Regional transportation planning efforts that consider not only mobility and access but also the effects on the public health of the surrounding community have begun to surface throughout the United States. The integration of public health considerations into transportation planning opens the doors of two siloed communities, each comprising their own contingent of government, business, and non-profit entities, and enables the integration of each community’s priorities into the other’s work. New research, presented in the article “Exploring Opportunities for Engaging Public Health Organizations in Transportation Planning” (journals.sagepub.com/doi/abs/10.1177/1087724X14559520) authored by urban and public affairs professors Jianling Li and Colleen Casey, and county Public Health Director Lou Brewer, provides insights into the barriers to and critical elements of collaboration between public health and regional transportation planning.
communities. These research findings can be useful to those managing or entering into cross-sector discussions or planning.

Li, Casey, and Brewer conducted a focus group with leaders from across sectors in both the transportation planning and public health communities in the Dallas/Fort Worth (DFW) Metroplex area. Participants represented a variety of organizations: city and county public health agencies, hospitals, university public health researchers, special district/quasigovernmental transportation service providers, state, city, and regional planning agencies, planning consultants, and bicycle/non-auto advocates. The authors also examined secondary data from 43 national case studies of successful collaboration between regional transportation planning and public health organizations.

Li, Casey, and Brewer combined network theory and collaborative planning literature to provide a framework for their analysis of focus group and case study findings. While network theory tends to focus on organizational attributes that enable collaboration, like governance and decision making structure, collaborative planning literature focuses on bottom-up, process-oriented factors like authentic dialogue. In assessing their findings, the authors looked at network structure, formal mechanisms, informal mechanisms, and facilitation factors, yielding the takeaways highlighted here.

**TAKEAWAYS FOR PRACTITIONERS**

**WHEN INVITING STAKEHOLDERS TO THE TABLE, TAKE AN INCLUSIVE, “ECOSYSTEM” APPROACH, LOOKING FOR THOSE WHO ARE INVOLVED IN THE ISSUE AT HAND BUT MAY NOT KNOW IT.**

Interviewees focused on the importance of including leaders and managers from diverse organizations, particularly those who may not traditionally think of themselves as part of the public health or regional transit planning communities—school districts, academia, and developers, for example. This enables the collaboration to leverage a broad set of resources, expertise, and authority.

**CONSIDER MOUs, NEW PUBLIC POLICIES, AND OTHER MANDATES TO OVERCOME REGULATION DISSIMILARITY AND OTHER VARIATIONS AMONG ORGANIZATIONAL STAKEHOLDERS.**

While interviewees cited regulation dissimilarity and “variations in funding, regulatory requirements, clientele, and service provision” as barriers to collaboration, they suggested that legal mandates and policy coordination among public sector partners can assist in overcoming these roadblocks.

**LEVERAGE SALIENT TRENDS AND ISSUES TO JUSTIFY COLLABORATION BETWEEN AND AMONG DISPERSE COMMUNITIES.**

Interviewees explained that linking a goal shared by two or more communities (i.e. public health and transportation) to a broader movement or policy that has support and salience can be helpful in amplifying the importance of collaboration between those communities. For example, connect healthy transportation planning to green transportation and alternative energy.

**IDENTIFY AND HONE IN ON SHARED GOALS.**

While the public health and transportation communities acknowledged having differing motivations and priorities (i.e. bike lanes vs. traffic capacity), practitioners cited the importance of identifying their shared goals (walkable communities, access to healthy foods, equitable access to transit).
TAKEAWAYS FOR PRACTITIONERS (CONT.)

BUILD TRUST THROUGH TRANSPARENT PROCESSES, REGULAR DIALOGUE, AND OTHER CONCRETE ACTIONS.

In building trust over time, practitioners cited the importance of keeping their organizational processes transparent, exhibiting effort, engaging in open and respectful dialogue, and sharing expertise and data. High levels of trust and shared understanding before entering into collaboration were reported in the 43 case studies surveyed to be factors contributing to successful collaborations.

LEVERAGE GRASSROOTS EFFORTS BY ACTIVISTS AND COMMUNITIES TO SPUR COLLABORATION.

Practitioners saw grassroots efforts as a major driving force for shifting political will in support of collaborative efforts. “The priorities change . . . only because of the more informal collaboration that happens apart from the regulators, and really it’s political, it’s the bicycle organizations and the activists who are able to begin to make an impact on elected officials . . . So you begin to see priority shift in a kind of dramatic way,” said one interviewee.

