

# Active Living Partnership of Buffalo

Evaluation of Active Living by Design | Buffalo, New York | 2003-2008

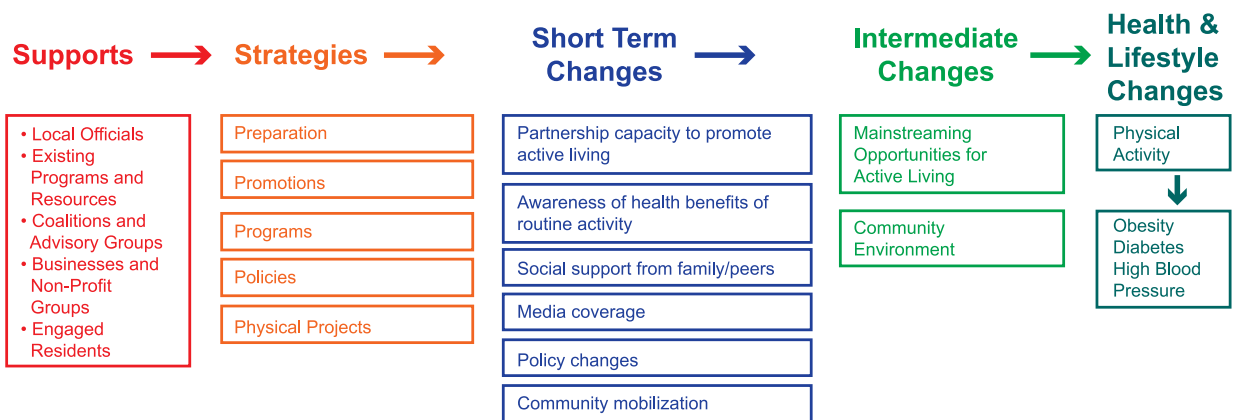
On Wednesdays during the warmer months in Buffalo, New York, a group of employees gathers at lunchtime to take a thirty-minute guided tour through the Buffalo Niagara Medical Campus. The program was designed to promote healthier lifestyle behaviors and to encourage employees to venture out of the medical campus into the adjacent Allentown and Fruit Belt neighborhoods. This opportunity is just one part of a comprehensive effort to turn three distinct and, for the most part, separate neighborhoods into one cohesive, healthy community. The driving force of this movement is active living.

*“Our mission is to build healthy communities and we take the larger definition, the broader definition of healthy that integrates the social, the economic, the environmental, and human capital.” -Partner*

“Active living” is a way of life that integrates physical activity into daily routines in order to accumulate at least 30 minutes of activity each day. In November 2003, the Buffalo Niagara Medical Campus, Inc., received \$200,000 over five years as part of the Active Living by Design national program ([www.activelivingbydesign.org](http://www.activelivingbydesign.org)), funded by the Robert Wood Johnson Foundation. By advocating for changes in community design, specifically land use, transportation, parks, trails, and greenways, the Active Living by Design initiative intended to make it easier for people to be active in their daily routines.<sup>1</sup>

The Active Living by Design Community Action Model provided five active living strategies to influence community change: Preparation, Promotions, Programs, Policies, and Physical Projects. The 5Ps represent a comprehensive approach to increasing physical activity through short-term, intermediate, and long-term community changes. This inclusive model allowed the Buffalo Niagara Medical Campus, Inc., and its Healthy Communities Initiative partnership to create policies and built environment changes supportive of active living and engage three diverse neighborhoods as one united community.

## Active Living by Design Community Action Model



From the start, the Healthy Communities Initiative was clear with its intentions to capitalize on a growing movement to rebuild and revive Buffalo’s urban core by creating a healthy, thriving community, complete with a vibrant culture and economic opportunity. BNMC knew that it could not complete this mission alone and was adamant about bringing together all levels of the community, from block club leaders to local policy-makers.

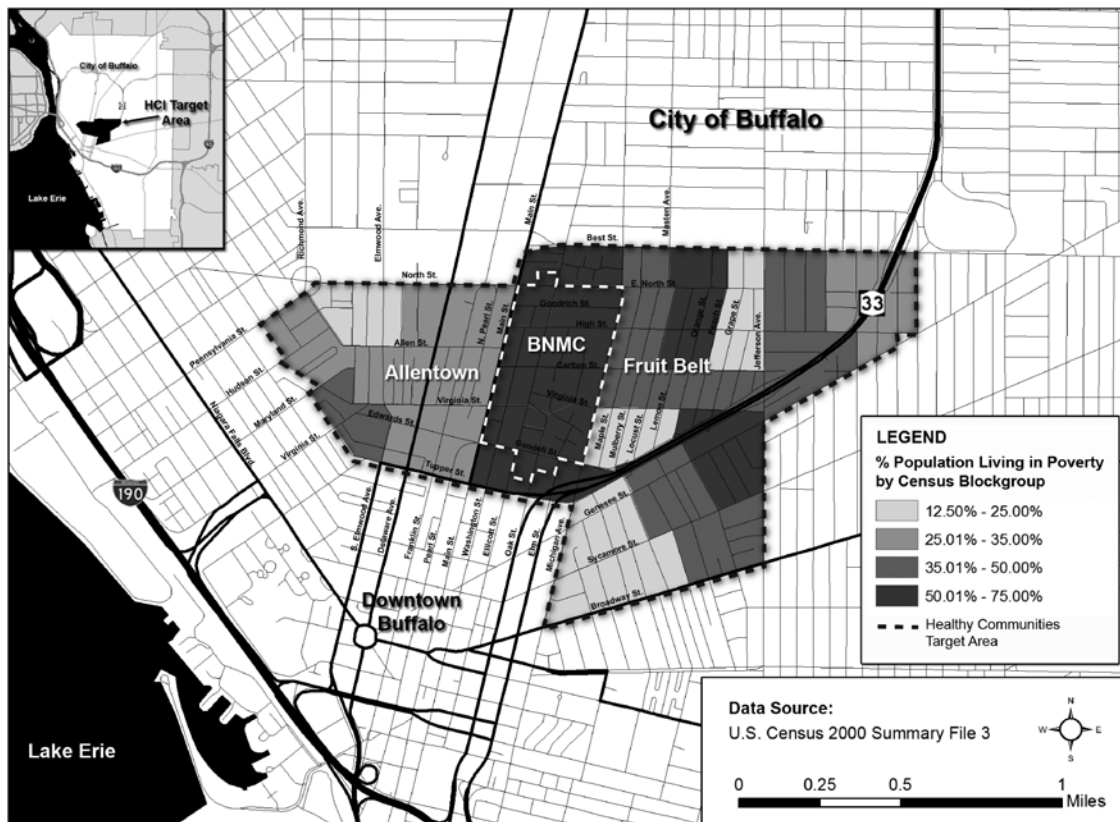
<sup>1</sup> The Active Living by Design (ALbD) initiative was established by the Robert Wood Johnson Foundation (RWJF) in 2001, and its National Program Office (NPO) is part of the University of North Carolina Gillings School of Global Public Health in Chapel Hill, North Carolina. Twenty-five interdisciplinary community partnerships were selected across the country to demonstrate how changing community design can impact physical activity. Transtria was funded by RWJF to work with the NPO to conduct ALbD evaluation and dissemination activities. This case report draws from Transtria’s evaluation efforts.

