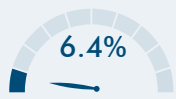# T-18. Provide Pedestrian Network Improvement

GHG Mitigation Potential

6.4% Up to 6.4% of GHG emissions from vehicle travel in the plan/community

Co-Benefits (icon key on pg. 34)

Climate Resilience

Improving pedestrian networks increases accessibility of outdoor spaces, which can provide health benefits and thus improve community resilience. This can also improve connectivity between residents and resources that may be needed in an extreme weather event.

Health and Equity Considerations

Ensure that the improvements also include accessibility features to allow for people of all abilities to use the network safely and conveniently. Ensure that sidewalks connect to nearby community assets, such as schools, retail, and healthcare.

Measure Description

This measure will increase the sidewalk coverage to improve pedestrian access. Providing sidewalks and an enhanced pedestrian network encourages people to walk instead of drive. This mode shift results in a reduction in VMT and GHG emissions.

Subsector

Neighborhood Design

Locational Context

Urban, suburban, rural

Scale of Application

Plan/Community

Implementation Requirements

The GHG reduction of this measure is based on the VMT reduction associated with expansion of sidewalk coverage expansion, which includes not only building of new sidewalks but also improving degraded or substandard sidewalk (e.g., damaged from street tree roots). However, pedestrian network enhancements with non-quantifiable GHG reductions are encouraged to be implemented, as discussed under *Expanded Mitigation Options*.

Cost Considerations

Depending on the improvement, capital and infrastructure costs may be high. However, improvements to the pedestrian network will increase pedestrian activity, which can increase businesses patronage and provide a local economic benefit. The local municipality may achieve cost savings through a reduction of cars on the road leading to lower infrastructure and roadway maintenance costs.

Expanded Mitigation Options

When improving sidewalks, a best practice is to ensure they are contiguous and link externally with existing and planned pedestrian facilities. Barriers to pedestrian access and interconnectivity, such as walls, landscaping buffers, slopes, and unprotected crossings should be minimized. Other best practice features could include high-visibility crosswalks, pedestrian hybrid beacons, and other pedestrian signals, mid-block crossing walks, pedestrian refuge islands, speed tables, bulb-outs (curb extensions), curb ramps, signage, pavement markings, pedestrian-only connections and districts, landscaping, and other improvements to pedestrian safety (see Measure T-35, *Provide Traffic Calming Measures*).

GHG Reduction Formula

$$A = \left(\frac{C}{B} - 1\right) \times D$$

GHG Calculation Variables

ID	Variable	Value	Unit	Source
Output				
A	Percent reduction in GHG emissions from household vehicle travel in plan/community	0–6.4	%	calculated
User Inputs				
B	Existing sidewalk length in study area	[ ]	miles	user input
C	Sidewalk length in study area with measure	[ ]	miles	user input
Constants, Assumptions, and Available Defaults				
D	Elasticity of household VMT with respect to the ratio of sidewalks-to-streets	-0.05	unitless	Frank et al. 2011

Further explanation of key variables:

- (B and C) – Sidewalk length should be measured on both sides of the street. For example, if one 0.5-mile-long street has full sidewalk coverage, the sidewalk length would be 1.0 mile. If there is only sidewalk on one side of the street, the sidewalk length would be 0.5 mile. The recommended study area is 0.6 mile around the pedestrian network improvement. This represents a 6- to 10-minute walking time.

- (D) – A study found that a 0.05 percent decrease in household vehicle travel occurs for every 1 percent increase in the sidewalk-to-street ratio (Frank et al. 2011; Handy et al. 2014).

GHG Calculation Caps or Maximums

Measure Maximum

(A_{max}) The percent reduction in GHG emissions (A) is capped at 3.4 percent, which is based on the following assumptions:

- 35.2 percent of vehicle trips are short trips (2 mile or less, average of 1.29 miles) and thus could easily shift to walking (FHWA 2019).

- 64.8 percent of vehicle trips are longer trips that are unlikely to shift to walking (2 miles or more, average of 10.93 miles) (FHWA 2019).

- So $A_{max} = \frac{35.2\% \times 1.29 \text{ miles}}{64.8\% \times 10.93 \text{ miles}} = 6.4\%$

Subsector Maximum

($\sum A_{max_{T\text{-}18\ through\ T\text{-}22\text{-}C}} \leq 10\%$) This measure is in the Neighborhood Design subsector. This subcategory includes Measures T-18 through T-22-C. The VMT reduction from the combined implementation of all measures within this subsector is capped at 10 percent.

Example GHG Reduction Quantification

The user reduces household VMT by improving the pedestrian network in the study area. In this example, the existing sidewalk length (B) is 9 miles, and the sidewalk length with the measure (C) would be 10 miles. With these conditions, the user would reduce GHG emissions from household VMT within the study area by 0.6 percent.

$$A = \left(\frac{10\ miles}{9\ miles} - 1 \right) \times \text{-0.05} = \text{-0.6\%}$$

Quantified Co-Benefits

Improved Local Air Quality

The percent reduction in GHG emissions (A) would be the same as the percent reduction in NO_X, CO, NO_2, SO_2, and PM. Reductions in ROG emissions can be calculated by multiplying the percent reduction in GHG emissions (A) by an adjustment factor of 87 percent. See *Adjusting VMT Reductions to Emission Reductions* above for further discussion.

Energy and Fuel Savings

The percent reduction in vehicle fuel consumption would be the same as the percent reduction in GHG emissions (A).

VMT Reductions

The percent reduction in household VMT would be the same as the percent reduction in GHG emissions (A).

Improved Public Health

Users are directed to the Integrated Transport and Health Impact Model (ITHIM) (CARB et al. 2020). The ITHIM can quantify the annual change in health outcomes associated with active transportation, including deaths, years of life lost, years of living with disability, and incidence of community and individual disease.

Sources

- California Air Resources Board (CARB), California Department of Public Health (CDPH), and Nicholas Linesch Legacy Fund. 2020. Integrated Transport and Health Impact Model. Available: https://skylab.cdph.ca.gov/HealthyMobilityOptionTool-ITHIM/#Home. Accessed: September 17, 2021.
- Federal Highway Administration (FHWA). 2019. *2017 National Household Travel Survey Popular Vehicle Trip Statistics.* Available: https://nhts.ornl.gov/vehicle-trips. Accessed: January 2021.

- Frank, L., M. Greenwald, S. Kavage, and A. Devlin. 2011. *An Assessment of Urban Form and Pedestrian and Transit Improvements as an Integrated GHG Reduction Strategy*. WSDOT Research Report WA-RD 765.1, Washington State Department of Transportation. April. Available: www.wsdot.wa.gov/research/reports/fullreports/765.1.pdf. Accessed: January 2021.
- Handy, S., S. Glan-Claudia, and M. Boarnet. 2014. *Impacts of Pedestrian Strategies on Passenger Vehicle Use and Greenhouse Gas Emissions: Policy Brief.* September. Available: https://ww2.arb.ca.gov/sites/default/files/2020-06/Impacts_of_Pedestrian_Strategies_on_Passenger_Vehicle_Use_and_Greenhouse_Gas_Emissions_Policy_Brief.pdf. Accessed: January 2021.