Charlotte Avenue

Nashville, Tennessee

Developing a Strategy for Ownership and Connectivity to Improve Health Along the Corridor



- demonstrating improvements to placemaking, health, and streetscape that can be easily implemented at key nodes or locations along the corridor.
- >> Establish a corridor oversight group to champion and lead the implementation of improvements.

ABOVE AND INSET: Uncoordinated development, unsightly utility poles, and nonexistent safe pedestrian infrastructure are some of the challenges facing Charlotte Avenue. (Jess Zimbabwe)

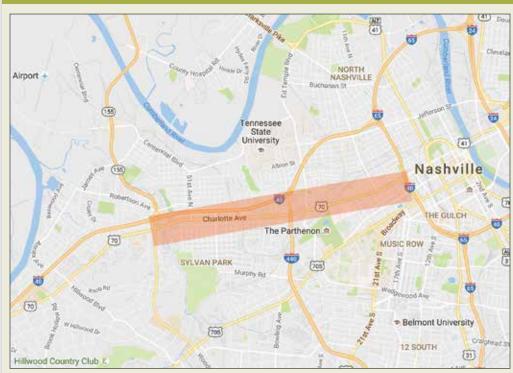
Charlotte Avenue is a main traffic throughway from downtown Nashville to the western suburbs. ULI Nashville and partners worked on a four-mile segment of Charlotte Avenue near downtown.

The neighborhoods north of Charlotte Avenue between I-40 and I-440 are historically home to a majority African American population and cultural arts centers and universities, including Fisk University and Meharry Medical College. These neighborhoods face greater health-related social and economic challenges than the rest of Nashville faces.

The area is 81.5 percent African American compared with 27.7 percent for Nashville as a whole.

The area's poverty rate at 44.8 percent is more than double that of Nashville. Only 6.2 percent of residents have a bachelor's degree or higher, which is less than half the rate for residents of Nashville overall. This area also experiences worse health outcomes than Nashville as a whole: in 2013, the hospitalization rates for both hypertension and diabetes were roughly three times higher than the rates for the city overall.

Alongside and just south of Charlotte Avenue is Nashville's unofficial and longstanding Medical District, which includes the Metro Public Health Department and HCA Corporate offices, as well as institutions such as the Centennial Medical Center, the American Cancer Society, and the Red Cross.



The Charlotte Avenue corridor area (shaded) and surroundings. (Google Maps)

Currently, there is a great deal of interest in and plans for both public and private investment and development along Charlotte Avenue. But development patterns appear uncoordinated, and uses and infrastructure are not adequate to support the needs of adjacent neighborhood residents.

Local Work for Change

The Nashville local leadership group saw an immediate opportunity to implement more strategic principles, actions, and partnerships that support and improve the health of the adjacent neighborhoods and business users. The Metropolitan Government of Nashville and Davidson County (Metro Nashville) and its mayor, Megan Barry, who was elected in the fall of 2015, identified eight corridors across the city on which to focus redevelopment efforts, including Charlotte Avenue. Short- and long-term implementation strategies that focus on creating a healthier Charlotte Avenue may be replicated along the other corridors as well.

New development is occurring along Charlotte. A new 19-acre community called oneC1TY focuses on principles of healthy living and sustainable design and, when completed, will include a mix of office, residential, retail, hotel, and open space.

Recently finished complete streets projects near the corridor—the 28th/31st Avenue Connector and the 11th Avenue Complete Street Project,

which both intersect with Charlotte Avenue—provide local examples of what a redeveloped road could look like. However, the goal of the local leadership group was to look beyond the travel lanes of the corridor and address the health and connectivity problems residents of adjacent neighborhoods experience.

"We selected the Charlotte Avenue corridor due to the demographic and land use diversity it offered within the neighborhoods it connects," said Ryan Doyle, general manager at OneC1TY Nashville and chair of the local leadership group. "While this made for a broad set of opinions through our community meetings, it has been inspiring to see cohesiveness begin to build about the importance of a more holistic approach to developing the area and giving the citizens an opportunity to improve their health."

The Charlotte Avenue local workshop, held in August 2015 with about 100 local stakeholders, identified health assets and barriers along the corridor. Small groups looked at maps and images of one-mile segments of the corridor to identify where basic services or amenities were missing, what components of new development projects should be included to positively affect the health of residents and workers in the area, what incentives and funding are available to ensure that those components are included, and what investments should be prioritized by the city government.

Quick Facts

- » Length of Study Section: 3.9 miles
- » Average Number of Lanes: 4-5 lanes of traffic
- **Average Posted Vehicle** Speed: 40 mph
- » Available Transit Options: Bus rapid transit (BRT) lite
- » Bike Lanes: Unprotected bike lanes run along the majority of the corridor in both directions, with sharrows in some smaller areas: there are no bike lanes or sharrows on the western one-fourth of the corridor.
- » Sidewalks: The corridor has sidewalks on both sides of the street except at the western end of the corridor.
- >> Income Data: The corridor has a mix of income levels: south of the corridor is higher income; north of the corridor is lower income
- » Land Use: On the southern side is Nashville's longstanding Medical District with large anchor hospitals, but there is an opportunity for continued civic and streetscape improvements and commercial and multifamily infill. On the northern side are Nashville's historically African American neighborhoods, cultural arts centers, and universities. The western section of the corridor has more typically automobile-oriented uses such as strip malls, repair shops, and fastfood restaurants.



