

**The Hidden Impact of the Built Environment: Designing Pedestrian-Friendly Spaces for
Enhanced Health and Accessibility for Elderly & Aging Populations in New Jersey**

Policy Memo

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Subject: A Pedestrian-Friendly Built Environment in New Jersey: Enhancing Health and Accessibility for Older Residents

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Summary

In urban planning and the built environment, it is often overlooked how one's built environment impacts physical wellbeing and health outcomes, especially among populations such as the elderly. Older adults residing in underserved communities are particularly disadvantaged by the lack of proper infrastructure, which can limit their mobility, independence, and opportunities for social interaction.¹ Using existing models and other states as references, this policy memo focuses primarily on the state of New Jersey in order to provide an outline of what NJ Future can do to improve the built environment and address challenges by creating a pedestrian-friendly infrastructure to improve the health and well-being of its aging population. Having an educational purpose, this policy memo will provide a framework to improve pedestrian infrastructure, integrate health considerations into transportation planning, and create aging-friendly environments.

Background

New Jersey's built environment has challenges, particularly the scarcity of pedestrian-friendly infrastructure, which has profound consequences for the physical and mental well-being of its aging population. The Federal Highway Administration's STAR Guide report highlights that rural communities face numerous challenges to implementing walking and bicycling interventions, including inadequate infrastructure, which can disproportionately affect older adults who are more vulnerable to physically challenging environments.² Poorly designed urban spaces—such as streets that are unsafe or unpleasant

¹ Alexandra Klann et al., "Translating Urban Walkability Initiatives for Older Adults in Rural and Under-Resourced Communities," *International journal of environmental research and public health*, August 22, 2019, <https://pmc.ncbi.nlm.nih.gov/articles/PMC6747272/>

² Ibid.

for walking, and a lack of accessible parks and public areas—contribute to physical inactivity, social isolation, and mental health issues in older individuals.

The challenges in navigating poorly designed urban spaces and transportation systems causes the aging community to become more car dependent. Recent studies have revealed that reducing car usage not only has environmental benefits, but also has a profound impact on personal well-being and social connections, as individuals who rely less on cars tend to experience increased life satisfaction.³ This problem is exacerbated by the lack of consideration for the needs of older adults in transportation planning and urban design. Furthermore, research suggests that living in walkable areas, where car dependence is lower, is associated with a stronger sense of community and sociopolitical control, whereas high levels of car dependence can have negative implications that outweigh the benefits of car-based travel.⁴ The lack of attention given to older adults' needs in transportation planning and urban design exacerbates this problem. Commuting by private car poses significant health risks, prompting global mobility advocates to rage against these machines and, more fundamentally, against the dying of the street, which they see as a vital space for human well-being.⁵ Efforts to reduce vehicle miles traveled (VMT) can have maximum health benefits when combined with the promotion of physical activity, mixed-use neighborhoods, accessible public transportation, and compact development, ultimately leading to improved physical and mental health outcomes.⁶ According to the CDC, even small increases in physical activity can significantly reduce the risk of diseases such as obesity, diabetes, cardiovascular disease, cancer, and mortality, underscoring the importance of promoting physical activity through efforts like reducing vehicle miles traveled and creating mixed-use neighborhoods.⁷

³ Chris McCahill, “Too Much Driving Is Bad for Society, New Studies Show,” State Smart Transportation Initiative, December 9, 2024, <https://ssti.us/2024/12/09/too-much-driving-is-bad-for-society-new-studies-show/?eType=EmailBlastContent&eId=6e0bcb96-7cb3-4e8c-92ce-0f1747ab8c25>

⁴ Ibid.