*“I think what [Active Living by Design] did was break down some walls between neighborhoods that existed in some cases for 100 years. So now, we have people across neighborhood lines working together on common goals. And I don’t think we would’ve been able to do that if it wasn’t for this grant.” -Partner*

Healthy Communities Initiative’s true successes were in its comprehensive and meticulous planning processes. BNMC and its partners excelled in carefully laying down the foundation for sustainable implementation of active living-friendly changes. Partners, community members, and project staff whole-heartedly embraced the principles of active living and strove to reach those goals in their neighborhoods. When the grant began in 2003, building a healthy city was inconceivable. Active Living by Design (ALBD) united these stakeholders with a tangible goal and has begun to produce results. Active living breathed life into a struggling Buffalo community, and the potential generated by the grant is a true story of success.

*“Buffalo started to become a symbol for urban decline... We have great strong neighborhoods, but the city fell on hard times. I think people are realizing that we have assets here to build on and we need to sort of pick ourselves up.” -Partner*

## Buffalo, New York



Buffalo, New York, located along the coast of Lake Erie, formerly stood as one of the nation’s largest and most industrially successful cities, dominated by steel and grain-milling manufacturers. The city was once called the “best planned city” by Frederick L. Olmsted because of its street infrastructure, public spaces, and parks system and boasted a number of architectural and cultural gems. However, the city’s slow reaction to the economic repercussions caused when its industries began to leave resulted in a mass population exodus that left the city’s urban core economically and socially vulnerable.

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*“Buffalo, at the turn of the century, was one of the 5th or 10th largest cities in the country, so there was a lot of growth really fast. As you drive around the city, you can see the architectural legacy that these early entrepreneurs and millionaires left.” -Partner*

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The Healthy Communities Initiative, the ALbD partnership in Buffalo, focused its efforts in three adjacent communities: the Buffalo Niagara Medical Campus (medical campus), Allentown, and Fruit Belt. The 120-acre medical campus district formed when eight health-focused institutions joined to create Buffalo Niagara Medical Campus, Inc., a non-profit charged with cultivating a world-class medical campus. With 8,500 employees, this business district supports a large percentage of the workforce in Buffalo, many of whom live in Allentown and Fruit Belt, which together have nearly 9,000 residents.

Allentown is a national historic preservation district west of the medical campus. While members of this community remain open to improvements, they also take care to preserve their own historic flavor. The neighborhood is mostly residential, but has many flourishing local businesses, such as restaurants and bars and popular historical and cultural institutions. Most of Allentown’s residents are Caucasian (63%), with a small African American representation (24%). Income in Allentown ranges from very high to very low, with 28% living below the poverty level.

The Fruit Belt neighborhood, located to the east of the medical campus, is home to predominately lower income and African American residents. While its recent history included a period of high rates of crime, drug use, and unemployment, the neighborhood’s strong community groups remain committed to moving the neighborhood forward and embracing a new image.

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*“There is a great sense of civic involvement [in Fruit Belt], and some groups are really working hard to pull that neighborhood up from the experiences 30 years ago.” -Partner*

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BNMC and the Health Communities Initiative viewed the ALbD initiative as an opportunity to redefine the medical campus, Allentown, and Fruit Belt as a cohesive, economically thriving and progressively-healthy community, an oasis for active living in the heart of the city. By forming the Healthy Communities Initiative, BNMC sought to build a strong relationship between the medical campus and the two neighborhoods, improve the neglected infrastructure in the area, create an open space network for pedestrians and cyclists, and foster a culture of physical activity and wellness for both residents and employees.

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*“So if [the medical campus is] stronger and vibrant...then...our ability to let that ripple out across the city and into the region is powerful.” -Partner*

*“Our mission is to build healthy communities and we take the larger definition, the broader definition of healthy that integrates the social, the economic, the environmental, and human capital.” -Partner*

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## **Preparation**

### **Partnership**

Buffalo Niagara Medical Campus, Inc. (BNMC), the lead agency for ALbD, is a non-profit organization formed in 2001 by eight healthcare systems, including The Roswell Park Cancer Institute, Kaleida Health Network, Buffalo Medical Group, Hauptman-Woodward Medical Research Institute, University of Buffalo, Buffalo Hearing and Speech Center, Olmstead Center for Visually Impaired, and Upstate New York Transplant Services. Each organization caters to a specific area of practice within the health sector, including research, clinical care, and professional studies. BNMC is committed to maintaining a globally competitive health campus by leveraging or pooling resources to benefit their shared geography and vision. It is led by a board composed of the CEO and board chairperson of each member organization, the Mayor, the county executive, the president of the common council, and representatives from the Fruit Belt and Allentown neighborhoods. In the broadest sense, BNMC aims to create a growing and healthy community.