ABOVE: The 11th Avenue Complete Street Project, near Charlotte Avenue, serves as a model for redeveloped road infrastructure. (Jess Zimbabwe) **RIGHT:** During the Charlotte Avenue local workshop, stakeholders analyzed one-mile segments of the corridor to identify what services and amenities are needed to improve health and accessibility. (Jess Zimbabwe)

Drawing on input from the local workshop, the local leadership group cultivated a set of implementable guick wins, both in the short and long term. The team is considering a number of strategies, including urban agriculture, active play spaces, programs designed to empower at-risk youth, and rebranding and education efforts developed in conjunction with local partners.

During the fall of 2015, the local leadership group partnered with Vanderbilt University to conduct interviews and surveys with residents as part of an action research class. The class engaged with the local communities along Charlotte Avenue to understand the effects of past development projects on residents, the problems with access to healthy food along the corridor, and the experiences of residents who rely on the corridor for daily activities.

Recommendations

During the local workshop, the local leadership group identified four priority areas on which to focus short- and long-term action-oriented projects:

- 1. PROJECTS THAT IMPROVE HEALTH, placemaking, and connectivity;
- 2. AN IMPROVEMENT DISTRICT to guide development along the corridor;
- 3. APPROPRIATE FUNDING SOURCES; and
- 4. A POSSIBLE DEVELOPMENT OVERLAY for Charlotte Avenue.

Those priority areas guided a set of questions that the group prepared for the national study visit with national experts in January 2016.

STUDY QUESTIONS:

- >> How do we promote health along the corridor?
- >> How do we bring together champions for change and keep people engaged over the long haul?
- >> How can or should corridor improvements be funded and financed?
- >> What are quick wins or opportunities for immediate action?

The national study visit participants included experts on placemaking, transportation, real estate development, business improvement districts, planning, design, and economic development. They presented observations about and recommendations for Charlotte Avenue to a group of local stakeholders at a public meeting. Discussion touched on understanding the urgent need to develop a comprehensive health strategy that would counteract development pressures and

obsolete infrastructure, as well as on the need to address corridor challenges prior to, or concurrent with, new development opportunities that would make health-focused redevelopment easier to implement.

Identified assets that are unique to the corridor included a number of cultural resources, adjacent greenways, BRT lite, passionate stakeholders, and unique neighborhoods and pockets of vibrancy. Identified challenges included automobile-oriented infrastructure, limited fresh food options, sidewalks with unfavorable pedestrian conditions, and neighborhoods that are isolated because of the location of roads and freeways.

Key recommendations included the following:

ORGANIZATIONAL STRATEGIES: Identify champions to create an entity ("Friends of Charlotte Avenue") with a full-time leader to help implement priority initiatives along the corridor. Engage and coordinate residents and businesses, and aim to create a business improvement district or corridor improvement district in the future. Encourage the Richland Park area of Charlotte Avenue to become a "village" or node along the corridor.

CORRIDOR CONNECTIVITY: Implement low-cost, small-scale approaches as a first step to improve safety and infrastructure along the corridor (such as painted crosswalks and public art projects). Prioritize infrastructure changes such as widening sidewalks along Charlotte Avenue, adding a buffer between traffic lanes and pedestrians, adding pedestrian crossings and pedestrian-activated signals, enhancing lighting, minimizing curb cuts, activating the street level in new developments, and encouraging or requiring developers to build an improved public realm on their property. Leverage existing BRT with signal prioritization, improved pedestrian access, real-time arrival information, and (in the long term) dedicated lanes.

FOOD ACCESS: Focus new healthy food options on the neighborhoods north of Charlotte that have the poorest health outcomes. Consider implementing new, healthy, fast-casual or daytime food businesses near medical buildings and hospitals. Identify public funding sources to help support the development of full-service grocery stores along the corridor, which can also create jobs for local residents.

FUNDING: Look to private sector seed investment to establish the corridor's organizing entity. Leverage tax increment financing, and use Charlotte as a corridor demonstration project for building and infrastructure improvements. Identify major employers, foundations, and other anchor institutions that will fund specific pieces

of the Charlotte Avenue redevelopment effort. Those institutions can also contribute to the local economy by subsidizing mortgage loans for their staff members to live in properties near Charlotte. For example, the University of Pennsylvania offers employees a \$7,500 loan, forgivable after five years of employment, to assist them in purchasing homes near campus.

Next Steps

Based on recommendations from the national experts, the local leadership group is identifying nodes along the Charlotte Avenue corridor to serve as sites for piloting improvements and demonstrating what a healthy corridor could look like. The group is working in collaboration with the mayor's office and the Metropolitan Development and Housing Association to create a corridor coalition, an organization that will continue to manage healthy corridor strategies not only along Charlotte Avenue but also throughout the city of Nashville.

"Improving the health of the Charlotte Avenue corridor is about building connections. It's about creating places that connect to the surrounding neighborhoods, about building connections between diverse stakeholders, and connecting new developments to Nashville's parks and greenways," said John Vick, an epidemiologist with the Metro Nashville Public Health Department and member of the local leadership group. "We hope that as Charlotte Avenue transforms, it serves as an example of how to build places where health is a natural part of the decision-making and design process, where healthy choices become the easiest choices and are accessible to everyone."

INSET: National experts recommended that local stakeholders focus their efforts on starting a corridor-focused organization, identifying funding sources, and examining issues of connectivity and access to healthy food. (ULI Nashville)

BELOW: Encouraging an improved public realm, such as mural projects on blank walls, can enhance the pedestrian environment along Charlotte. (Jess Zimbabwe)