⁵ Vishaan Chakrabarti, “‘Rage Against the Machine’: The Daily Toll of Cars in 18 Images - Streetsblog USA,” “Rage Against the Machine”: The Daily Toll of Cars in 18 Images - Streetsblog USA, October 22, 2024, <https://usa.streetsblog.org/2024/10/22/rage-against-the-machine-the-daily-toll-of-cars-in-18-images>

⁶ Karen Lowrie and Leigh Ann Von Hagen, “The New Jersey Draft Energy Master Plan: Opportunities to Integrate Health and Health Equity,” New Jersey Energy Master Plan, September 16, 2019, <https://njclimateresourcecenter.rutgers.edu/wp-content/uploads/2019/09/EMP-HIA-1.pdf>

⁷ Ibid.

Mobility and social integration can be hindered when transportation systems and urban spaces are poorly designed by putting up physical barriers, prioritizing car-centric infrastructure, and neglecting pedestrian-friendly and accessible features, isolating vulnerable populations, like the elderly. Empirical evidence suggests that residing in walkable neighborhoods with high levels of greenness, characterized by tree canopies, green spaces, and pedestrian-friendly design, is associated with numerous physical and mental health benefits, including reduced risk of depression, dementia, and stroke, as well as improved cognition and well-being, particularly among older adults who benefit from informal social interactions with neighbors.⁸

There is also a knowledge gap and a lack of research in the connection between land use, planning, and public health, which often goes unconsidered by professionals in the fields of transportation planning and public health. Despite being the most densely populated state in the country, New Jersey's pedestrian safety record is concerning.⁹ According to demographic projections, New Jersey's older adult population is expected to experience significant growth, with the number of individuals aged 65 or older anticipated to increase by 28.7% to 1,857,200 by 2029, ultimately comprising 20.0% of the state's total population by 2034.¹⁰ By creating environments that support pedestrian and bicycle behavior through the construction of safe and accessible roads and routes, older adults, in particular, can be empowered to make healthy choices, such as walking or biking for short trips, which can have a significant impact on reducing the risk of chronic diseases, promoting physical activity, and maintaining independence and overall well-being.¹¹ A substantial proportion of New Jersey's older population, approximately 300,000 residents aged 55 or older, reside in municipalities that score poorly on key aging-friendliness metrics, while only a minority live in areas that excel in all four measures, highlighting the need for improved built

⁸ Robert Steuteville, "How Walkable Places Lead to Healthier People," CNU, December 5, 2024, <https://www.cnu.org/publicsquare/2024/12/05/how-walkable-places-lead-healthier-people>

⁹ Evans, Time. "Transit-Oriented Development Is Pedestrian-Oriented Development: New Jersey Future." New Jersey Future | Working for Smart Growth: More Livable Places and Open Spaces, February 13, 2023. <https://www.njfuture.org/2023/01/30/transit-oriented-development-is-pedestrian-oriented-development/>

¹⁰ New Jersey age-friendly blueprint - nj.gov, accessed December 13, 2024, https://www.nj.gov/humanservices/news/reports/AF%20Blueprint_v5.pdf

¹¹ Bicycle and pedestrian-friendly planning and Development | new jersey future, accessed December 13, 2024, <https://www.njfuture.org/issues/transportation/bicycle-pedestrian/>

environments to support independent mobility and healthy aging.¹² The availability of roads and other built environment infrastructure, such as safe footpaths and bridges, serves as a crucial conversion factor in enabling or constraining individual mobility, as evidenced by the fact that even the presence of a bridge is rendered ineffective without complementary factors like pedestrian-friendly pathways.¹³

Older adults are disproportionately affected by environmental determinants due to the compounding effects of age-related physical and cognitive decline, reduced social networks, and increased fragility, which can lead to a heightened dependence on their immediate residential environment and increased exposure to hazards or limited access to essential services and amenities.¹⁴ The built environment reflects and reinforces ageist attitudes and practices, as evidenced by the historical development of distinct built environments for different segments of the older population, highlighting the need for awareness of the dynamic interplay between age relations, social geographies, and urban planning.¹⁵ Ultimately, a closer examination of the interplay between urban landscapes, demographic changes, and age relations raises important questions about a society's priorities, begging the question: what does the persistent neglect of the health impacts of built environments on the elderly reveal about the value placed on their well-being, and how often are their needs overlooked in the pursuit of urban growth and development?¹⁶