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*“Our mission is not to be a neighborhood redevelopment corporation... It’s not our job to go in there and build homes and rebuild streets, but what we can do is facilitate. Our role as a facilitator is to bring the parties together, to help identify the resources, and to get attention on what the needs are... We realize that we have to be civically-engaged and be a good neighbor because the medical campus is only going to be successful if it’s got a strong city around it.” -Partner*

*“So, by design, we’re not supposed to become this big bureaucratic organization, but rather we use the expertise and experience that already exists within all these institutions.” -Partner*

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From the start of the ALbD grant, the medical campus recognized the importance of building relationships of trust with Fruit Belt and Allentown residents. The leaders of this initiative took time to attend block club meetings and neighborhood functions. Because there was a history of failed efforts to revitalize these areas, it was imperative for the lead agency to engage the residents as partners. The cooperation and collaboration between the neighborhoods and BNMC created an opportunity for community residents to have a direct impact on shaping their community.

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*“For the first few years, it was like being at block club meetings, community meetings, just always being there, and then inviting these people to participate. So I think it was just being accessible and building relationships with them.” -Partner*

*“We rely so much on partnerships with the community... Nobody knows better than the people that are on the ground at that particular point what’s going on in the community and where the needs are.” -Partner*

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In addition to the eight BNMC member organizations and community residents, the Healthy Communities Initiative sought out a number of community-based organizations, non-profits, businesses, and government agencies to create a diverse partnership.

The Healthy Communities Initiative partnership included three subcommittees: Community Design, Communication and Education, and Public Policy. In addition, each partner was assigned a different and distinct responsibility aligned with his/her specific interests and areas of expertise. With these defined roles, the partners held each other accountable to high standards of value and commitment to this initiative. Initially, the entire partnership met quarterly, with subcommittees meeting as needed. As momentum built for the initiative, the overall partnership cohesiveness was challenged by the differing resource needs and timelines of individual projects. The partnership moved toward a structure with several, independent, project-based committees linked by the Healthy Communities Initiative Project Director, a staff member of BNMC. As projects ended, or tasks were accomplished, some partners chose to take a step back.

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*“And one of the things that I see the biggest lesson I could tell people is to manage people’s roles and expectations appropriately... So it’s establishing that this is a partnership and that we’re going to do this together. We’re going to bring value to what you’re doing and you can bring value to what we’re doing.” -Partner*

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Staff, partners, and community members mentioned a number of strengths of the partnership:

- The partnership's multidisciplinary make-up meant that where one partner had a weakness, another was sure to thrive.
- Partners challenged each other to create comprehensive solutions that were examined from every angle and served to benefit the community as a whole.
- The partnership's strong emphasis on communication kept partners informed of initiative successes.
- The neighborhood representatives in the partnership were the true leaders in their communities.
- Improvements were often small and gradual, but steady growth kept partners and community members engaged and interested.
- The partnership benefited from a statewide push to reduce redundancy of funding. Since the partnership represented a collective array of interests, they were eligible for funds that would not otherwise be available.
- Having access to decision-makers engaged in partnership activities motivated partners to pursue change.

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*“While some of us are practitioners and preachers of the message, some of us also have skills in other areas. So I think our team has been well rounded in that respect” -Partner*

*“We figure [things] out together and I think that’s important. And I’m going to keep pushing you for things and ideas and I hope that you’ll always feel comfortable... That’s what partnership is all about” -Partner*

*“When you’ve got the leadership at the table then it’s easier to try to get support and excitement from other people in the community... We have the leaders in the public sector... We have the major city departments that will actually be able to implement physical change and policy changes... We’ve got the policy makers at the table too.” -Partner*

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Staff, partners, and community members mentioned a number of challenges to working in a partnership:

- Participation in the partnership was project-based at times, which frustrated partners who wanted to create a mission- or vision-based momentum.
- Bringing together three distinct neighborhoods each with distinct demographics, physical needs, and interests was difficult.
- The rapid growth from the medical campus was initially met with much apprehension from its surrounding communities.
- The medical campus felt it needed to constantly strive to prove its sincerity and devotion to creating a healthier community.
- Some partners were perceived by community members to be moving forward without input and consent from residents.
- The partnership was supported by only one paid full-time staff person and may have benefited from additional staff support.

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*“Partners come and go, too. Somebody who might’ve been really engaged has a particular initiative at the time, you know that was what they were really interested in. So once that got accomplished or moved on to something else you know they were not coming to the table as much...” -Partner*

*“One of the challenges is to get these people to understand that they have a common agenda and they can work together on things even though I think early on the perception was that they had nothing in common with one another. “ -Partner*

*“One of the things that the community is looking at is okay how [has BNMC] redefined the map. So I think that a good gesture would be that for the med campus to say hey, we are part of the community, we’re not our own separate entity but we’re part of the same community...the way that we look at it is really there’s no boundaries when it comes to neighbors and neighborhoods.” -Community Member*

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The table below lists the partners involved in the Healthy Communities Initiative partnership.

