



From: NoEmailProvided@columbiarivercrossing.org
To: [Columbia River Crossing](#)
CC:
Subject: Comment from CRC DraftEIS Comments Page
Date: Monday, June 02, 2008 3:37:29 PM
Attachments:

Home Zip Code: 97206
 Work Zip Code:

Person:

Person commutes in the travel area via:

P-0857-001

1. In Support of the following bridge options:
Supplemental Bridge
2. In Support of the following High Capacity Transit options:
Light Rail between Vancouver and Portland
3. Support of Bus Rapid Transit or Light Rail by location:
 Lincoln Terminus: Yes
 Kiggins Bowl Terminus: Yes
 Mill Plain (MOS) Terminus: Yes
 Clark College (MOS) Terminus: Yes

Contact Information:

First Name:
 Last Name:
 Title:
 E-Mail:
 Address:

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Comments:
 June 2, 2008

Rebecca Chung & Ariel Singer
 Master of Public Health students

P-0857-001

Preferences for specific alternatives or options, as expressed in comments received before and after the issuance of the DEIS, were shared with local sponsor agencies to inform decision making. Following the close of the 60-day DEIS public comment period in July 2008, the CRC project's six local sponsor agencies selected a replacement I-5 bridge with light rail to Clark College as the project's Locally Preferred Alternative (LPA). These sponsor agencies, which include the Portland City Council, Vancouver City Council, TriMet Board, C-TRAN Board, Metro Council, RTC Board, considered the DEIS analysis, public comment, and a recommendation from the CRC Task Force when voting on the LPA.

With the LPA, new bridges will replace the existing Interstate Bridges to carry I-5 traffic, light rail, pedestrians and bicyclists across the Columbia River. Light rail will extend from the Expo Center MAX Station in Portland to a station and park and ride at Clark College in Vancouver. Pedestrians and bicyclists would travel along a wider and safer path than exists today.

For a more detailed description of highway, transit, and bicycle and pedestrian improvements associated with the LPA, see Chapter 2 of the FEIS.

School of Community Health
Portland State University
PO Box 751 - SCH
Portland, OR 97207-0751

Dear City Official:

P-0857-002 As students in the Master of Public Health program at Portland State University, we are concerned about the health impacts of the Columbia River Crossing project. While the Columbia River Crossing (CRC) project is designed to prepare the region for projected growth, a transportation project of this size and scope could have broad and far-reaching effects on global climate change, as well as local environmental health.

P-0857-003 In addition to concerns relating to global warming, the CRC project has the potential to negatively impact health and quality of life for local communities. The communities in North and Northeast Portland located within close proximity to the proposed bridge site are among the most diverse in Portland, with many community members who come from racial or ethnic minority backgrounds; these populations are generally more impoverished, and at higher risk for disparities in health outcomes. If plans for the CRC move forward with little or no consideration of potential health impacts, these already vulnerable communities may experience widening health inequality.

The increase in car and truck travel that will result from expanded travel on the CRC will lead to deteriorating air quality for the entire region. The health impacts will be greatest for those who live in the I-5 corridor, many of whom already experience inequalities in outdoor air quality and important measures of morbidity and mortality.

P-0857-004 Please support a Climate Smart Columbia River Crossing, which would reduce all pollutants, re-green the corridor, and give people more transportation choices – all of which offer numerous health benefits. We must find a way to reduce the growth in driving, not just support improvements in vehicle and fuel technologies.

P-0857-005

Sincerely,

Rebecca Chung & Ariel Singer

P-0857-006 Pre-existing Disparities in Outdoor Air Quality:
Why the CRC Should Not Expand Capacity for Automotive Vehicles

- Outdoor air quality assessments conducted by the Multnomah County Health

P-0857-002

The DEIS and FEIS analyses of impacts to air quality, noise, electromagnetic fields, and other factors that can affect human health, are based on comparing the project’s impacts to specific standards that have been established to protect public health. Ensuring the project will meet or better these standards is used as a method to determine whether the project will have an adverse effect on human health. The criteria used in the DEIS and the FEIS are based on government regulatory standards where they have been established (such as for criteria air pollutants). Where regulatory standards do not exist, then the criteria are based on government agency guidelines or thresholds established by public health and safety professionals.