Options

Our first step to addressing our policy issue can be to focus on the built environment in New Jersey by not just considering the relationship between land use, planning, and health, but also to prioritize the creation of aging-friendly communities and to educate transportation planners and healthcare professionals on improving the quality of life for seniors by promoting healthy aging. To

¹² Tim Evans, "Many Older Residents in New Jersey Live in Aging-Unfriendly Places: New Jersey Future," New Jersey Future | Working for Smart Growth: More Livable Places and Open Spaces, November 29, 2014, <https://www.njfuture.org/news/op-ed-articles/places-to-age/>

¹³ NJBIKEPED, December 2022, https://njbikeped.org/wp-content/uploads/Older-Adults-Report_2022.pdf

¹⁴ Irene H Yen, Yvonne L Michael, and Leslie Perdue, "Neighborhood Environment in Studies of Health of Older Adults: A Systematic Review," American journal of preventive medicine, November 2009, <https://pmc.ncbi.nlm.nih.gov/articles/PMC2785463/>

¹⁵ Glenda Laws, "'The Land of Old Age': Society's Changing Attitudes Toward Urban ...," Annals of the Association of American Geographers Volume 83, Issue 4, December 1993, <https://onlinelibrary.wiley.com/doi/epdf/10.1111/j.1467-8306.1993.tb01960.x>

¹⁶ Ibid.

promote the health, well-being, and independence of the elderly, we recommend the implementation of a comprehensive policy initiative that incorporates the following key components:

1. Implement Pedestrian-Friendly Design Guidelines
2. Increase Funding for Accessible Transportation
3. Create a Health Impact Assessment (HIA) Tool
4. Establish a Statewide Age-Friendly Communities Initiative
5. Provide Education and Training for Local Officials and Regulators
6. Develop a Policy Framework for Inclusive Zoning
7. Integrate Health Outcomes into Urban Planning and Transportation Policy
8. Encourage Local Governments to Adopt “Complete Streets” and “Street Smart” Policies

This report will build on existing models to improve infrastructure and urban planning for the elderly, using them as references to explore both their benefits and drawbacks. In advocating for feasible new initiatives that New Jersey, particularly NJ Future, can implement in its urban planning and design guidelines, we will focus on key components 1, 3, and 4. While New Jersey’s efforts to address these issues have been limited, by examining models from other states and leveraging current programs and organizations, we can evaluate the feasibility of proposed solutions, address potential challenges, and consider their long-term impacts.

Analysis

As a means of improving accessibility and safety for the elderly, it is crucial to establish design guidelines that prioritize safety and ease of navigation in streets, sidewalks, and public spaces. These guidelines should focus on creating pedestrian-friendly environments that are sensitive to older adults' needs. In urban design and infrastructure development, mental and physical health of the elderly are crucial considerations, because creating age-friendly environments that promote mobility, social

interaction, and access to essential services can make older adults feel better physically, reduce isolation, and enhance their quality of life significantly.

Implement Pedestrian Friendly Design Guidelines

To ensure that pedestrian-friendly design guidelines are implemented in a feasible manner, a variety of sources, such as case studies and local practices already implemented can be used as tools for planning and infrastructure development focused on elderly health. Often pedestrian-friendly designs are created with the general public in mind, without any consideration for age, so implementing pedestrian-friendly design guidelines individualized for the elderly could help mitigate negative mental and physical health effects that arise from one's built environment. The Community Preventive Services Task Force (CPSTF) recommends built environment strategies, such as adding sidewalks, bicycle lanes, and expanding public transit, to increase physical activity, which the CDC's Active People, Healthy Nation Initiative has adapted into "activity-friendly routes to everyday destinations."¹⁷ Physical activity infrastructure gaps are addressed through these strategies, which are especially beneficial for the elderly.