Members of the Healthy Communities Initiative partnership	
Health	<ul style="list-style-type: none"> <li>• Buffalo Niagara Medical Campus*               <ul style="list-style-type: none"> <li>- The Roswell Park Cancer Institute</li> <li>- Kaleida Health Network</li> <li>- Buffalo Medical Group</li> <li>- Hauptman-Woodward Medical Research Institute</li> <li>- University of Buffalo</li> <li>- Buffalo Hearing and Speech Center</li> <li>- Olmstead Center for Visually Impaired</li> <li>- Upstate New York Transplant Services</li> </ul> </li> <li>• Near East Side Community Health Task Force</li> <li>• Wellness Institute of Greater Buffalo and Western New York</li> </ul>
Urban Design, Planning & Transportation	<ul style="list-style-type: none"> <li>• American Planning Association</li> <li>• Greater Buffalo/Niagara Regional Transportation Council</li> <li>• New York State Department of Transportation</li> <li>• Niagara Frontier Transportation Agency</li> <li>• State University of New York Department of Urban Planning</li> <li>• University of Buffalo , State University of New York, Department of Urban and Regional Planning</li> </ul>
Community Leaders, Policy- & Decision-makers	<ul style="list-style-type: none"> <li>• Mayor of Buffalo</li> <li>• Erie County – County Executive</li> </ul>
Other Government	<ul style="list-style-type: none"> <li>• City of Buffalo               <ul style="list-style-type: none"> <li>- Department of Public Works</li> <li>- Graffiti Task Force</li> <li>- Office of Strategic Planning</li> <li>- Police Department</li> </ul> </li> </ul>
Advocacy	<ul style="list-style-type: none"> <li>• Community Action Organization</li> <li>• Erie County Physical Activity Coalition</li> <li>• Fruit Belt United</li> <li>• Green Options Buffalo</li> <li>• New York State Physical Activity Coalition</li> </ul>
Business	<ul style="list-style-type: none"> <li>• National Grid</li> </ul>
Media	<ul style="list-style-type: none"> <li>• Western New York Public Broadcasting</li> </ul>
Community & Faith-based	<ul style="list-style-type: none"> <li>• Allentown Association</li> <li>• Allentown Residents</li> <li>• ArtWalk</li> <li>• Buffalo Place</li> <li>• Fruit Belt Residents</li> <li>• St. John’s Baptist Church</li> </ul>

\*Organization that served as lead agency during the ALbD grant period

## **Leadership and Champions**

The Healthy Communities Initiative Project Director, hired by BNMC in the first year of the grant, was responsible for implementing the work plan, pursuing funding opportunities, and keeping partners informed and engaged. His interest in bridging the gap between public health and urban planning was a natural fit for the partnership's goals. During the grant period, his time spent specifically on executing the ALbD work plan decreased from 75% to 25%, as the medical campus incorporated the tenets of active living into its mission statement and development activities.

The partnership benefited from having the same individual serve as Project Director throughout the five-year grant. Staff, partners, and community members described the Project Director as a champion of active living, identifying him as the driving force and leader behind the partnership and its mission for building a united and healthy community. He believed whole heartedly in active living and dedicated much time and energy to creating a better Buffalo. Both the community and partnership trusted and looked to him for leadership and competency.

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*“[He] took what was a vision and really implemented it and really kept everybody involved.” -Partner*

*“I think he’s very patient and kind and smart and also believes in [active living]. And he’s credible.” -Partner*

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## **Funding and Resources**

One of the main goals for the Healthy Communities Initiative partnership was to educate and engage funders to generate investments and budgetary commitments to support active living. Staff and partners developed convincing and detailed presentations that included local assessment data, specific infrastructure recommendations, and associated costs. In the process of pitching these initiatives to a wide variety of audiences, the lead agency was careful to frame what it was asking in a way that would be attractive to the funder it wanted to involve.

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*“It came down to engaging the right people and clearly explaining what it was you [were] ask[ing]... educating them on what the needs were and what we were trying to do... keeping these people involved the whole time. You can’t meet with somebody once and then expect them to come through. It’s constant engagement.” -Partner*

*“Unfortunately health is not the main criteria [for some funders], so you can’t say we’re trying to build a healthier environment but... here’s how [health] relate[s] to the transportation network. Understand what the message needs to be depending on who the funding source is....” -Partner*

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The Healthy Communities Initiative partnership also held annual Resource Identification Workshops to identify funding opportunities and resources that could be used to implement physical projects. The partnership successfully leveraged the initial \$200,000 ALbD grant to secure nearly \$20 million in public and private funds to support active living.

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*“It’s been amazing what we’ve been able to do in terms of leveraging that investment from the RWJF.” –Staff*

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The Healthy Communities Initiative secured funding and in-kind resources to support its ALbD work plan from the following sources:

- Community fundraisers
- Congestion Mitigation and Air Quality Improvement (CMAQ) Program
- Federal Highway Administration Transportation Funds
- Kaleida Health
- National Grid
- New York State Funds
- John R. Oishei Foundation
- Robert Wood Johnson Foundation
- Roswell Park Cancer Institute
- Safe Accountable Flexible Efficient Transportation Act: A Legacy for Users
- Wellness Works

After identifying potential funders, the partnership employed a number of strategies to keep them engaged and interested. The Healthy Communities Initiative and the medical campus celebrated their small successes as well as big ones. Staff and partners found that funders were willing to continue their support if the initiative consistently demonstrated tangible progress and growth.

