

August 2023

A Trauma-Informed Approach to Active Transportation

Recognizing the Relationship between Adversity, Resiliency, and Active Transportation



All Children Thrive
California



CDSS
CALIFORNIA
DEPARTMENT OF
SOCIAL SERVICES

ATRC
Active Transportation
Resource Center

Suggested Citation:

California and the California Department of Public Health, Injury and Violence Prevention Branch and California Department of Social Services, Office of Child Abuse Prevention, California Essentials for Childhood Initiative; California Department of Public Health, Active Transportation Safety Program; All Children Thrive, California (2023). A Trauma-Informed Approach to Active Transportation: Recognizing the Relationship between Adversity, Resiliency, and Active Transportation. Sacramento, CA: California Department of Public Health; California Department of Social Services; All Children Thrive, California.

Acknowledgments

“A Trauma-Informed Approach to Active Transportation: Recognizing the Relationship between Adversity, Resiliency, and Active Transportation” Brief was collaboratively developed by the [California Department of Public Health, Injury and Violence Prevention Branch \(CDPH/IVPB\)](#) and [California Department of Social Services, Office of Child Abuse Prevention \(CDSS/OCAP\)](#)’s, [California Essentials for Childhood \(EfC\) Initiative](#), [CDPH/IVPB’s Active Transportation Safety Program \(ATSP\)](#), and the [All Children Thrive - California \(ACT\) Initiative](#).

The EfC Initiative is a project funded by the [Centers for Disease Control and Prevention \(CDC\)](#) and is led in partnership by the CDPH/IVPB and the CDSS/OCAP. The EfC Initiative seeks to address child maltreatment and Adverse Childhood Experiences (ACEs) as public health issues; aims to raise awareness and commitment to promote safe, stable, nurturing relationships, and environments (SSNR&E); creates the context for healthy children and families through social norms change, programs, and policies; and utilizes data to inform actions.

CDPH/IVPB’s, Active Transportation Safety Program, supported by the [California Department of Transportation's \(Caltrans\) Active Transportation Program \(ATP\)](#) and the Active Transportation Resource Center (ATRC), assists local communities with creating, evaluating, and sustaining active transportation education and encouragement (non-infrastructure) programs, including Safe Routes to School (SRTS) programs, through targeted trainings, technical assistance, and resources. ATSP’s purpose is to:

- Build and support capacity among local SRTS and other active transportation non-infrastructure (NI) programs;
- Conduct activities that complement and inform Caltrans’ ATP infrastructure projects, including assisting jurisdictions that have not yet received funding;
- Engage low-income schools and communities in establishing active transportation programs, and ultimately, increase the number of individuals who can safely walk and bicycle to school and other key destinations.

The mission of All Children Thrive - California (ACT) is to prevent childhood trauma and shift power in local government by empowering youth and adult residents to create sustainable policy change that center children and their families. With funding from CDPH and technical support from [Public Health Advocates](#) and the [University of California, Los Angeles \(UCLA\) Center for Healthier Children, Families, and Communities](#), ACT builds capacity through training and coaching that democratizes data, raises awareness around ACEs prevention and social determinants of health, develops resources, and connects individuals within and across the state.

“A Trauma-Informed Approach to Active Transportation: Recognizing the Relationship between Adversity, Resiliency, and Active Transportation” Brief benefited from the generosity and support of the following partners who contributed to the development of this resource:

- EfC Initiative Trauma-Informed Practices Subcommittee
- City of Pasadena Public Health Department
- Los Angeles, County Public Health, Policies for Livable, Active Communities, and Environments (PLACE) program
- Safe Routes Partnership

- Los Angeles County Department of Public Health Office of Violence Prevention Trauma Prevention Initiative (TPI)
- CDPH, Office of Health Equity, Climate Change and Health Equity Section
- Safe Routes Partnership
- And many others...

Purpose, Use, and Development

“A Trauma-Informed Approach to Active Transportation: Recognizing the Relationship between Adversity, Resiliency, and Active Transportation” Brief, is a resource developed to support the efforts of active transportation safety partners and stakeholders as they work to educate decisionmakers about where opportunities exist to adopt and implement trauma-informed practices and approaches.

