

**RESOLUTION NO. 20200507-062**

**WHEREAS**, the COVID-19 pandemic is causing unprecedented physical, mental, and economic harm to the people of Austin; and

**WHEREAS**, vigilant social distancing is our most powerful tool to minimize the transmission of COVID-19 and its associated hospitalizations and deaths; and

**WHEREAS**, analysis by The University of Texas COVID-19 Modeling Consortium indicates that the Austin-Round Rock Metropolitan Statistical Area will be combatting secondary and potentially tertiary waves of COVID-19 transmission for many months to come, during which time social distancing will remain critically important; and

**WHEREAS**, according to the City of Austin Wellness Program, “One of the most important things that we can do during this time is to focus on our mental and physical health. Prioritizing your mental and physical health is key to managing stress and priming your immune system to deal with illness”; and

**WHEREAS**, a growing body of scientific research finds that physical activity improves mental health and well-being, including decreased risk for major depression and anxiety, and that these beneficial effects are even more pronounced for outdoor physical activity than for indoor exercise; and

**WHEREAS**, according to the Austin Transportation Department's Vision Zero Program, vehicular traffic volume has decreased under the Stay Home – Work Safe Order by approximately 50%, but serious injury rates have risen by 20%, suggesting that drivers on Austin's streets are operating their vehicles at higher speeds than usual during the COVID-19 disaster; and

**WHEREAS**, the 2016 Sidewalk Master Plan documented that Austin was missing 2580 miles, or roughly half, of sidewalks citywide, which would require \$1.64 billion to construct, and that 80% of Austin's existing sidewalks were in functionally unacceptable condition; and

**WHEREAS**, Austin ranks 43rd among U.S. cities for access to parkland, and only 59% of Austin residents live within a ten-minute walk of a park, according to the Trust For Public Land's 2019 ParkScore report; and

**WHEREAS**, the pandemic has greatly changed travel patterns in Austin, resulting in dramatically reduced driving and increased walking and bicycling rates; and

**WHEREAS**, Austinites are seeking to prioritize their physical and mental health during the COVID-19 pandemic through active transportation and outdoor exercise close to home, but both necessary social distancing as well as the lack of functional sidewalks are pushing pedestrians, children on bicycles, wheelchair

users, and parents with strollers into traffic lanes, where they are vulnerable to speeding vehicles; and

**WHEREAS**, Austin residents are being discouraged from crowding in parks and on trails but often have few alternatives for safe, socially distanced exercise close to home, further increasing mental and physical stress; and

**WHEREAS**, Austin's park and trail use continue at high levels, elevating the risk of virus transmission where crowding occurs and social distancing breaks down; and

**WHEREAS**, traditionally underserved communities experience disproportionately high levels of obesity, diabetes, and other health challenges that exacerbate the symptoms of COVID-19; limited mobility options to access parks and trails; higher stress due to acute economic challenges and increased childcare burdens; and other factors worsened by the pandemic; and

**WHEREAS**, alongside effective actions taken by other City departments, Austin Transportation Department has already responded swiftly to the current crisis by facilitating safe active transportation through such measures as reallocating street space on South Pleasant Valley Road over the Longhorn Dam and on Riverside Drive between South 1st Street and Lamar Boulevard; and

**WHEREAS**, other cities across the U.S., including Denver, Oakland, San Francisco, New York City, Portland, Kansas City, and Seattle, have implemented,

or are in the process of implementing, “slow streets” initiatives to prioritize certain neighborhood streets for walking and bicycling while still allowing local vehicle traffic; and

**WHEREAS**, because of pandemic-related challenges, cities with slow streets initiatives often have reduced staff capacity and are implementing such programs with only limited resources through process streamlining, temporary/lightweight infrastructure deployment, public volunteer assistance including block captains, and crowdsourced identification of slow street candidates; and

**WHEREAS**, Austin has hosted Ciclovias in the Mueller and Dove Springs neighborhoods and on Congress Avenue to encourage multi-modal transportation and the activation of public space and to achieve the lasting benefits of promoting individual health as well as neighborhood pride and civic engagement; and