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*“[Funders] need to be in this for the long haul, [they] can’t throw a little bit of money at something and expect it [to] succeed or grow. This is a long-term commitment.” -Partner*

*“Consistently being able to demonstrate success and that [the Healthy Communities Initiative] is a long-term relationship and that it’s having an impact on the community... I don’t think that these foundations would do this if it was solely going to benefit the institutions.” -Partner*

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### **Community Supports and Challenges**

Prior to the ALbD grant, a number of community organizations worked to improve quality of life in Buffalo and the Fruit Belt and Allentown neighborhoods. Some of these groups became members of the Healthy Communities Initiative partnership (i.e., Allentown Association, St John’s Baptist Church, Fruit Belt United, Community Action Organization). Others continued to operate independently (e.g., Locus Street Art Classes, Teen Challenge, Friendly Fruit Belt Block Club Association). These groups advocated on behalf of residents’ interests and represented a range of services, including free art classes for youth, support for troubled youth, community gardening, residential and commercial redevelopment, improvement of recreational opportunities, and neighborhood safety from drugs and crime.

The Allentown Association served as the main source of community support in that neighborhood. The association consisted of both residents and business owners. The group was both well organized and well managed and represented a good cross-section of the community. Through the association, the Healthy Community Initiative reached out to Allentown residents to disseminate information in an efficient and effective manner.

In Fruit Belt, it was more difficult to identify a single, collective representative for the neighborhood. While there were a number of different community organizations doing great things, they were often at odds with one another. The lead agency found it challenging to disseminate information in Fruit Belt because each avenue reached only a specific demographic.



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*“It’s a little more physical feet time [in Fruit Belt], more meetings to get the same message out. Whereas, in Allentown, you can go to just one collective and it kind of circulates down the road.” -Staff*

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The political support for the Health Communities Initiative was key to the progress made over the course of the grant. The political support for BNMC was evident from its inception. In fact, it was a former mayor of Buffalo who first suggested creating the medical campus, vowing to lend a hand or take a step back when needed. The lead agency and partnership believed strongly in open and transparent communication, which enabled them to effectively engage political partners. The partnership aimed to encourage the community as a whole to explore its needs together and collectively understand the importance and benefits of making changes.

Building an honest relationship with all levels of the state and local government was a top priority for the lead agency. The agency invited everyone from staffers to senators to attend planning meetings and openly discuss exactly what kind of support could be provided and which responsibilities could be delegated to the government. The partnership recognized the importance of not only convincing local decision-makers and residents to make changes, but also to encourage and guide them in taking collective ownership of such efforts.

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*“We need [the government] there because we need [them] to understand what it is we’re going to come to [them] to help with in the end. So [their] input along the way is only going to make it easier...and to make sure that we’re on the right track and we’re not way off in left field when we say, this is what needs to be done and this should be the responsibility of the state.” -Partner*

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The lead agency learned the importance of being able to find common themes and to frame issues in ways that could address the interests of both community members and government officials. The agency emphasized connections between issues such as parking and pedestrian safety to help find solutions that made sense to all involved parties. What resulted was a slow, but sure involvement and interest from the government in issues such as walkability and bikeability.

While Buffalo has a dense urban layout and an accessible transit system, residents tend to prefer motorized transportation. Previous planning and policy efforts reinforced this automobile-centric culture. Because a lack of space made it difficult to widen streets or create new parking to accommodate increased traffic flow, the Healthy Communities Initiative recognized the need to build support for alternative modes of transportation, such as walking and biking.

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*“For years the focus has been on the car and on the truck. We’re trying to undo some of that and to be truly multi-modal in terms of promoting bicycle and pedestrian traffic.” -Partner*

*“If we can eliminate even 2% of all of the traffic that’s out there just because it’s unnecessary and get all those people on foot walking and biking we’ve got less cars in our system. That’s less wear and tear on the system, less congestion, less pollution that’s out there. So it’s very important, we take it very seriously.” -Partner*

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Because many Allentown and Fruit Belt residents worked on the medical campus, increasing opportunities for active living was a realistic goal. Around 20% of Allentown residents walked to work prior to the ALbD grant; fewer than 10% of Fruit Belt residents walked to work. While Allentown residents had many walking destinations in their neighborhood, Fruit Belt residents did not have easy access to simple commodities such as grocery stores or pharmacies. The partnership recognized a need to ensure that any changes created in the community accommodated all residents.



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*“Allentown has...your quality residences, your stores, all the things that you would want to have close by. So it’s inherently a very walkable neighborhood and everything’s very tight and dense and we try to do the beautification so it makes it a very pleasant experience.”*  
-Community Member

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*“Fruit Belt doesn’t have any place where a person can actually walk to, go to a certain place; we don’t have those places.”* –Community Member

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In general, Buffalo’s streetscape was a major challenge for the partnership. Many roads in Allentown, Fruit Belt, and the medical campus were not designed to meet the needs of pedestrians and bicyclists. High traffic speeds made it dangerous for walkers and bikers to even attempt to share the roads. In addition, the busy roadways separated the neighborhoods, deterring inhabitants from moving between communities. Residents faced other barriers to active living, such as cracked sidewalks, concrete split by tree roots, and poor lighting. Likewise, the project area lacked public or low-cost active living or recreational amenities, such as parks and trails.



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*“Goodell Street is almost like an extension to the off ramp from our freeway; people just fly down here to get to points west or south and downtown. So people don’t go back and forth because it’s not safe for the pedestrian or the person in cars.”* -Partner

*“The Fruit Belt is a little bit like the land that time forgot. The infrastructure is old... the streets, the sidewalks are just crumbling.”* -Partner

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### **Community Assessment**

In order to better understand the specific active living barriers and assets in the project area, BNMC and the Health Community Initiative conducted a number of assessment activities, including environmental audits and policy analyses.

With the assistance of community residents, the Wellness Institute of Greater Buffalo and Western New York, a core partner, completed a comprehensive physical infrastructure assessment for the entire project area (i.e., medical campus, Fruit Belt, Allentown). Participants received training to use audit forms and photography to capture data on physical infrastructure conditions that affect active living, such as sidewalk conditions and pedestrian amenities.