When social and environmental conditions are optimized to meet basic physical activity requirements, transportation needs, and an environment is fostered in which people and communities are able to heal from past trauma(s), individuals and communities can become more resilient.^{1,2,3,4}

Development of this document began- with discussions amongst subject matter experts and research on best practices. Throughout the lifecycle of this project, the EfC Initiative, provided feedback and contributed to the content. Finally, consumer testing was conducted with active transportation safety partners and stakeholders to further refine and tailor this resource’s content before publication.

Background

What is Active Transportation?

Active transportation is the means of traveling from one place to another by way of any self-propelled, human powered, mode of transportation (e.g., walking or bicycling).^{5,6} Active transportation forms the connection between physical activity and transportation choices.⁵ Despite their many benefits, means of active transportation, such as walking and bicycling, are viewed by some Americans as unsafe activities due to heavy traffic and a scarcity of sidewalks, crosswalks, and bicycle features. Improving these elements and engaging communities through education, planning, and design can encourage more active transportation for all.⁶

What are ACEs?

ACEs are traumatic events that occur before age 18, including physical, emotional, or sexual abuse, emotional or physical neglect, and other types of household challenges, such as mental illness, substance use, incarceration, parental separation or divorce, having a family member attempt or die by suicide, or witnessing domestic violence.⁷ Further, populations can experience ACEs through historical and ongoing traumas such as systemic racism, being chronically under-resourced, or enduring the widespread impacts of poverty. ACEs are also highly prevalent and can have long-term negative health effects by creating toxic stress.

