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# TRANSPORTATION EQUITY IN THE METRO-QUINCY REGION

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BLUE HILLS COMMUNITY HEALTH ALLIANCE  
(CHNA 20)

# WHO WE ARE

## BLUE HILLS REGIONAL COORDINATING COUNCIL (BHRCC)

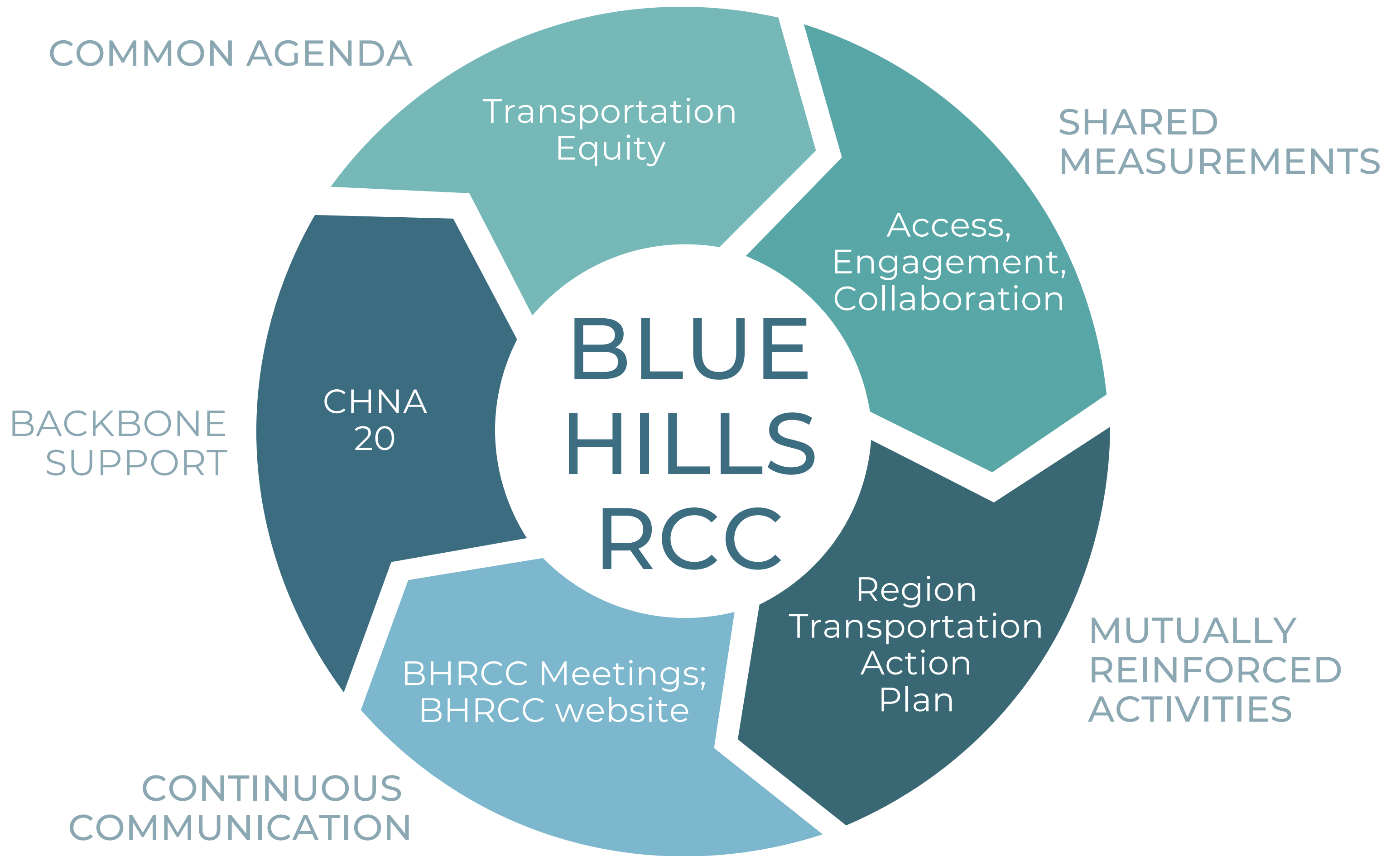
- An initiative of Blue Hills Community Health Alliance (CHNA 20) established in January 2019
- Voluntary group of multi-stakeholders working to address community transportation
- Seek a deeper understanding of the barriers that prevent utilization of existing transportation options, and how those barriers impact older adults' abilities to live full, healthy lives