The resulting report outlined infrastructure needs, recommendations for improvements, and a glossary of appropriate infrastructure elements. An additional assessment component looked at governmental and institutional policies as they related to active living. The Healthy Communities Initiative placed great emphasis on resident input. When reports and recommendations were developed, the community as a whole was able to stand behind them.

Toward the end of the grant period, the University of Buffalo (partner) launched the baseline portion of an evaluation on the impact of infrastructure improvements on Ellicott Street for physical activity.

## Policies and Physical Projects

The partnership's ultimate goal was to improve the built environment in the project area to make it more walkable. Thus, significant time and resources were put toward developing and implementing policy and physical project strategies. While proposed physical projects occurred on a slower timeline than originally anticipated, the planning processes and policies influenced by the partnership created a strong reinforcement for change. The partnership sought to influence both the policies and infrastructure development plans of the medical campus and, in the later years of the grant, the city. Policy influences and physical projects; related partner, staff and community implementation activities, and associated challenges are described as follows:

### ► **Community Visioning Process**

- The medical campus, Allentown, and Fruit Belt completed an extensive, three-month visioning process in year one to identify common goals and objectives. This represented the first time these three communities worked together to discuss a single vision for the entire community.
- Approximately 120 people participated in the visioning sessions and bicycle and pedestrian audits completed in the first year of the grant.
- In year two, the three communities finalized and adopted a Community Visioning Statement as a symbol of a long-term commitment to creating a healthy community.

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*“I think if anything came out of [the visioning process], it was an appreciation across neighborhood boundaries. The neighborhoods realized that they weren’t so different from one another. Really all they wanted was clean, safe, and friendly neighborhoods for them and their families to live and places to work. So, that broke down a lot of the boundaries that had existed.” -Partner*

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### ► **Public Art Plan**

- The partnership convened the ArtWalk committee to discuss expansion plans for an existing neighborhood art trail project.
- The effort led to the successful procurement of a \$50,000 special opportunities grant from RWJF to develop a comprehensive public art plan that integrated art with infrastructure to create an inviting and attractive greenspace that incentivized employees and residents to be active and social.
- Partnership members met with public works officials and city planners to discuss the implementation of public art plan tenants into a community-wide infrastructure plan to be completed in 2009/2010.
- Implementation of the project was supported by \$14 million in federal and state transportation funds.



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*“It’s not sculptures, but it’s rather like an environment that is a place where you want to walk, where you want to be. It’s a healing environment...” -Partner*

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### ► ***Bike and Pedestrian Advisory Board***

- In order to influence change at the city level, partnership members met with city councilmembers to discuss the importance of bicycle and pedestrian advisory boards and active-living-friendly legislation; an advisory group formed in the third year of the grant, with representatives and a chair from the partnership.
- The board reviewed all city capital improvement projects that affected pedestrians and bicyclists.
- Following the board's recommendation, the council passed a modification to an ordinance to mandate that new developments with new parking also provide parking for bicycles.
- Bike racks and bike lanes were added downtown by the City and the Department of Transportation based on the board's recommendations.

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*“We actually got the city to form a bike/ped advisory committee, so now any major capital improvement projects in the city have to go through this advisory committee to look at bike/ped accommodations, which is great.” -Partner*

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### ► ***Buffalo Niagara Medical Campus Culture and Policies***

- To demonstrate its commitment to practice what it preaches, BNMC made a conscious effort to create organizational policies that helped brand the community as a healthy worksite.
- The Buffalo Niagara Medical Campus Board of Directors adopted a revised mission and vision to reflect a commitment to active living and healthy environments.
- They created a new mission statement to read: “The BNMC is a non-profit corporation dedicated to the cultivation of a world-class medical campus for clinical care, research, education, and entrepreneurship in downtown Buffalo. We will accomplish this by: coordinating activities related to planning, development, and enhancement within our 100-acre footprint, facilitating collaboration among our member institutions, as well as with the community at large, addressing issues of common concern to our institutions, and creating a distinct environment that provides opportunities for active living.”
- They created a new vision statement to read: “Through the cultivation of an environment that supports world-class clinical care, research, education, and entrepreneurship, BNMC will create a healthier community and attract increased investment in the medical campus as well as in the surrounding neighborhoods.”

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*“Obviously, a healthier population is a population that is more efficient, more productive, has less of a strain on your benefits and that sort of thing.” -Partner*

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### ► ***Medical Campus Master Plan***

- The partnership worked closely with two teams of consultants to provide input for the streetscape and infrastructure improvement design process.
- The medical campus master plan, which was prepared prior to the ALbD grant, was slotted to be revised to incorporate active living principles after the grant ended.

### ► **Street Improvement Projects**

- The partnership was successful at making small repairs in the Fruit Belt neighborhood, such as repaving roads, repainting crosswalks, installing street signs, and adding ADA-accessible curb ramps.
- The partnership worked with the Fruit Belt community to design gateway welcome banners along a main thoroughfare.
- The partnership worked with the New York State Department of Transportation to complete improvements to Goodell Street, including high-visibility crosswalks, countdown timers at all intersections, and speed limit signage. The medical campus also installed way-finding signage.
- The partnership also developed a plan to extend Allen Street (a major thoroughfare of Allentown) to Ellicott Street (a major thoroughfare of the medical campus) in order to create a physical connection between the two neighborhoods.



### ► **Transportation Options**

- The partnership developed a number of strategies to build easily-accessible connections between the target communities.
- During the ALbD grant, a \$6 million federal project aimed to strengthen and improve the connection between the campus and the Allentown neighborhood to provide medical campus employees access to residential, commercial, and retail opportunities.
- Several partners investigated the possibility of creating shuttle systems to connect their institutions with other neighborhoods.

