

# Haddon Avenue: Using Health as a Lens for Improving Transportation Planning

## Background

In December 2014, the Federal Highway Administration (FHWA) selected the Delaware Valley Regional Planning Commission as one of five agencies from across the country to test the Health in Transportation Corridor Planning Framework. The Framework, which was released in early 2016, was intended to assist transportation professionals interested in incorporating public health considerations into corridor-level transportation projects. To test the Framework, DVRPC conducted a corridor study of Haddon Avenue in Camden, New Jersey. The selection of Haddon Avenue was based on a previous planning effort (*Cultivating Camden: The City's Food Economy Strategy*), local Healthy communities efforts, and the corridor's connection to two large hospitals.

In recent years, health equity has become an area of focus in the practice of public health. Health equity involves examining vulnerabilities in a community's social and built environment and identifying how they may impede access to health and improve opportunities such as employment or exercise. Placing a public health lens on the Haddon Avenue corridor provided new insights, not only into the health outcomes of corridor-level transportation projects, but also the correlated impacts on equity. The Haddon Avenue test process and findings brought forth many gaps and bridges that mirrored those identified by Equity Through Access (ETA) constituents, as well as numerous connections to the US Department of Transportation's recent Ladders of Opportunity initiative.

## About the Study Area

The Haddon Avenue study area is approximately two miles long and runs from Martin Luther King Jr. Boulevard in the northwest to Ferry Avenue in the southeast (see Figure 1). Serving both local and regional traffic, Haddon Avenue is an important local connector between downtown Camden and the surrounding suburbs. The corridor is home to two hospitals, which are also two of Camden's biggest employers: Cooper Medical Center and Our Lady of Lourdes Medical Center. Additionally, Haddon Avenue functions as a main street for a number of residential neighborhoods and business communities, providing places for both residents and visitors to shop, eat, and gather.

### Associated Gaps and Bridges:

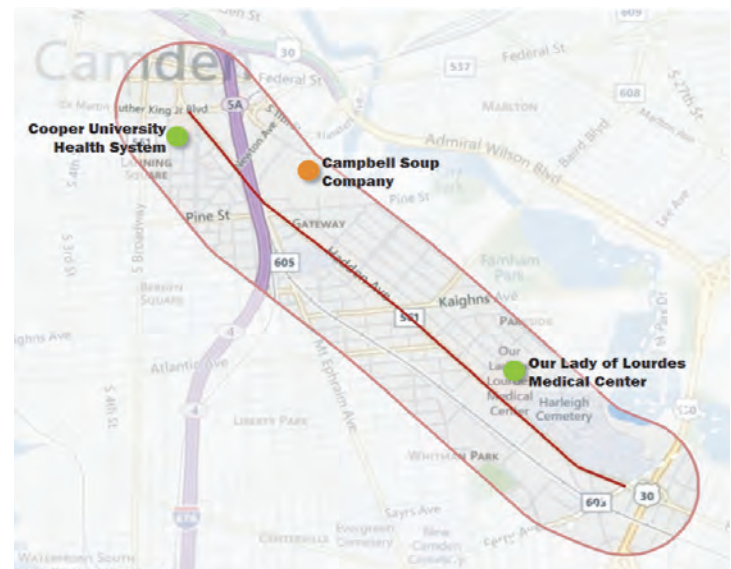
#### Gaps:

- Some ADA-accessible transit vehicles and stops are hindered by inaccessible or nonexistent sidewalk networks.
- Some intersections lack appropriate signals, curb ramps, or marked pedestrian crossings.
- There is a lack of coordination between transit services and land development projects.

#### Bridges:

- Ensure that transit stop locations, connecting pathways, and street crossings are accessible and prioritize improvements where they are not.
- Support Complete Streets, connective sidewalk networks, public restrooms, and places to sit or rest in all communities—especially those with concentrations of vulnerable populations—recognizing that these features often make the difference between being able to safely go out or having to stay home.
- Encourage planning and design efforts that improve the safety and comfort of navigating the transportation system, such as improved lighting, security cameras, staffed transit stations, crosswalks, pedestrian countdown clocks, and traffic-calming treatments, among others.
- Use collaborative community processes to understand end-users' safety concerns.
- Prioritize accessibility improvements at/in:
  - o key transportation hubs and activity centers that serve significant numbers of vulnerable populations;
  - o communities with concentrations of disabled and/or senior populations; and
  - o essential service locations, such as hospitals, medical facilities, and senior centers.

Figure 1. Haddon Avenue Study Area



Source: DVRPC, 2016