**BHRCC PARTNERS**



Building hope and changing lives since 1926





# THE ISSUE

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## TRANSPORTATION EQUITY AND ITS IMPACT ON HEALTH OUTCOMES

Access to public transit is a matter of health equity. Transportation is a leading health-related issue for the region, especially for older adults, immigrants and non-English speakers, and people with disabilities. These populations face significant transportation barriers when trying to access health care or other essential services, which lead to poor health outcomes (including chronic disease and behavioral health issues) and increased social isolation.

While local community transit scores suggest adequate or robust transit systems, qualitative data suggests otherwise:



SILOED  
SYSTEMS



CULTURAL/LINGUISTIC  
BARRIERS



WALKABILITY  
CONCERNS



PRICING  
STRUCTURES

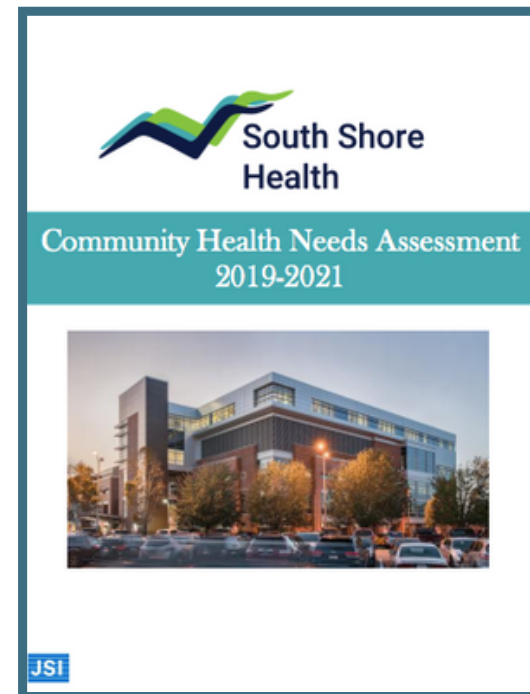


SYSTEM  
NAVIGATION



PROXIMITY, HOURS,  
ROUTE LIMITATIONS

# QUALITATIVE DATA COLLECTION



HOSPITAL  
NEEDS  
ASSESSMENTS

2018 MASSACHUSETTS HEALTHY AGING COMMUNITY PROFILE  
Quincy (Norfolk)

Quincy is a Gateway City located just minutes south of Boston with 14,165 residents aged 65 or older. The latest score suggests that there is excellent transit available (87%). Compared to state averages, older residents have lower rates of osteoarthritis and rheumatoid arthritis, hypertension, heart disease, stroke, and hearing impairment. However, they have higher rates of tooth loss, schizophrenia and other psychotic disorders, substance use disorder, diabetes, chronic obstructive pulmonary disease, ischemic heart disease, congestive heart failure, peripheral vascular disease, lung cancer, colon cancer, ovarian, chronic kidney disease, traumatic brain injury, and autism. They are also less likely to have annual dental exams. Community resources to promote healthy aging include a Council on Aging, YMCA, memory care, and a recreation department. Quincy has been designated both a Dementia-Friendly Community and an Age-Friendly Community.