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*“We’ll do a transit-oriented development so it gives us actually an exciting opportunity to create a real mixed use development that uses transit as well.” -Staff*

*“And it’s green, you’re doing good things for the earth and you’re saving a little bit of money and your carbon footprint is going down. All these linkages that are happening, it’s a really exciting time to be working on the med campus. And I think that each of us gets to share a little bit of that with the various worlds that we interact in. “ -Partner*

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### ► **Other Policies and Physical Projects**

- Partnership members met with a newly elected mayor and his staff to educate them about the ALbD project. The mayor and his staff committed to continuing the support currently provided by the city and advocating for the neighborhoods represented in the project area.
  - The partnership completed a security master plan for the medical campus and surrounding neighborhoods, including a Security Work Council, call boxes and security cameras, and campus-wide security program.
  - A new playground and two new basketball courts were built at local schools.
- In the second year of the initiative, the Healthy Communities Initiative facilitated the creation of the Employees’ Wellness Committee to provide input to the partnership, serve as a liaison between campus institutions, and develop a schedule of programs and activities. In addition, many of the individual institutions of BNMC developed their own wellness committees.
  - The partnership routinely presented assessment findings to public policy-makers, public works, and planning staff to influence them to include active living projects into the city capital budget program.

## ***Challenges and Successes***

Staff, partners, and community members identified a number of strengths related to developing and implementing policy and physical project strategies:

- The partnership created a momentum for physical change that was both empowering and hopeful.
- The partnership benefited greatly from the involvement of partners from the Department of Transportation, whose expertise helped set realistic expectations and shape feasible goals.
- Because the partnership valued the ideas and opinions of community members, its efforts reflected the needs and concerns of all member of the community.

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*“Our focus has really been on infrastructure because that’s what these people in the neighborhoods really want. They know that it can improve health if they walk and bike but to them [they] need to get these basic infrastructure needs [first].” -Partner*

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Staff, partners, and community members identified a number of challenges to developing and implementing policy and physical project strategies:

- While the partnership was successful in securing funds for planning processes, it was less successful in securing support to implement physical projects to the preferred scale.
- The additional active living elements often made projects more expensive than the bare-bones traditional model, which made it more difficult to persuade developers to invest in amenities to improve pedestrian and bicycle access.
- Because the implementation of physical projects was a slow process, the project had less tangible progress than desired.
- The partnership was challenged by the need to guarantee that large-scale projects be sustainable and popular to justify significant investments of time and money.
- The Healthy Communities Initiative saw a need to respond to requests to provide more recreational facilities in the community, but did not want to take away business opportunities from local residents.

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*“I’d say that probably why we haven’t had as much success is because, when I go to foundations, I’m hoping that they’ll help us fund a project, but they won’t. They’ll do programs or planning but not on the physical project side.” -Partner*

*“When you do get progress, you don’t want to have the people fade away and not be around... with infrastructure in particular because the timelines are so long. We have a phrase for that: civic fatigue.” -Partner*

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## Programs and Promotions

The Healthy Community Initiative utilized programmatic and promotional strategies to engage employees and residents in active lifestyle behaviors, and encourage an active living culture in the community. Promotions and programs, related partner, staff, and community implementation activities, and associated strengths and challenges are described as follows.

### ▶ *Media Outreach*

- In the first year of the grant, the partnership developed and implemented a multi-media Communication and Education Strategy utilizing print media, television, radio, and presentations. The development process involved determining messages and communication modes for reaching out to diverse populations.
- BNMC included information about healthy community principles and future plans for the medical campus in its electronic and hard copy newsletters to create better connectivity between member institutions.
- Brochures were produced to encourage the BNMC's 8,000 employees to visit nearby neighborhoods to use the goods and services provided.
- The Healthy Communities Initiative held press conferences and press events for most activities to highlight the partnership's progress and keep the community up-to-date on activities.
- The Project Director appeared on three local television shows to inform the community about the initiative goals and activities.

### ▶ *Wellness on Wednesdays*

- To encourage walking and active living among its staff, the Wellness Institute of Greater Buffalo and Western New York, a core partner, initiated Wellness on Wednesdays, a free, weekly walking program that provided guided walks May through November.
- During the winter months, the program featured lunch-and-learns on topics ranging from stress management to nutrition for diabetics.
- Each year, the medical campus held a kick-off event on National Employee Health and Fitness Day in which incentives (e.g., water bottles) were given away in an attempt to gain new walkers. Posters were also used to promote the program.
- The program grew from 10 to 50 participants over five years.



### ► **Buffalo Blue Bikes**

- With strong support from bike/pedestrian advocates in the partnership, the Green Options Buffalo, a core partner, launched Buffalo Blue Bikes, a seasonal, membership-only bike share program modeled after one in Toronto, Canada.
- The program utilized a series of hubs located throughout city where members could check out or return bikes.
- The city acquired bicycles through a recycling program in which youth repair bicycles donated by police departments.
- The program functioned through a website ([www.buffalobluebicycle.org](http://www.buffalobluebicycle.org)) that features a check-in/check-out system, maps, and information about how to become a member. Members paid \$25 annually or contributed volunteer time to the youth program.

### ► **Summer Wellness Block Party/America on the Move Day**

- The Summer Wellness Block Party, launched in the third year of the grant by the Healthy Communities Initiative, provided employees and residents with an opportunity to relax and enjoy fun activities and recognize Americans on the Move Day.
- During the event, vendors provided information and services related to physical activity, nutrition, and wellness, including blood pressure checks, stress tests, yoga, tai chi, and samples from local restaurants.
- Each year, over 2,000 people attended and over 40 vendors provided information and activities.

### ► **Healthy Transportation Day**

- The medical campus held annual Healthy Transportation Days to encourage employees to take alternative modes to work (e.g., biking, walking, transit, carpooling).
- One year, the event highlighted a commuter race in which a biker, a transit user, and a person in a car competed to see who could travel from downtown to the medical campus the fastest; the bike commuter won.