An important thing to note is that in the policy arena, ageism is often politicized through intergenerational conflicts over limited resources, with some entrepreneurs viewing aging as a profitable opportunity, while city officials increasingly see the elderly population as a potential driver for local service industries.¹⁸ For age-friendly communities to be successful, design guidelines must make sure to put upfront the necessary focus on navigation systems for older adults in public spaces ensuring that infrastructure changes are comprehensive and evaluated accordingly. In light of how politicized the concept of aging has become, it is important to mention that there has been tension between resource allocation and the economic potential of the aging population, emphasizing the importance of having a balance between social equity and economic growth. By addressing how entrepreneurs and city officials view the elderly, we can begin to understand and promote the integration of the elderly into urban

¹⁷ Natalicio Serrano et al., "Healthy Community Design, Anti-Displacement, and Equity Strategies in the USA: A Scoping Review," *Journal of urban health : bulletin of the New York Academy of Medicine*, February 2023, <https://pmc.ncbi.nlm.nih.gov/articles/PMC9798938/>

¹⁸ Glenda Laws, "'The Land of Old Age': Society's Changing Attitudes Toward Urban ...," *Annals of the Association of American Geographers* Volume 83, Issue 4, December 1993, <https://onlinelibrary.wiley.com/doi/epdf/10.1111/j.1467-8306.1993.tb01960.x>

development and economic strategies through inclusive, sustainable solutions. Despite these necessary changes, implementing these can face political opposition, especially in communities that might argue for other public priorities in light of limited resources.

A major concern with built environment changes intended to enhance health for the elderly is the potential for displacement, as rising property values, rent increases, and higher property taxes may result from these improvements. However, while displacement is not always a direct consequence, I argue that these infrastructure upgrades, although they might raise property values, can also foster local economic growth and provide long-term benefits by creating more accessible, vibrant communities for elderly residents. In the long term, upgrading infrastructure and maintenance of pedestrian-friendly communities could prove to be expensive. Although initially the investments may raise property values, it could be good for the local economy by creating accessible and more attractive environments that improve the health and life of older residents. There will be challenges nevertheless such as threats of displacement but economic growth is promising and sometimes improving infrastructure could prove to be more beneficial.

Built environment interventions have significant potential to improve health and reduce disparities, but their effectiveness depends on ensuring that the elderly can remain in and benefit from new developments, which requires combining local knowledge with context-sensitive anti-displacement strategies to create active, equitable communities.¹⁹ Cities like Portland and Seattle have been known to invest in pedestrian-friendly infrastructure resulting in higher rates of foot traffic and local spending long-term, but barriers like the initial financial investment can be hefty in some communities.²⁰ Insufficient data also hinders the evaluation and enhancement of active transportation infrastructure, largely due to the inconsistent nature of data collection on pedestrian and cycling activities across various

¹⁹ Natalicio Serrano et al., "Healthy Community Design, Anti-Displacement, and Equity Strategies in the USA: A Scoping Review," *Journal of urban health : bulletin of the New York Academy of Medicine*, February 2023, <https://pmc.ncbi.nlm.nih.gov/articles/PMC9798938/>

²⁰ Adron. "Portland Envy by Seattle, It Keeps Going..." *Transit Sleuth*, 31 Dec. 2011, transitsleuth.com/2011/12/30/portland-envy-by-seattle-it-keeps-going/

regions.²¹ Having data collection that is inconsistent across various regions proves detrimental to pedestrian-friendly initiatives from being carried out in a successful manner.

To address this issue in New Jersey, implementing a unified data collection framework could provide more accurate, thorough, and standardized data, ultimately facilitating informed local planning decisions and aligning with performance-based requirements for federal and state funding allocations. Public health agencies, local governments, and urban planners must work together to address all aspects of pedestrian-friendly design - including sidewalks, lighting, and public transit - holistically. In addition, any proposed solution must be scalable for different urban settings, including dense city centers and suburban areas, where investment levels and approaches may differ.