POPULATION CHARACTERISTICS	BETTER / WORSE STATE AVERAGE	COMMUNITY ESTIMATE	STATE ESTIMATE
Total population all ages		83,349	6,742,143
Population 65 years or older as % of total population		21.0%	21.2%
Total population 65 years or older		17,506	1,428,144
Population 65 years or older as % of total population		15.2%	15.1%
Total population 65 years or older		14,365	1,016,679
% 65-74 years		53.4%	55.3%
% 75-84 years		31.4%	29.4%
% 85 years or older		15.2%	15.2%
Gender (65+ population)			
% female		68.5%	67.2%
Race/Ethnicity (65+ population)			
% White		79.0%	80.0%
% African American		1.2%	4.3%
% Asian		17.0%	3.2%
% Other		1.1%	2.5%
% Hispanic/Latino		0.7%	3.8%
Marital Status (65+ population)			
% married		43.1%	52.5%
% divorced/separated		15.3%	14.0%
% widowed		28.6%	25.5%
% never married		13.0%	8.0%
Education (65+ population)			
% with less than high school education		19.1%	18.5%
% with high school or some college		57.5%	52.6%
% with college degree		23.4%	28.9%
% of 65+ LGBQ* (county)		2.7%	3.2%
% of 65+ population living alone		38.0%	30.2%
% of 65+ population who speak only English at home		71.9%	83.3%
% of 65+ population who are veterans of military service		16.5%	18.8%
Age-adjusted 1-year mortality rate		4.4%	4.2%

Quincy (Norfolk) PAGE 1

MA 2018  
HEALTHY AGING  
PROFILE



MEETINGS &  
OUTREACH  
EVENTS



AFC CONVOS  
AND FOCUS  
GROUPS

# PROJECT OVERVIEW

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The BHRCC has committed to implementing a four-phase project, outlined below.

## PHASE 1

### NEEDS ASSESSMENT

Understand needs and assets related to transportation and accessibility

## PHASE 2

### REGIONAL ACTION PLAN

Identify a set of regional priority outcomes that align with local, regional, and state partners

## PHASE 3

### PILOT PROGRAM IMPLEMENTATION

Design, approve, and roll out pilot programs in Quincy, Randolph, and Weymouth

## PHASE 4

### PROGRAM EXPANSION

Scale existing pilots and best practices in remaining BHRCC communities

**VISIT OUR NEW WEBSITE, [BLUEHILLSRCC.ORG](https://bluehillsrcc.org), TO LEARN MORE!**

# ACTIVITIES TO DATE: PHASE 1

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## AGE-FRIENDLY COMMUNITY CONVERSATIONS

UMass facilitated discussions with stakeholders to understand strengths, weaknesses, and recommendations related to healthy aging.



## RESIDENT FOCUS GROUPS

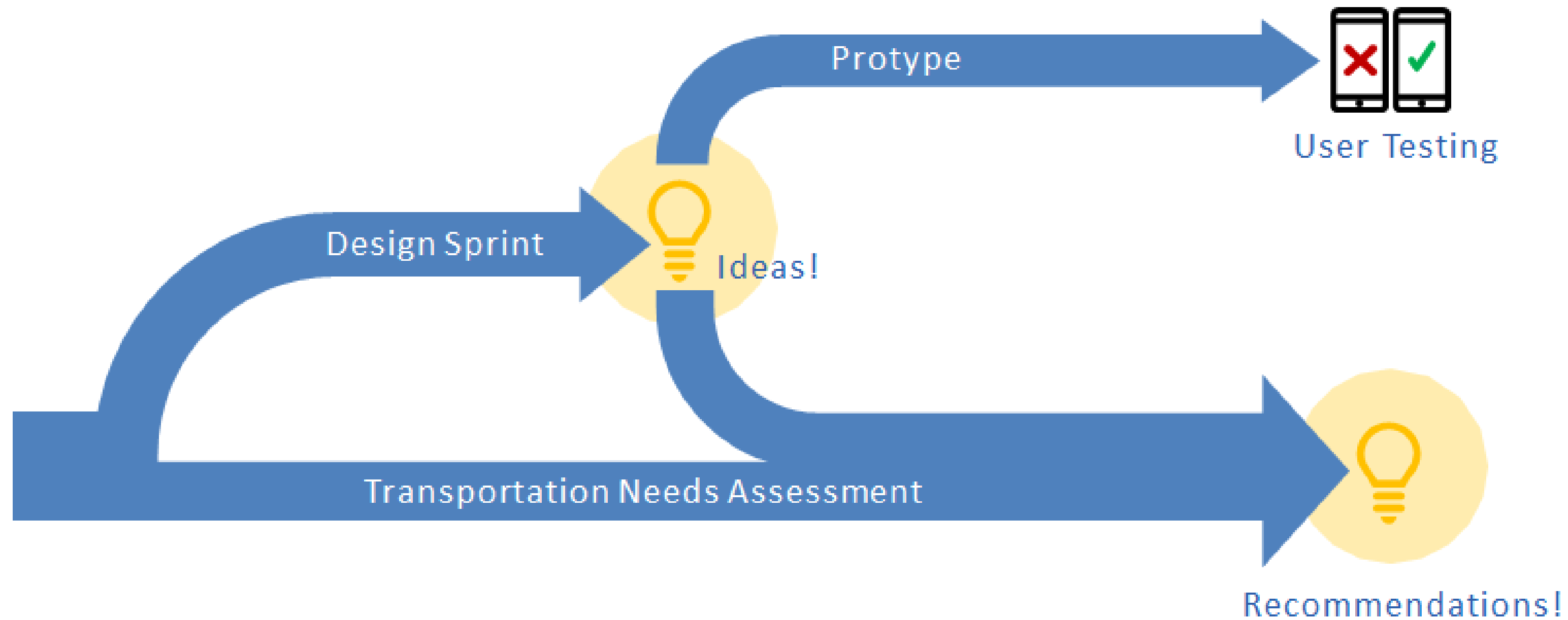
Conducted 10 focus groups to understand transportation-related barriers; unfortunately had to cancel half of the groups due to COVID.



