

# The Virginia Walkability Action Institute (VWAI) 2021

## WELCOME

Thank you for applying to the 2021 Virginia Walkability Action Institute (VWAI). The information provided will allow Virginia Department of Health and VWAI faculty to gain insight into your multi-sector regional team and gain an understanding of your community within which you would like to apply effective walking and walkability strategies.

### Application Deadline:

Applications must be received by 11:59 p.m. by Tuesday, October 20, 2020.

### Contact:

For questions or more information on VWAI, contact:

Megan Lopes, MPH

Healthy Communities Coordinator

Virginia Department of Health

megan.lopes@vdh.virginia.gov

## GENERAL INFORMATION

### Please indicate the following:

1. The LHD director is aware and supportive of the applicants' desire to participate in this VWAI Institute opportunity and acknowledges that the team will have sufficient staff time and resources to partake in this effort from November 2020 - September 2021 (which will include distance learning modules, in-person sessions, technical assistance/office hours, and time monthly to meet with the team virtually/in-person).  
 Yes  
 No
2. The appropriate local city and/or county representative(s) is/are aware and supportive of the applicants' desire to participate in VWAI opportunity and acknowledges that the team will have sufficient staff time and resources to partake in this effort from November 2020 - September 2021 (which will include distance learning modules, in-person sessions, technical assistance/office hours, and time monthly to meet with the team virtually/in-person).  
 Yes  
 No
3. Has a Community Health Assessment (CHA) been conducted within your locality?  
 Yes  
 No  
 Unsure
4. Has a Community Health Improvement Plan (CHIP) been conducted within your locality?  
 Yes  
 No  
 Unsure

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5. Has a Community Health Needs Assessment (CHNA) been conducted within your locality?

- Yes
- No
- Unsure

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6. Which one of the following best describes the community where you are employed?

- Urban
- Suburban
- Rural

**Team Members:**

**Please provide contact information for the applicants' LHD Project Lead and all team members for the VWAI opportunity. Please note that the Project Lead will serve as the point of contact for maintaining action plans, conveying information to the larger team, working directly with VWAI faculty and VDH staff to coordinate technical assistance sessions, etc.**

7. Please list the contact information for Team Members #1 (Project Lead).

Name (First, Last)

\_\_\_\_\_

Title

\_\_\_\_\_

Address

\_\_\_\_\_

City/Town

\_\_\_\_\_

State

\_\_\_\_\_

Zip/Postal Code

\_\_\_\_\_

LHD

\_\_\_\_\_

Email

\_\_\_\_\_

Phone Number

\_\_\_\_\_

8. What is the age of Team Member #1 (Project Lead)?

- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65+

9. What is the race of Team Member #1 (Project Lead)?

- White or Caucasian
- Black or African American
- Asian or Asian American
- American Indian or Alaska Native
- Native Hawaiian or other Pacific Islander
- Other

Other (please specify)

\_\_\_\_\_

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10. Does Team Member #1 (Project Lead) identify as Hispanic or Latino?  Yes  No

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11. What is the gender identity of Team Member #1 (Project Lead)?  Female  Male  Non-binary  Prefer to self-describe  Prefer not to say

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Prefer to self-describe \_\_\_\_\_

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12. Please list the contact information for Team Members #2 (Transportation SME/Professional).

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Name (First, Last) \_\_\_\_\_

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Title \_\_\_\_\_

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Address \_\_\_\_\_

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City/Town \_\_\_\_\_

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State \_\_\_\_\_

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Zip/Postal Code \_\_\_\_\_

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Email \_\_\_\_\_

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Phone Number \_\_\_\_\_

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13. What is the age of Team Member #2?  18-24  25-34  35-44  45-54  55-64  65+

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14. What is the race of Team Member #2?  White or Caucasian  Black or African American  Asian or Asian American  American Indian or Alaska Native  Native Hawaiian or other Pacific Islander  Other

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Other (please specify) \_\_\_\_\_

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15. Does Team Member #2 identify as Hispanic or Latino?  Yes  
 No

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16. What is the gender identity of Team Member #2?  Female  
 Male  
 Non-binary  
 Prefer to self-describe  
 Prefer not to say

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Prefer to self-describe \_\_\_\_\_

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17. Please list the contact information for Team Members #3.

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Name (First, Last) \_\_\_\_\_

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Title \_\_\_\_\_

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Address \_\_\_\_\_

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City/Town \_\_\_\_\_

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State \_\_\_\_\_

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Zip/Postal Code \_\_\_\_\_

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Email \_\_\_\_\_

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Phone Number \_\_\_\_\_

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18. What is the age of Team Member #3?  18-24  
 25-34  
 35-44  
 45-54  
 55-64  
 65+

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19. What is the race of Team Member #3?  White or Caucasian  
 Black or African American  
 Asian or Asian American  
 American Indian or Alaska Native  
 Native Hawaiian or other Pacific Islander  
 Other

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Other (please specify) \_\_\_\_\_

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20. Does Team Member #3 identify as Hispanic or Latino?  Yes  
 No

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21. What is the gender identity of Team Member #3?  Female  
 Male  
 Non-binary  
 Prefer to self-describe  
 Prefer not to say

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Prefer to self-describe \_\_\_\_\_

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22. Please list the contact information for Team Members #4.