Create Health Impact Assessment (HIA) Tool

A health impact assessment is important for creating age-friendly communities, as it helps policymakers understand how land-use decisions affect the physical and mental health of older individuals, particularly for this case in New Jersey. In this paper, real-world examples from New Jersey are provided in order to illustrate how such tools can be used to improve health outcomes and quality of life for aging populations. The CDC mentions how Health Impact Assessments (HIAs) evaluate the potential health effects of policies, plans, and projects, providing decision-makers with timely recommendations to promote healthy environments, minimize negative health outcomes, and reduce health inequities, with a focus on assessing the impact on vulnerable populations.²² The World Health Organization (WHO) established the idea of age-friendly cities in its 2007 guide to foster urban environments where older adults can engage in social activities free from age-related barriers, offering a framework to assess and improve cities in ways that reduce social isolation among seniors.²³ As such,

²¹ Ibid.

²² "Health Impact Assessment," Centers for Disease Control and Prevention, June 10, 2024, [https://www.cdc.gov/healthy-places/php/health-planning-tools/health-impact-assessment.html#:~:text=Health%20impact%20assessments%20\(HIAs\)%20evaluate,outcomes%2C%20and%20reduce%20health%20inequities](https://www.cdc.gov/healthy-places/php/health-planning-tools/health-impact-assessment.html#:~:text=Health%20impact%20assessments%20(HIAs)%20evaluate,outcomes%2C%20and%20reduce%20health%20inequities)

²³ Soondool Chung et al., "Who's Global Age-Friendly Cities Guide: Its Implications of a Discussion on Social Exclusion among Older Adults," International journal of environmental research and public health, July 29, 2021, <https://pmc.ncbi.nlm.nih.gov/articles/PMC8345595/>

Health Impact Assessments (HIAs) are crucial in determining how urban development decisions can adversely affect the health and overall well-being of the elderly.

Active Living Research, supported by the Robert Wood Johnson Foundation, investigates the relationship between the built environment, physical activity, and health, offering critical data that could inform the development of a Health Impact Assessment tool to assess the effects of urban design on older adults' health. This study advocates for the use of Health Impact Assessments (HIAs) to evaluate the effects of urban design and policy decisions on public health, enabling policymakers to identify potential health risks and benefits while prioritizing the needs of vulnerable populations, such as the elderly.²⁴ It is important to examine existing efforts to use HIAs in urban development in order to better understand how effective they are in addressing public health concerns, particularly for the elderly, and inform future efforts to integrate HIA tools into policy planning and urban development to promote healthier communities. Conducting thorough assessments of new urban projects across an entire state can be challenging, particularly for smaller cities with fewer resources, as it requires significant funding to establish reliable and current data systems for evaluation. Nevertheless, with the aging population steadily increasing, the long-term advantages, such as lowering healthcare costs linked to inactivity, justify the initial investment.

Although some may argue that conducting Health Impact Assessments (HIAs) can be time-consuming and resource-intensive, there is actually a long-term benefit of preventing health problems, reducing future healthcare costs, and promoting sustainable urban environments making it a wise investment that can lead to better outcomes for communities, particularly the elderly population, which is projected to comprise a growing majority of New Jersey's population in the near future.

²⁴ "Active Living Research," HIA (Health Impact Assessment) Resources | Active Living Research, accessed December 13, 2024, <https://activelivingresearch.org/health-impact-assessment-resources>

Establish a Statewide Age-Friendly Communities Initiative

Developing a statewide Age-Friendly Communities Initiative in New Jersey would provide a valuable insight and resource to organizations such as New Jersey Future by improving accessibility and livability among older adults by focusing on improving the built environment. Montclair, NJ, recognized as an Age-Friendly Community by AARP and a member of both the AARP Network and WHO Global Network of Age-Friendly Cities, has launched the Lifelong Montclair initiative through its Department of Health & Human Services to improve the quality of life for older residents by enhancing pedestrian infrastructure, expanding transportation options, and addressing critical areas like healthcare, housing, and community engagement, with funding from the Partners for Health Foundation and a collaborative approach to service implementation.²⁵ This is a useful model for NJ Future to look at especially when deciding to expand transportation options for the elderly community.