Modeling conducted for the DEIS and FEIS indicate that air emissions from I-5 traffic will be significantly lower by 2030 than they are today, and will be well below established regulatory standards designed to protect human health (see Section 3.10 of the DEIS and Section 3.10 of the FEIS). Noise impacts from I-5 traffic, with the mitigation proposed for the CRC project, will also be substantially lower than today. Noise from the light rail can be mitigated below FTA’s noise impact criteria as well (see Section 3.11 of the DEIS and Section 3.11 of the FEIS).

The DEIS did not explicitly evaluate potential effects on physical activity or obesity. However, the DEIS and FEIS both discuss how the project could affect the surrounding urban form that would increase opportunities for physical activity, including: improved bicycle and pedestrian facilities crossing the river; improved connections between existing and new bike and pedestrian paths and across I-5; the LRT extension and transit stations that support increased pedestrian-oriented development; improved sidewalks in Vancouver; and new pedestrian and bicycle connections crossing I-5. The project would also reduce daily hours of congestion on I-5 compared to the No-Build and provide greatly

P-0857-006

Department using data from the National Air Toxics Assessment (NATA) have shown that levels of 14 toxic air pollutants exceed the health-based benchmark, and that emission levels for six of these pollutants exceed the benchmark level by 10 times. Four of these pollutants can be traced to motor vehicles, including cars, trucks, and airplanes. In the region, Multnomah is the only county to exceed benchmark levels on all 14 indicators (Multnomah County Health Department, 2003).

- The median cancer risk for residents of Multnomah County (82 in a million) is twice that of the state of Oregon (39 in a million) for 33 of the most dangerous pollutants, and also far exceeds the national risk (45 in a million) (Multnomah County Health Department, 2003).
- Cancer risk is not equally distributed throughout the population - the cancer risk rate from air toxics is more than 100 per million in census tracts in North and Northeast Portland, and the highest rate in an area of North Portland (180 per million) is more than 4 times greater than the lowest risk rate in the County (46 per million) (Multnomah County Health Department, 2003).
- Because the neighborhoods of North and Northeast are populated by higher rates of minorities and individuals living in poverty, the health impacts of poor outdoor air quality may be greater for already disadvantaged populations (Multnomah County Health Department, 2003).
- According to a 2001 survey of Northeast Portland residents conducted by the Environmental Justice Action Group (EJAG), 14% of households surveyed had at least one person suffering from asthma, which is twice the national average of 7% (Podobnik, 2004).
- National research suggests that the high concentrations of truck routes, freeways, and industrial sites in Northeast Portland play a role in residents' elevated asthma levels. In fact, studies show that outdoor air pollution triggers asthma attacks and may even cause asthma (Moore and Bates, 2001) and that children living within close proximity to high volumes of traffic are much more likely to have asthma (Ostro, 2004).

improved transit service, both of which decrease the amount of time travelers spend in cars, thus further promoting physical activity.

P-0857-003

Please see response to comment P-0857-002.

P-0857-004

The locally preferred alternative will substantially improve water quality, reduce most air pollutants, reduce greenhouse gas emissions, and provide improvements to more transportation choices.

P-0857-005

As Chapter 3 (Sections 3.10 and 3.11) of the DEIS described, and as Chapter 3 (Sections 3.10 and 3.11) of the FEIS further elaborated, noise and air emission levels will improve for communities and most households along I-5. Air quality will be improved in large part by measures unassociated with the CRC project, such as regulated improvements in vehicle fuel emissions and in cleaner gasoline and diesel. Highway noise mitigation proposed for the CRC project would result in fewer noise impacts in the future with the project than there are today. There will be some locations where noise impacts cannot be mitigated. It is also true that with the introduction of light rail, better bicycle facilities, and a toll, the Average Daily Trips over the bridge will be reduced from the levels expected under the No-Build Alternative. The livability of residents along I-5 will also be improved as a result of greater personal mobility, an improved transit network, an improved network for walking and biking, less traffic cutting through neighborhoods, and the subsequent job creation that is expected to occur as a result of this major investment.

P-0857-006

Please see response to comment P-0857-002.