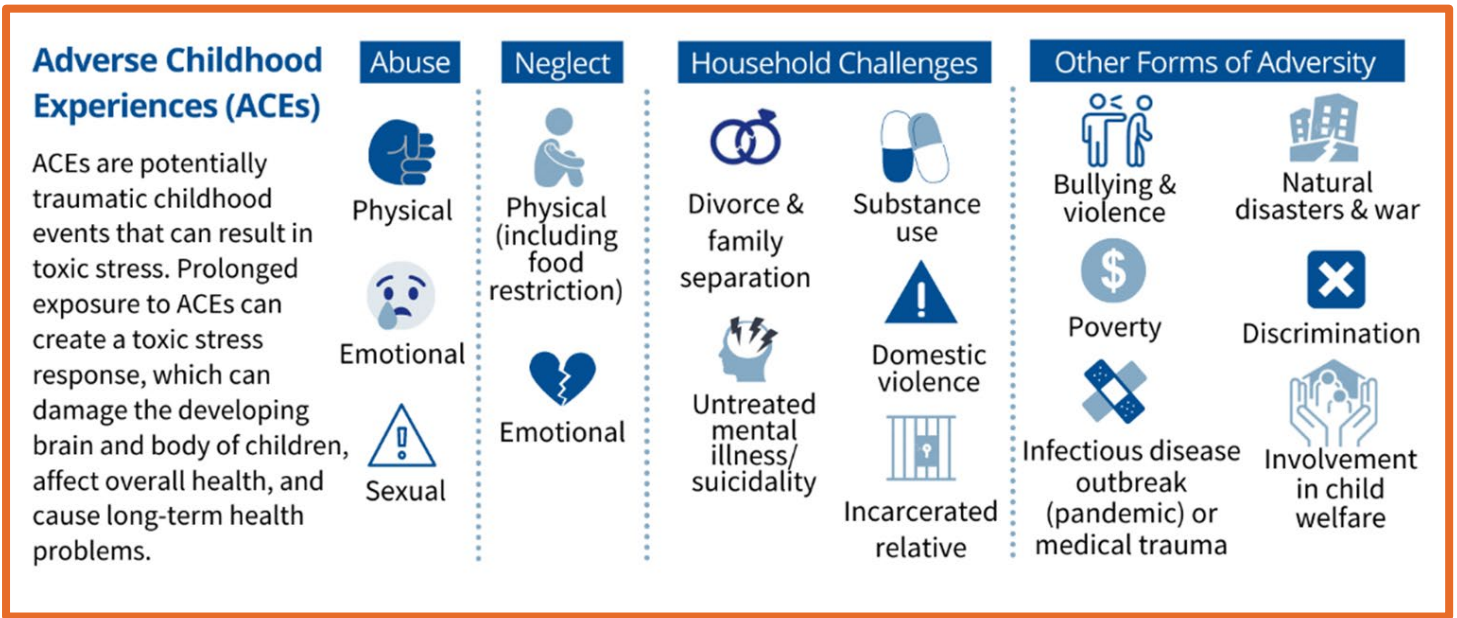


Figure 1: The above image was adapted from the Robert Wood Johnson Foundation ^{8,9,10,11,12,13,14,15,16}

While most people experience adversity at some point in their lives, when these experiences happen in childhood, they can shape children’s brains and bodies at critical points in development. Prolonged exposure to multiple forms of adversity without buffering supports from trusted caregivers and safe, stable, nurturing relationships and environments, may lead to a biological stress response in the body called toxic stress that can affect children’s growth and development.¹⁷ As such, traumatic experiences in childhood are even more significant in shaping the way they see the world, how their bodies respond to surroundings, and their perception of themselves and others.¹⁸

ACEs are preventable.⁹ Primary prevention efforts can address the problem before it even begins.¹⁹ When community-driven policies that center health equity are implemented, supportive systems and protective environments can emerge.²⁰

Understanding Trauma	
“Trauma” is physically or emotionally harmful or life-threatening events that can have lasting adverse effects on an individual’s health and well-being. ²¹	
Trauma may affect one’s level of risk for increased injury or harm to oneself or others. ^{22,23} Trauma may also influence our ability and readiness to adopt and support healthy behaviors, including walking or bicycling for exercise, recreation, or transportation. ^{9,10}	
Historical Trauma	Results from multi-generational trauma experienced by specific cultural or racial/ethnic groups. It is related to major oppressive events such as slavery, segregation, the Holocaust, forced migration, and the violent colonization of Indigenous people. ^{8,24} More recent examples that have direct impacts on active transportation include racial profiling and over-policing of Black, Brown, and Indigenous communities. ^{25,26,27}

Understanding Trauma	
Systemic Trauma	Refers to the contextual features of environments and institutions that produce and/or sustain trauma and influence post-traumatic responses. ²⁸ Redlining and restrictive agreements and the destruction of communities to make way for highway development are examples of systemic trauma that manifest in active transportation mobility and safety disparities. ²⁴
Community Level Trauma	Can be seen within the deteriorated and unhealthy physical environments. This often includes dangerous public spaces with crumbling-built environments, high speed roads, roads without safe spaces to walk, bicycle, or recreate, and high availability of unhealthy products, such as alcohol. ²⁹
Individual Level Trauma	Active transportation-related physical trauma can result from either unintentional or intentional (violent) traffic crashes, injuries, and death from motor vehicle drivers. ^{30,31} Emotional trauma has been associated with street harassment and personal safety. ³²

Why Use a Trauma-Informed Approach to Active Transportation?

A trauma-informed approach seeks to acknowledge the role ACEs and other forms of adversity play in a person's life.³³ Trauma-informed practices and approaches focus adopting and implementing policies and practices that create safety and trust by providing supportive services, systems, and communication with people who have experienced trauma.³⁴ When establishing active transportation practices, trauma-informed principles can be adapted and applied to the built environment.³⁵ Research suggests that a trauma-informed built environment may promote well-being at the individual level (increased feeling of safety), improve the social environment (greater community connectivity), and complement traditional person-centered efforts to address trauma.²⁷

The impact of the built environment on health and active living is an evolving field of study.³⁶ Changes to the built environment are considered a promising strategy for creating population-wide access to stress buffering factors such as nutrition and physical activity.¹⁷ The physical or built environment can also play a significant role in promoting or discouraging physical activity such as walking and bicycling. Positive environmental conditions (e.g., pedestrian and bicycle friendly street design and designation) can be developed to reduce risks for trauma and support physical and emotional safety. Environmental conditions can also be modified to welcome and be more inclusive of vulnerable or historically disenfranchised communities who may tend to be left out of community planning and decision-making.¹⁷ Positive environmental changes to increase active transportation (i.e., walking, biking, and public transportation) can improve access to health-promoting factors, especially for vulnerable or historically disenfranchised communities.¹⁷