## DESIGN SPRINT

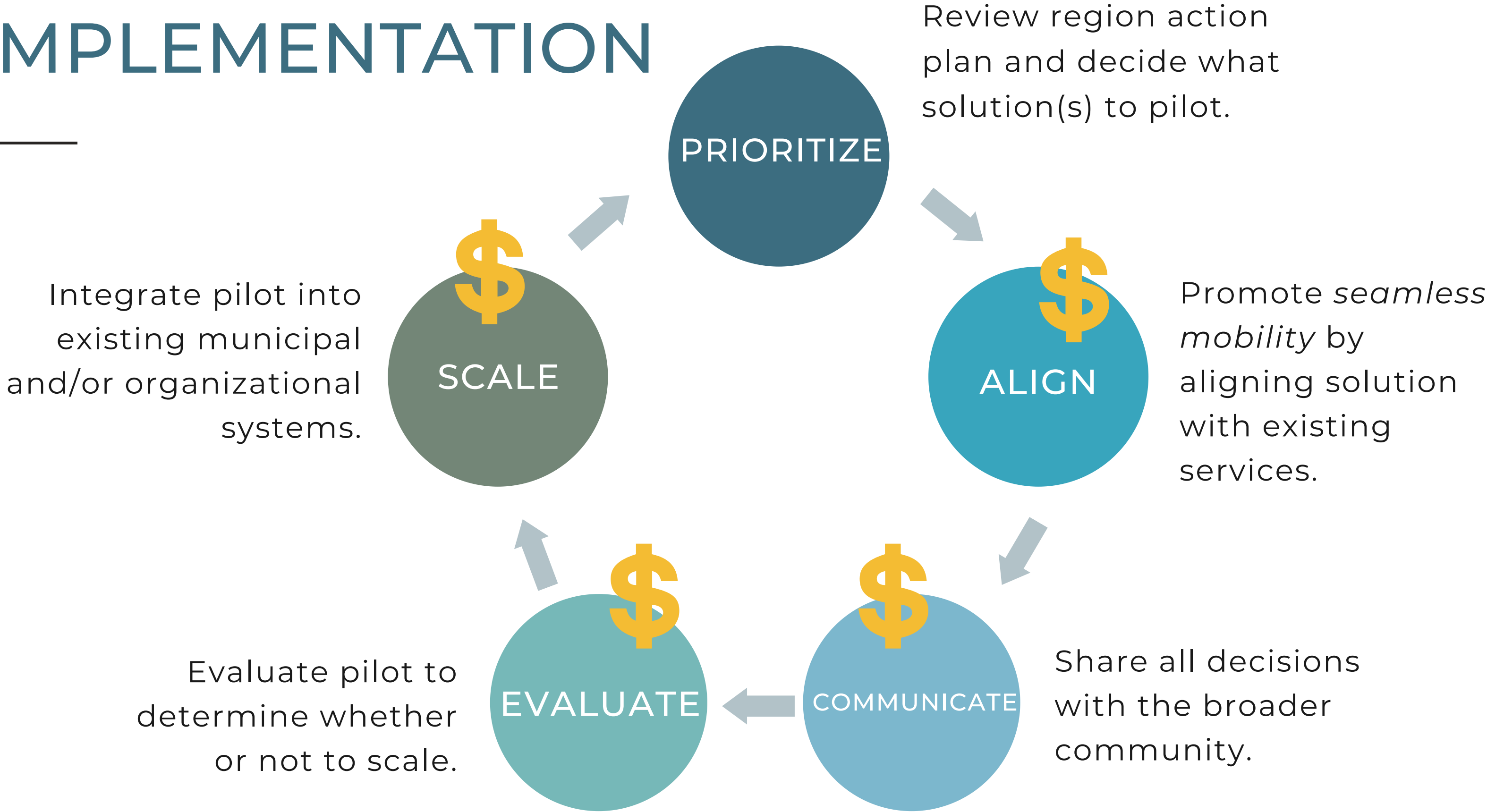
Over a three-day period in Feb 2020, stakeholders designed a prototype to address transportation barriers for residents.