### ► **Other Programs and Promotions**

- The partnership developed and hosted two Active Living Road Shows in the Fruit Belt and Allentown neighborhoods during the first year of the grant, designed to educate the community residents on active living. These road shows included a walking tour/assessment of existing infrastructure conditions.
- The medical campus and the local chapter of the American Planning Association offered a workshop on planning and public health.
- To engage with the Fruit Belt neighborhood, BNMC staff took part in a clean-a-thon during which participants cleared away garbage and planted beds in community gardens.
- Each year, the partnership worked with several schools in the City of Buffalo to organize Walk to School day activities.
- The Project Director was invited to meet with officials from the City of Spokane, Washington, to discuss partnership building, urban design, and active living by design.
- Partnership staff presented their initiative at the Partners for Smart Growth Conference in the final year of the grant.

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*“[We] engaged the community and created something called our ‘Active Living Road Show.’ The partnership members went into the communities and we had a series of meetings; sort of like, ‘here’s what your community looks like today, here’s what successful communities are doing and here’s how we think we can help create change.’” -Partner*

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### **Challenges and Successes**

Staff, partners, and community members noted several challenges to developing and implementing programmatic and promotional strategies:

- Buffalo’s long, cold winters made it difficult to sustain ongoing active living programming.
- The partnership found it difficult to implement programs for medical campus employees that fit within their busy work schedule.
- While BNMC staff members hoped to become leaders in health sciences and act as models for building healthy communities, they found it difficult to alter the mindset and behavior of their employees.

Staff, partners, and community members mentioned a strength related to developing and implementing programmatic and promotional strategies:

- The medical campus was willing to make an effort to build trust within each neighborhood.

## Sustainability

Staff and partners stated that one of the most important successes of the initiative was building social capital in the Allentown and Fruit Belt neighborhoods by encouraging residents to participate in visioning, planning, and development activities as well as nurturing trusting and open relationships.

Buffalo Niagara Medical Campus, Inc., made an effort to ensure sustainability of the local active living movement by embedding active living principles in the work of the City, community groups, and the member organizations. For example, BNMC added active living values to its vision statement, an institutionalization that sustained the active living movement after ALbD funding ceased.

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*“We’re able to look out ten years into the future and be optimistic that the things that we would like to see happen, probably many of them are going to happen.” -Community Member*

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At the end of the ALbD grant period, the lead agency and the City of Buffalo leveraged the Healthy Community Initiative to obtain funding for Four Neighborhoods One Community, an effort to gather the three ALbD neighborhoods, the newly-incorporated downtown area, and the lead agency to create a united vision for the future through assessment activities, visioning sessions, and community workshops. Over 100 residents, business owners, and community members attended four community forums in 2008 to discuss their visions for a coordinated planning and development process that would effectively join four distinct neighborhoods as one single community.

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*“So we weren’t really sure if [the Four Neighborhoods One Community project] was going to work and we just had a meeting in the Fruit Belt and one in Allentown and we had like 60 people come to each meeting. And it was just a testament to those relationships...I think it helped everybody realize that that there’s value in community organizing and...we have to be in it for the long haul. It’s not something where you can just work on it for a couple years.” -Partner*

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The lead agency received a sustainability grant from RWJF to develop a Healthy Communities addendum to Buffalo’s Comprehensive Plan, the principal policy guiding decisions related to land use and the built environment, that would become a part of the city’s comprehensive plan. The lead agency envisioned that the addendum would clearly outline how the city could integrate active living and healthy eating principles into all city initiatives. Overall, staff and partners ensured sustainability through institutionalizing policies, continually expanding the partnership, and aggressively seeking new funding.

## Acknowledgements

This evaluation and report were developed under the leadership of Laura Brennan, PhD, MPH, Principal Investigator, Transtria LLC, and Ross Brownson, PhD, Co-Principal Investigator, Washington University Institute for Public Health. Support for this evaluation was provided by a grant from The Robert Wood Johnson Foundation (#57649). Transtria LLC led the evaluation and dissemination activities from November 2006 to December 2009. For more information about the evaluation and dissemination methods, activities or results, please contact Laura Brennan (laura@transtria.com).

Our team is grateful for the collaboration and support from the staff at Buffalo Niagara Medical Campus, Inc and the Healthy Communities Initiative in Buffalo, New York.

With special thanks to the many individuals who have contributed to these efforts from Transtria LLC (Anna Alexandrov; Joanna Bender; Shruthi Bhatt; Yolanda Campbell; Julie Claus, MPH; Kathryn Coniglio, MPH; Kate Dickman; Kate Donaldson, MPH; Melissa Hall, MPH; Courtney Jones, MPH; Shannon Keating; Allison Kemner, MPH; Benjamin Krause; Amy Krieg; Lisa Meng; Lauren Middendorff; Luke Odom; Regina Quadir, MPH; Laura Runnels, MPH; Elsa Taricone, MPH; Cindy Thomas, MPH; Sarah Weiner), Saint Louis University School of Public Health (Elizabeth Baker, PhD, MPH), Active Living By Design (Rich Bell, MCP; Phil Bors, MPH; Mark Dessauer, MA; Joanne Lee, LDN, RD, MPH; Mary Beth Powell, MPH; Sarah Strunk, MHA; Risa Wilkerson, MA), National Park Service (Helen Mahan), Robert Wood Johnson Foundation (Laura Leviton, PhD; Jamie Bussel, MPH), University of North Carolina Gillings School of Global Public Health (Kelly Evenson, PhD), University of California at Davis (Susan Handy, PhD), Wholonomy Consulting (Katherine Kraft, PhD), San Diego State University and Active Living Research (James Sallis, PhD), and Innovative Graphic Services (Joseph Karolczak).