Trauma-informed practices can and have been applied to active transportation education and programs whose aims are to increase walking, bicycling, and the safety of people walking and bicycling. Key to program design is the recognition of past and current traumas and approaches to program delivery which emphasize empathy and compassion for the community of focus. While research is limited in this area, active transportation advocates have begun to adopt a trauma-informed framework as part of their active transportation efforts.³⁷

Strategies to Promote Community Resilience

Trauma-informed Active Transportation strategies, informed by “[Adverse Community Experiences and Resilience: A Framework for Addressing and Preventing Community Trauma](#)”,²¹ can provide buffers and build resilience against adversity at the individual, family, and community levels. These strategies may include:³⁸

- Improving the quality, safety, accessibility, and inclusivity of the built environment and routes to those public spaces by:
 - Creating more accessible sidewalks and bike lanes that are inside or away from cars and traffic.
 - Posting signage that is easily accessible and viewable by all (e.g., pedestrian crossing, share the road)³⁹
- Slowing vehicle speeds through traffic calming engineering³⁹
- Enhancing pedestrian safety:
 - Creating connections to parks
 - Introducing wayfinding (i.e., a system of comprehensive signage along bicycle and pedestrian networks to inform people of their surroundings and guide people to their destination)⁴⁰
 - Enhancing lighting⁴⁰
- Beautification of public spaces:
 - Greening of transportation routes
 - Introducing culturally responsive art along corridors and at transit stops
- Bolstering social cohesion, community pride, and safe mobility for all ages and abilities through community-driven events like Open Streets or Play Streets²¹

Resiliency is the ability to withstand or recover from stressors, resulting from a combination of intrinsic factors, extrinsic factors, and predisposing biological susceptibility.¹⁷

Individual and community level strategies can help reduce individual and community trauma as well as the risk of violence or threat of violence.²¹ These strategies in turn create a more resilient community where there are safe parks and open spaces, increased perceptions of safety, increased availability of healthy products and quality of housing, which results in increased well-being for individuals, families, and communities.²¹

Six Key Principles of a Trauma-Informed Approach

The Substance Abuse and Mental Health Services Administration (SAMHSA)s has developed six guiding principles to applying a trauma-informed approach that can further support active transportation’s efforts to address adversity through planning, programming, and development.⁴¹ The following chart shares the six trauma-informed principles and EfC Initiative’s Trauma-Informed Practices Subcommittee members suggestions for application by active transportation stakeholders and partners:

Trauma-Informed Principle	Application to Active Transportation
<p>Safety: An environment that consistently</p>	<p>It is critical that programs and environments are designed to support physical, emotional, and personal safety for all. This means considering all ages, cultures, races, and demographics of people</p>

supports stress de-escalation, healthy choices, and wellness practices.	served; acknowledging existing and intersecting traumas in program design; and prioritizing the necessary trainings and supports for those tasked with fostering safety to ensure that stressful situations can be de-escalated; and that the staff are who respond to traumatic incidents are supported.
Trustworthiness and Transparency: Staff are well-trained to deliver trauma-informed services.	Active transportation planning and programs should include those they serve in decision-making. Meaningful and ongoing community engagement builds trust with communities.
Peer Support: Recognition of oneself and the community as wise and resourceful.	Programs that center peer support recognize their communities as wise and resourceful. Hiring people from within the community to help to undertake active transportation-related activities is one example of peer support. Peer support gives people in communities the opportunity to apply their knowledge and expertise in a way that brings added insight and relevance to their efforts.
Collaboration and Mutuality: Opportunities to exercise voice and self-determination.	It is important to recognize that there is a need to apply an intentional approach to break down hierarchies and ensure that interventions are mutually beneficial, and not retraumatizing. To support efforts to exercise self-determination and healing, create opportunities for open dialogue to demonstrate a commitment to prioritizing the well-being of those served and those providing services.
Empowerment, Voice, and Choice: Intentional opportunities to practice and grow tangible skills for self-efficacy.	Active transportation programs that integrate leadership development and build self-efficacy through mentoring, skills training, and applied learning are central to supporting community resilience. Ongoing community engagement and leadership investment can create informed and thoughtful community ambassadors who serve as safety mobility champions, as well as champions for other desired changes.
Cultural Humility and Responsiveness: Efforts that center culturally responsive interactions and experiences. ^{42,43}	Active transportation programs that actively move past cultural stereotypes and biases (e.g., race, ethnicity, sexual orientation, age, geography, economics), can offer gender responsive services, leverage the healing value of traditional cultural connections, and recognize and address historical trauma.

