather than "have to do."

Group 2

- Perceptions of safety
- View of maps with "gap" areas
- Pedestrian infrastructure and other influencing factors analyzed with areas of health disparities, ie four-lane roads, crime, speed
- Give people a reason/pathway to walk
- Lighting issues (quality of sidewalks)
- Safety in numbers
- Where are the marked crosswalk?
- Assessment policy
- Sidewalks on both sides of street?
- Weather issues (clothing, etc.)
- We need data (gender, single parent, census data to provide ADA info, cars in home?)
- Ped deficiency rating, e.g. Ramsey County-wide Ped and Bike Plan

Group 3

- Complaint-based system
- Sidewalk gaps and lack of pedestrian amenities in lower income areas
- Engagement and systems not equally available
- Proximity to high v
- Interstate and railroad crossings vary
- Access for disabled residents
- Safety and comfort in walking differs: crime, lights, perception
- When walking is not a choice

Group 4

- Complaint-based system
- We don't have sidewalks where they're needed because cost, adjacent property owners
- Quantity and quality- some areas have sidewalks, but they're inefficient/not ADA compliant, etc.
- Education- who do you go to, how do you contact them? Confidence that your complaint will be addressed (and you won't get deported). Also a lot of people don't know their rights as pedestrians.
- Enforcement- do we want more police/police interactions?
- Policy/policy makers about how they see safety and efficiency (whose responsibility?)
- No jaywalking law, but there is one about obstructing traffic
- Private ownership and business owners' ability to clear their sidewalks
- Sidewalk width – is there a boulevard for snow storage (and lane width)
- Use vs. responsibility (Maryland: major thoroughfare, business owners bear maintenance burden)
- Coordination between city, Ramsey County and MnDOT difficult for residents, policymakers, everyone

What outcomes demonstrate success?

Group 1

- Good understanding of conditions and needs
- Decision-making is clear (flowchart) + communication plan to go along with it
- More people walking and more people surveyed feel safe walking
- Champions for the plan and implementation- policy makers and department leaders
- Culture of walking, bring more people into the tent- public health, business associations, neighborhood groups

Group 2

- Funding
- "Cadillac" model for ALL/baseline
- Survey
- Decrease in health disparities and improved outcomes
- Walking/attending neighborhood schools (rather than "bused out")
- Increasing mode share numbers in walking/biking
- Sidewalk gaps to zero
- Improve quality of sidewalks – ADA compliant
- Look into wider sidewalks
- Business owner incentives

Group 3

- No pedestrian injuries and deaths
- More funding for pedestrian infrastructure
- Cultural shift- sharing roads
 - Drivers
 - Engineers and planners – formalizing outcomes

Group 4

- No pushback on pedestrian infrastructure improvements
- Assumption and expectation is that pedestrian improvements will happen at each road reconstruction etc. and that policy will allow for \$
- Get media on board and build agreement

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- When people stop calling Council offices with sidewalk/crosswalk complaints (they'd know where to go/who to talk to)
- People understand decision-making process
- Information is accessible and understandable regardless of tech, literacy, etc.
- Sidewalk gaps are filled
- More \$

Playground

- Constituents don't care about jurisdiction of streets. Streets need consistent treatment, regardless of city, county, state ownership.
- Minneapolis assessment of sidewalk repair- impact on homeownership versus Saint Paul?
- Maryland Avenue