# DESIGN SPRINT: ADDRESSING TRANSPORTATION NEEDS





# PILOT PROGRAM IMPLEMENTATION



# PSE CHANGE APPROACH

While the exact pilot solutions will not be determined until we develop the regional action plan (Phase 3), potential programs include the following:



## ENVIRONMENTAL CHANGE

- Bus Stop improvements
- Bike Lane signage
- Curb cuts
- Benches



## POLICY CHANGE

- Complete Streets
- Snow Removal
- ADA compliance
- Safe Routes to School



## SYSTEMS CHANGE

- Extending public transit hours
- Multi-sector transportation task forces



## PRACTICE CHANGE

- Ride sharing program/contracts
- Volunteer drivers
- Mobility Managers
- MBTA travel training

# ADDRESSING HEALTHY AGING DOMAINS

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## TRANSPORTATION

BHRCC Goal:  
Improve access  
and mobility for  
older adults, and  
awareness of  
existing resources



## SOCIAL PARTICIPATION

BHRCC Goal:  
Reduce senior  
isolation by  
increasing access to  
social opportunities

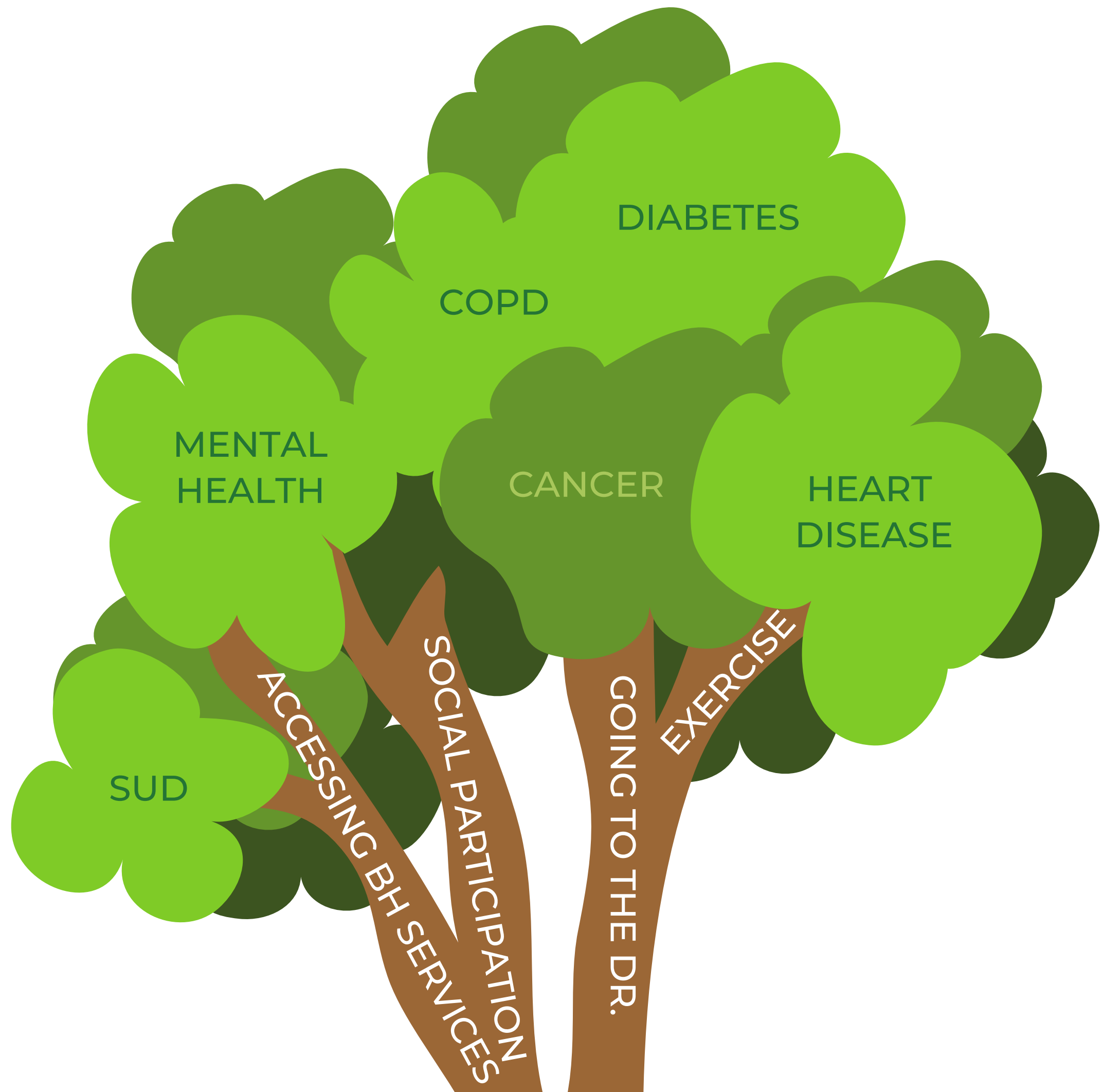


## RESPECT & SOCIAL INCLUSION

BHRCC Goal:  
Older adults are  
empowered to take  
an active role in  
improving their  
communities

# IMPROVING CHRONIC DISEASE AND BEHAVIORAL HEALTH...

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# ... BY ADDRESSING SOCIAL DETERMINANTS

SOCIAL PARTICIPATION & INCLUSION  