Conclusion

Intentionally applying trauma-informed practices to promising active transportation strategies may help to create safe parks and open spaces, improve overall perceptions of safety in the community, increase the availability of healthy products and quality of housing, and enhance the sense of wellbeing and resiliency for individuals, families, and communities. California is working to implement programs that encourage and promote safer active transportation through California's Active Transportation Program which funds over 800 projects across the state. Examples include:

- [Safe Routes to School](#): encourages a healthy and active lifestyle for students.
- [Sustainable Transportation Equity Project](#): promotes active transportation safety by creating new bike routes, new walkways that improve safety, and street crossing enhancements.

- [Vision Zero Plans](#): Implemented by many [counties within California](#) which establish goals to eliminate fatalities within transportation systems.
- [Complete Streets from Smart Growth America](#) and [Safe Routes for Older Adults](#): programs that may serve as a model for a safer system for pedestrians and bicyclists.

¹ Moon, I.; Han, J. *Moderating Effects of Physical Activity on the Relationship between Adverse Childhood Experiences and Health-Related Quality of Life*. Int. J. Environ. Res. Public Health 2022, 19, 668. <https://doi.org/10.3390/ijerph19020668>

² Pinderhughes, H., Davis, R., & Williams, M. (2015). *Adverse community experiences and resilience: A framework for addressing and preventing community trauma*.

³ Schroeder, K., Noll, J. G., Henry, K. A., Suglia, S. F., & Sarwer, D. B. (2021). *Trauma-informed neighborhoods: Making the built environment trauma-informed*. Preventive medicine reports. 23, 101501

⁴ Center for Community Resilience: Milken Institute School of Public Health: The George Washington University. Center for Community Resilience | Milken Institute School of Public Health. (n.d.). Retrieved January 11, 2023, from <https://ccr.publichealth.gwu.edu/>

⁵ Rails to Trails: Partnership for Active Transportation. [Why Active Transportation](#). Retrieved from <https://www.railstotrails.org/partnership-for-active-transportation/why/>

⁶ Centers for Disease Control and Prevention. (2011). [Transportation Health Impact Assessment Toolkit](#). Retrieved from https://www.cdc.gov/healthypplaces/transportation/promote_strategy.htm

⁷ California Department Public Health, Injury and Violence Prevention Branch and the California Department of Social Services, Office of Child Abuse Prevention, California Essentials for Childhood Initiative. *Adverse Childhood Experiences Data Report: Behavioral Risk Factor Surveillance System (BRFSS), 2013-2019: An Overview of Adverse Childhood Experiences in California*. CA: California Department of Public Health and the California Department of Social Services; 2022

⁸ Robert Wood Johnson Foundation (2013). [The truth about ACEs infographic](#). Retrieved from <https://www.rwjf.org/en/library/infographics/the-truth-about-aces.html>

⁹ Centers for Disease Control and Prevention. (2019). *Preventing adverse childhood experiences: Leveraging the best available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

¹⁰ Cronholm, P.F., Forke, C.M., Wade, R., Bair-Merritt, M. H., Davis, M., Harkins-Schwarz, M., Pachter, L. M., & Fein, J. A. (2015). *Adverse Childhood Experiences: Expanding the Concept of Adversity*. Am J Prev Med, 49(3):354-361. Doi:10.1016/j.amepre.2015.02.001

¹¹ Walsh, D., McCartney, G., Smith, M., & Armour, G. (2019). *Relationship between childhood socioeconomic position and adverse childhood experiences (ACEs): a systematic review*. Journal of epidemiology and community health, 73(12), 1087–1093. <https://doi.org/10.1136/jech-2019-212738>

¹² Choi K.R., Stewart T., Fein E., McCreary, M., Kenan, K.N., Davies J.D., Naureckas, S., Zima, B.T. (2020). *The Impact of Attachment-Disrupting Adverse Childhood Experiences on Child Behavioral Health*. J Peds, 221: 224-229. <https://doi.org/10.1016/j.jpeds.2020.03.006>.