Examining Montclair's Age-Friendly community initiatives, including its efforts in enhancing infrastructure, transportation, and community engagement, offers a practical example of how targeted urban design can address the needs of older adults and inform recommendations for a statewide initiative in New Jersey, ensuring policies are grounded in successful, evidence-based practices that promote healthier, more inclusive environments for the elderly.²⁶ As part of a statewide initiative, incorporating these best practices would ensure policy is based on scientifically proven, successful models that support healthy, inclusive environments for seniors. The City of Hoboken's Bicycle and Pedestrian Plan, developed through NJDOT's Local Technical Assistance Program and in collaboration with local stakeholders, focuses on improving the built environment by enhancing walking and bicycling infrastructure to support residents of all ages, including the elderly, and provides a valuable model for NJ Future to use in promoting statewide Age-Friendly Communities initiatives that prioritize accessibility and mobility for older adults.²⁷

²⁵ "Lifelong Montclair Is An Aging In Place Initiative Of The Township Of Montclair Focused On Transforming Montclair Into A Great Place To Grow Older," World Health Organization, accessed December 13, 2024, <https://extranet.who.int/agefriendlyworld/network/montclair/>

²⁶ Ibid.

²⁷ Bicycle and pedestrian plan, December 2010, <https://njbikeped.org/wp-content/uploads/City-of-Hoboken-Bicycle-and-Pedestrian-Plan.pdf>



Figure 1: Existing Conditions and Proposed Design Solutions in the City of Hoboken, NJ: Bicycle and Pedestrian Plan

With the widening of streets, the installation of speed bumps, and improved crosswalks, Hoboken's pedestrian-friendly streets program illustrated in Figure 1 aims to reduce traffic congestion and promote walkability, providing NJ Future with a model to create more age-friendly environments. New Jersey Future can guide its efforts to create age-friendly environments, which encourage active aging throughout the state, by adapting urban design to improve mobility and safety for older adults. The provision of safe public places and infrastructure, as well as the creation of improved transportation networks, can assist in reducing social isolation and sedentary behavior among the elderly, and, as a result, improve their overall quality of life. In a similar vein, New Brunswick, NJ, has implemented a Complete Streets policy that prioritizes pedestrian-friendly infrastructure, enhances public transportation, and incorporates community engagement through design guidelines focused on accessibility.²⁸ Cities in New Jersey offer evidence-based models for designing pedestrian-friendly, accessible infrastructure that can be scaled statewide to support the aging population, promote active living, and ensure equitable access to resources. By partnering also with key stakeholders in New Jersey, such as NJDOH, NJDOT, the New Jersey League of Municipalities, AARP New Jersey, and others, NJ Future can establish a Statewide Age-Friendly Communities Initiative that leverages research, frameworks, and resources to promote health, well-being, and supportive, livable environments for aging populations.

²⁸ City of New Brunswick - Complete Streets Policy, accessed December 13, 2024, <https://cms2.revize.com/revize/brunswicknj/Complete-Streets-Policy-City-of-New-Brunswick.pdf>

Earlier in the semester, we reviewed a paper as part of the course material, which provided valuable insights into some of the challenges discussed in this report. The paper *Making Policy When the Evidence Is in Dispute* by Atkins et al. highlights some of the challenges I've already mentioned in implementing initiatives within New Jersey's built environment, emphasizing that effective health policy-making involves not only addressing disputed evidence but also balancing a range of factors beyond clinical data, including social, economic, and environmental considerations.²⁹ In light of this, some might argue that there are several challenges when it comes to establishing this initiative such as limited data on the location and condition of sidewalks in New Jersey, limited funding for implementing guidelines, resistance from stakeholders and limited awareness of the policy problem among decision-makers. The first step to addressing these challenges is to ensure that the collected data is accessible, that sidewalk assessments are conducted, funding is provided for high-priority areas, and early stakeholder involvement is encouraged to make people aware of the health, economic, and social benefits of pedestrian-friendly, age-inclusive policies for the long term.