(SOCIAL ENVIRONMENT)

ACTIVE  
TRANSPORTATION  
OPTIONS  
(BUILT ENVIRONMENT)

RACISM

POVERTY

STRUCTURAL AND  
INSTITUTIONAL BARRIERS

# STATE ALIGNMENT

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Governor's Council = GC; Community Compact = CC; Mass in Motion = MiM; Boston MPO 2040 = MPO

## INVENTORY OF SERVICES

- Use existing tools (GC #16)
- Create maps from research (CC)
- Review municipal policies (CC)
- Create online database of resources (CC)

## NEEDS ASSESSMENT

- Support age- and dementia-friendly efforts in local municipalities (GC #17)
- Utilize baseline assessments for age-friendly efforts (CC)

## REGIONAL ACTION PLAN

- Cross-sector collaboration (GC #25)
- Convene multi-sector leaders (CC)
- Active transportation planning for municipalities (MiM)
- Transportation equity: prioritize strategies that promote health equity (MPO)

## PILOT SOLUTIONS

- Inclusive programs (GC #13)
- Support older drivers (GC #14)
- PSE change (GC #20)
- Explore TNCs (GC #25)
- Develop snow removal policy (CC)
- Collaborate with local RTAs (CC)
- Improving walkability (MiM)

# MUNICIPAL ALIGNMENT

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## QUINCY'S "AGE-FRIENDLY COMMUNITY" EFFORTS

The BHRCC needs assessment data will be incorporated into the 5-year "age-friendly community" community assessment and action planning process.