ASSESS AND ADDRESS KNOWLEDGE GAPS BETWEEN PARTNERS, SUCH AS LACK OF UNDERSTANDING AND LACK OF COMMON LANGUAGE.

Interviewees cited a lack of understanding between the public health and transportation communities as a significant barrier to collaboration. Interviewees acknowledged that this lack of understanding comes largely from communities failing to educate external stakeholders about their work and priorities: “Public health doesn’t promote itself,” said one interviewee. Interviewees also commented on the lack of common language as a barrier, referencing “access” as an example of a term understood differently among the two communities and the confusion caused by acronyms commonly understood within one community but not the other. “We need to develop, particularly between planning, transportation, and public health, a glossary if you will,” said one interviewee. Tacit knowledge sharing among stakeholders, identified as sharing feedback, concerns, inputs, and opinions, was present in all 43 case studies of successful collaboration — across scale and project focus.

CREATE AND SHARE DATA REPOSITORIES.

Centralize data (on evidence-based policies and best practices, for example) in a database to which practitioners from concerned professions have access. This creates a holistic picture of the issue, aids in planning and evaluation, and reduces costs.
**DISCUSSION**

Li, Casey, and Brewer’s research identified including organizationally diverse stakeholders as a critical element for successful collaboration. But the lack of observed representation of ethnic or racial minorities among focus group participants (which the authors noted in their work) points to a current concern in regional transportation planning. Research from Brookings reports that board composition of metropolitan planning organizations (MPOs) has created an inherent bias in planning and funding processes that has tended to favor suburban transit needs over those of low-income urban areas. Analysis of the Brookings report stated that “more than 88 percent of MPO voting members were white. Because urban areas, where low-income residents and people of color are typically concentrated, are underrepresented on these boards, their interests have seen lesser play in the transportation planning decisions that MPOs are responsible for making” (apha.org/~/media/files/pdf/topics/environment/srts_activetranspaequity_report_2015.ashx). Integration of public health and transportation communities offers one path to broaden the voices of those who influence transit policy, potentially increasing the valuation of the needs of traditionally under-represented communities and addressing equity in regional transportation planning.

**FOR FURTHER READING**

From The Intersector Project Toolkit:

- Share a Vision of Success: The agreement on a set of goals and ideal outcomes that clarify the mission and priorities of the collaboration (intersector.com/toolkit/share-a-vision-of-success/)
- Establish Transparency of Viewpoints: The creation of an environment in which partners can communicate openly, allowing the collaboration to address partners’ differing priorities (intersector.com/toolkit/establish-transparency-of-viewpoints/)
- Build a Common Fact Base: The consensus among collaboration partners as to what facts relating to the issue are most relevant (intersector.com/toolkit/build-a-common-fact-base/)
- Commit to Information Sharing: The requirement that partners share data relevant to the collaboration’s efforts (intersector.com/toolkit/commit-to-information-sharing/)
- Communicate the Interdependency of Each Sector: The development of an understanding among partners of how the differing expertise, resources, and networks of each partner enable the collaboration to achieve its aims (intersector.com/toolkit/communicate-the-interdependency-of-each-sector/)

Other Resources:

- Integrating public health and transportation planning: perspectives for MPOs and COGs (narc.org/wp-content/uploads/Public-Healthand-Transportation-Info-0606121.pdf)
- At the intersection of active transportation and equity: joining forces to make communities healthier and fairer (saferoutespartnership.org/resources/report/intersection-activetransportation-equity)
- Getting involved in transportation planning: an overview for public health advocates (walkboston.org/sites/default/files/Getting%20Involved%20in%20Transportation%20Planning%202011.pdf)
- From start to finish: how to permanently improve government through health in all policies (changelabsolutions.org/sites/default/files/From-Start-to-Finish_HIAP_Guide-FINAL-20150729_0.pdf)

**ABOUT RESEARCH TO PRACTICE**

Academic research often holds knowledge that can benefit the many practitioners working in cross-sector collaborations. For our Research to Practice series (intersector.com/tag/research-to-practice/), we examine these articles and interview their authors to highlight key facts, actionable takeaways, and additional resources practitioners can turn to for guidance in their cross-sector work.

For more information on our Research to Practice series, please contact us at research@intersector.com.