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Name (First, Last) \_\_\_\_\_

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Title \_\_\_\_\_

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Address \_\_\_\_\_

---

City/Town \_\_\_\_\_

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State \_\_\_\_\_

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Zip/Postal Code \_\_\_\_\_

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Email \_\_\_\_\_

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Phone Number \_\_\_\_\_

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23. What is the age of Team Member #4?  18-24  
 25-34  
 35-44  
 45-54  
 55-64  
 65+

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24. What is the race of Team Member #4?  White or Caucasian  
 Black or African American  
 Asian or Asian American  
 American Indian or Alaska Native  
 Native Hawaiian or other Pacific Islander  
 Other

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Other (please specify) \_\_\_\_\_

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25. Does Team Member #4 identify as Hispanic or Latino?  Yes  
 No

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26. What is the gender identity of Team Member #4?  Female  
 Male  
 Non-binary  
 Prefer to self-describe  
 Prefer not to say

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Prefer to self-describe \_\_\_\_\_

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27. Please list the contact information for Team Members #5.

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Name (First, Last) \_\_\_\_\_

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Title \_\_\_\_\_

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Address \_\_\_\_\_

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City/Town \_\_\_\_\_

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State \_\_\_\_\_

---

Zip/Postal Code \_\_\_\_\_

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Email \_\_\_\_\_

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Phone Number \_\_\_\_\_

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28. What is the age of Team Member #5?  18-24  
 25-34  
 35-44  
 45-54  
 55-64  
 65+

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29. What is the race of Team Member #5?  White or Caucasian  
 Black or African American  
 Asian or Asian American  
 American Indian or Alaska Native  
 Native Hawaiian or other Pacific Islander  
 Other

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Other (please specify) \_\_\_\_\_

30. Does Team Member #5 identify as Hispanic or Latino?  Yes  No

31. What is the gender identity of Team Member #5?  Female  Male  Non-binary  Prefer to self-describe  Prefer not to say

Prefer to self-describe \_\_\_\_\_

\* Please note that lodging and reimbursement will be provided for up to five (5) regional team members. Additional team members are welcome to attend; however, teams will be responsible for all travel and accommodation expenses for additional members.

32. Would you like to add additional team members?  Yes  No

ADDITIONAL TEAM MEMBERS:

Reminder: Please note that the Project Lead will serve as the point of contact for maintaining action plans, conveying information to the larger team, working directly with VWAI faculty and VDH staff to coordinate technical assistance sessions, etc.

33. Please list the contact information for Team Members #6.

Name (First, Last) \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_

State \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_

Email \_\_\_\_\_

Phone Number \_\_\_\_\_



34. What is the age of Team Member #6?

- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65+

35. What is the race of Team Member #6?

- White or Caucasian
- Black or African American
- Asian or Asian American
- American Indian or Alaska Native
- Native Hawaiian or other Pacific Islander
- Other

Prefer to self-describe

\_\_\_\_\_

36. Does Team Member #6 identify as Hispanic or Latino?

- Yes
- No

37. What is the gender identity of Team Member #6?

- Female
- Male
- Non-Binary
- Prefer to self-describe
- Prefer not to say

Other (please specify)

\_\_\_\_\_

38. Please list the contact information for Team Members #7.

Name (First, Last)

\_\_\_\_\_

Title

\_\_\_\_\_

Address

\_\_\_\_\_

City/Town

\_\_\_\_\_

State

\_\_\_\_\_

Zip/Postal Code

\_\_\_\_\_

Email

\_\_\_\_\_

Phone Number

\_\_\_\_\_

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39. What is the age of Team Member #7?

- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65+

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40. What is the race of Team Member #7?

- White or Caucasian
- Black or African American
- Asian or Asian American
- American Indian or Alaska Native
- Native Hawaiian or other Pacific Islander
- Other

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Other (please specify)

\_\_\_\_\_

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41. Does Team Member #7 identify as Hispanic or Latino?

- Yes
- No

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42. What is the gender identity of Team Member #7?

- Female
- Male
- Non-binary
- Prefer to self-describe
- Prefer not to say

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Prefer to self-describe

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**COMMUNITY INFORMATION**

**We would like to learn more about your community. Please respond to the statements and questions below. Please note that applications will be score based on responses provided below. Scores will be used to determine which teams will be selected to participate in the VWAI.**

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43. Please describe the current opportunities and challenges your community of focus face related to building safer environments for walking and walkability. (10 points)

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44. The VWAI will focus on how multiple sectors (health, transportation, government, recreation, economic development, etc.) can collaborate to solve complex community issues such as walking and walkability. Please describe how your community of focus has addressed a community issue through partnerships and multi-sector collaborations that would indicate your capacity to work together on this project. (20 points)

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45. One of the desired outcomes of the VWAI is to give communities the tools and technical assistance they need to assess their community and work collaboratively to develop policies, plans and projects that improve safety and accessibility for people of all ages and abilities to walk. For example, this training could help prepare your community to develop a Pedestrian Safety and Mobility Plan. Please describe how this work advances existing policies or planning documents adopted, in progress or anticipated by your city or county and discuss why this is an opportune time for your community to take advantage of the VWAI. (30 points)

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**TEAM COMMITMENT**

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By submitting this application, you and your regional team are committing to the following:  
attending and participating in all in-person meetings, distance learning modules, and technical assistance/office hours sessions; completing monthly homework assignments; developing an action plan that is locality specific to improving walkability, and present to VWAI cohort and faculty; meeting with team members outside of planned VWAI learning modules and office hours to support development of an action plan; and, utilizing special project funding to support walkability in targeted areas of the locality.

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46. Will you and your team be able to commit to the tasks outlined above?  Yes  
 No  
 Maybe

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Maybe (please specify)

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