**WHEREAS**, the Austin Strategic Mobility Plan and the Congress Avenue Initiative both recommend piloting neighborhood shared streets programs that use traffic calming and streetscape features that enable streets to be converted easily to public use on weekends or during special events; and

**WHEREAS**, in 2019 the City Council initiated a shared streets pilot on Rainey Street in coordination with the Rainey local mobility study with the intent

to create safe and inclusive spaces for both neighbors and visitors; and, **NOW,**  
**THEREFORE,**

**BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF AUSTIN:**

In response to the COVID-19 pandemic, the City Manager is directed to immediately create a slow streets initiative for Austin entitled “Healthy Streets” that will facilitate safe, socially distanced walking, bicycling, and other outdoor exercise and active transportation on neighborhood streets and discourage automobile through-traffic while still allowing local automobile movement.

**BE IT FURTHER RESOLVED:**

In creating and implementing this initiative, the City Manager should:

- Adopt a phased approach, initially designating and deploying a small number of Healthy Streets and regularly and steadily expanding in batches over time, and iterating initiative design based on lessons learned;
- Publicly articulate a goal of miles of Healthy Streets to be created in the initiative’s first batch of streets; after initial rollout and with community feedback, establish mileage goals and timelines for subsequent batches;
- Deploy the first batch of Healthy Streets no later than two weeks from the passage of this resolution;
- For subsequent batches of streets, solicit Council and community ideas for appropriate and desirable locations for additional Healthy Streets;
- Select only non-arterial streets that carry no public transit service to become Healthy Streets;

- Distribute Healthy Streets throughout the city, with a goal to include every Council District as efficiently as possible;
- Ensure the selection of Healthy Streets is responsive to demand for additional outdoor activity space (e.g. adjacent to crowded trails and parks) as well as informed by equity considerations (e.g. lack of walkable park access);
- Seek opportunities to select Healthy Streets that will provide network benefits for improved mobility, but generally prioritize geographic distribution across the city's neighborhoods to ensure as many residents have access to a Healthy Street as possible;
- Provide Council status updates on the Healthy Streets Initiative no less frequently than monthly for the duration of the city's need to maintain social distancing to combat viral transmission; and
- When social distancing is no longer needed in our community, return to Council with recommendations for instituting -long-term investments in "slow streets" programs citywide to prioritize certain neighborhood streets for walking and bicycling while still allowing local vehicular traffic

**BE IT FURTHER RESOLVED:**

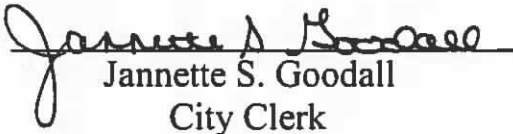
Understanding the strain the COVID-19 pandemic has placed on City staff and other resources, the City Manager is strongly encouraged to consider all available measures to reduce the resource intensity of the Healthy Streets Initiative, including but not limited to:

- Research and adopt best practices from other cities that have already implemented similar "Slow Streets" initiatives;

- Seek a simplified, streamlined, and cost-minimized process for all steps necessary in initiative implementation;
- Leverage engaged community organizations, neighborhood and stakeholder groups, and City Boards and Commissions for rolling input on desirable Healthy Street candidates and, once implementation is underway, to gather community feedback on initiative successes and opportunities for improvement;
- Use temporary and lightweight street infrastructure, such as A-frame signs and cones, to mark off selected Healthy Streets;
- Engage community volunteers to help install this infrastructure and to provide ongoing monitoring as block captains;
- Support the Healthy Streets Initiative with City staff from a variety of departments to the extent staff resource needs and capacity have shifted during COVID-19, including Austin Transportation but also allied departments in this effort such as Public Works, Austin Public Health, Planning and Zoning, and/or Parks and Recreation.

ADOPTED: May 7, 20

ATTEST:

  
Jannette S. Goodall  
City Clerk