The solution doesn't just involve improving the environment to suit older adults; it also involves encouraging seniors to prioritize physical autonomy and exercise from a young age. Financial incentives such as gym membership discounts or rewards for meeting activity goals, coupled with public awareness campaigns about the health benefits of staying active, could encourage seniors to stay active. In addition to these initiatives, communities can provide older adults with a variety of safe and accessible outdoor spaces to encourage them to stay active, thereby fostering a healthier environment that is more vibrant and active. As New Jersey's elderly population continues to expand in the coming years, it may also be prudent to consider proactive investments in the health and activity levels of younger populations, ensuring they are better equipped for healthy aging. The main challenge of establishing a Statewide Age-Friendly Communities Initiative is securing adequate funding and political will for such an ambitious program. In light of this, policymakers need to demonstrate the long-term economic benefits of

²⁹ Atkins D; Siegel J; Slutsky J, "Making Policy When the Evidence Is in Dispute," Health affairs (Project Hope), accessed December 13, 2024, <https://pubmed.ncbi.nlm.nih.gov/15647220/>

age-friendly infrastructure, including savings in healthcare costs and a boost to local economies that result from increased physical activity among the elderly.

Recommendations

To ensure that this policy memo is successfully executed, I recommend the following actions: form a team responsible for guiding the creation and rollout of pedestrian-friendly standards and accessible transportation options. Secure specific funding for the statewide age-friendly communities program while offering local governments support and education on how the built environment in New Jersey affects the physical and mental health of the elderly population, by perhaps reaching out to organizations that are strong advocates of health. Create a thorough educational initiative for local policymakers, including training and educational sessions, while engaging diverse stakeholders to address the needs of older adults throughout the process.

Although not all components were covered, we recommend implementing a comprehensive policy initiative that includes pedestrian-friendly design guidelines, increased funding for accessible transportation, the creation of a Health Impact Assessment (HIA) tool, a statewide age-friendly communities initiative, education and training for local officials, an inclusive zoning policy framework, integration of health outcomes into urban planning and transportation policies, and encouragement for local governments to adopt "Complete Streets" and "Street Smart" policies.

With the implementation of this initiative, we will be able to improve health, mobility, and safety for our aging populations in New Jersey while also ensuring that urban developers and land use planners follow accessibility and age-friendly policies. Ultimately, NJ Future could begin by engaging with the Commissioner of NJOIT, the Commissioner of the NJ Department of Health, and potentially seek funding from the Robert Wood Johnson Foundation to further explore land use strategies that promote the mental and physical health of older adults.

Conclusion

In conclusion, by exploring the built environment's impact on the health and well-being of older adults, especially in areas with inadequate infrastructure, we can learn more about how it limits their mobility and independence. NJ can improve the quality of life for its aging population by advocating for pedestrian-friendly policies and design initiatives that integrate health considerations when it comes to land planning and development. This paper outlined recommendations using current models in place as guidelines for how NJ Future should consider moving forward with creating aging-friendly spaces in the city of NJ. Since it takes time and thought to develop a constructed environment that lessens the mental and physical harms of car dependency in the elderly population, I also examine the advantages, long-term effects, and viability of the options I proposed. In the end, this report aims to educate and assist projects that complement NJ Future's objective of advancing people-centered land use and transportation policies, which will enhance the health, mobility, and general well-being of the state's senior citizens.

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