## RANDOLPH'S COMMUNITY HEALTH IMPROVEMENT PLAN

BHRCC regional strategies will align with the goals and objectives within the transportation section of the 2019 Randolph CHIP.



## WEYMOUTH'S MASS IN MOTION ACTIVITIES

Pilot solutions will fall under or complement existing Mass in Motion programs, complete streets policy, and/or Better Bus project activities.

# COMMUNITY ENGAGEMENT

Fully engaging older adults goes beyond gathering feedback to having them play an integral role in the priority-setting and decision making processes. One of the goals of the BHRCC is to build older adults' capacity to advocate, organize and lead in these efforts.



## QUALITATIVE DATA COLLECTION METHODS

Resident input-gathering processes are ongoing and linked to decision making.



## COMMUNITY-BASED PARTICIPATORY RESEARCH

Build the capacity of older adults to advocate and help lead research efforts.



## ENHANCED LEADERSHIP ROLES

Older adults are included on BHRCC and other boards and committees



"TRANSPORTATION POLICY IS NOT DEVELOPED IN A VACUUM. MASSDOT IS HAPPY TO PARTNER WITH THE BLUE HILLS RCC TO LEARN ABOUT THE UNMET TRANSPORTATION NEEDS OF RESIDENTS OF QUINCY AND NEIGHBORING MUNICIPALITIES. MASSDOT WILL PROVIDE TECHNICAL ASSISTANCE AND OTHER RESOURCES AS BHRCC STAKEHOLDERS CREATE INNOVATIVE MOBILITY SOLUTIONS FOR A BETTER, HEALTHIER AND ENVIRONMENTALLY FRIENDLY COMMUNITY." (MASSDOT)

"THE WORK OF THE BHRCC WILL HELP US LEARN SO MUCH FROM MARGINALIZED MEMBERS OF OUR COMMUNITY. TRANSPORTATION BARRIERS, BOTH STRUCTURAL AND CULTURAL, CAUSE ISOLATION WITHIN OUR COMMUNITIES THAT WE NEED TO SOLVE SO THAT EVERYONE CAN PARTICIPATE FULLY IN SOCIAL ACTIVITIES AND ACTIVITIES OF DAILY LIVING." (EACH)

# KEY PARTNERS

## MUNICIPAL OFFICIALS

Quincy Planning Dept., Weymouth Health Dept., Randolph Elder Affairs

## TRANSPORTATION EXPERTS

MassMobility, MassDOT, and WalkBoston

## HEALTHCARE ADMINISTRATORS

BID Hospital Milton, South Shore Health

## HUMAN SERVICE AGENCIES

South Shore Elder Services, Enhance Asian Community on Health, etc.

"WEYMOUTH'S PARTICIPATION IN THE BHRCC WILL HELP AUGMENT AND FURTHER REGIONAL PRIORITIES AND BUILD ON THE WHAT WEYMOUTH HAS DONE TO FURTHER ACCESS FOR AGING ADULTS THROUGH BOTH OUR MASS IN MOTION WORK AND OVERALL POLICIES AND PLANNING." (WEYMOUTH HD)

"A DOMINANT THEME FROM BETH ISRAEL DEACONESS HOSPITAL-MILTON'S 2019 COMMUNITY HEALTH NEEDS ASSESSMENT WAS THE TREMENDOUS IMPACT THAT UNDERLYING SOCIAL DETERMINANTS OF HEALTH, SUCH AS TRANSPORTATION, HAS ON AN INDIVIDUAL'S HEALTH AND WELL-BEING. LACK OF ACCESS TO TRANSPORTATION ACTS AS BARRIER FOR INDIVIDUALS, ESPECIALLY THE ELDERLY, IN SEEKING TIMELY HEALTH CARE SERVICES. BY SUPPORTING THE BLUE HILLS RCC WITH THIS IMPORTANT INITIATIVE, WE HOPE TO IMPROVE NOT ONLY ACCESS TO TRANSPORTATION, BUT THE OVERALL HEALTH OF OUR COMMUNITY." (BID MILTON)

THANK YOU!

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