¹³ Choi, K. R., McCreary, M., Ford, J. D., Rahmanian Koushkaki, S., Kenan, K. N., & Zima, B. T. (2019). *Validation of the Traumatic Events Screening Inventory for ACEs*. Pediatrics, 143(4). <https://doi.org/10.1542/peds.2018-2546>

¹⁴ Lemon, E.D., Vu, M., Roche, K.M. et al. (2021). *Depressive Symptoms in Relation to Adverse Childhood Experiences, Discrimination, Hope, and Social Support in a Diverse Sample of College Students*. J. Racial and Ethnic Health Disparities. <https://doi.org/10.1007/s40615-021-01038-z>

¹⁵ Bernard, D. L., Smith, Q., & Lanier, P. (2021). *Racial discrimination and other adverse childhood experiences as risk factors for internalizing mental health concerns among Black youth*. Journal of traumatic stress, 10.1002/jts.22760. Advance online publication. <https://doi.org/10.1002/jts.22760>

¹⁶ Bernard, D. L., Calhoun, C. D., Banks, D. E., Halliday, C. A., Hughes-Halbert, C., & Danielson, C. K. (2020). *Making the "C-ACE" for a Culturally-Informed Adverse Childhood Experiences Framework to Understand the Pervasive Mental Health Impact of Racism on Black Youth*. Journal of child & adolescent trauma, 14(2), 233–247. <https://doi.org/10.1007/s40653-020-00319-9>

¹⁷ Bhushan, D., Kotz, K., McCall, J., Wirtz, S., Gilgoff, R., Dube, S.R., Powers, C., OlsonMorgan, J., Galeste, M., Patterson, K., Harris, L., Mills, A., Bethell, C., Burke Harris, N., Office of the California Surgeon General (2020). *Roadmap for Resilience: The California Surgeon General's Report on Adverse Childhood Experiences, Toxic Stress, and Health*. Office of the California Surgeon General. DOI: 10.48019/PEAM8812

- ¹⁸ All Children Thrive – California (2020). All Children Thrive – *California Partner Toolkit*. Sacramento, CA: All Children Thrive – California
- ¹⁹ Centers for Disease Control and Prevention. *Picture of America: Our Health and Government: Prevention*. Atlanta, GA: Centers for Disease Control and Prevention.
- ²⁰ Center for Community Health and Development. *Chapter 25: Changing Policies*. University of Kansas. Retrieved from the Community Tool Box: <https://ctb.ku.edu/en/table-of-contents/implementation/changing-policies/overview/main>
- ²¹ *Preventing Adverse Childhood Experiences*. (2019). [Center for Disease Control and Prevention](https://www.cdc.gov/violenceprevention/childabuseandneglect/aces/fastfact.html). Retrieved from <https://www.cdc.gov/violenceprevention/childabuseandneglect/aces/fastfact.html>
- ²² Substance Abuse and Mental Health Services Administration. *Trauma-Informed Care in Behavioral Health Services*. Treatment Improvement Protocol (TIP) Series 57. HHS Publication No. (SMA) 13-4801. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014
- ²³ Cohen, L., Davis, R., Lee, V., & Valdovinos, E. (2010). *Addressing the Intersection: Preventing Violence and Promoting Healthy Eating and Active Living*. Prevention Institute.
- ²⁴ Safe Routes Partnership. (2020). [We built it this way: A primer on transportation inequity](https://stroymaps.arcgis.com/stories/4a59382ff9884adcac7ca84e44794337). Retrieved from <https://stroymaps.arcgis.com/stories/4a59382ff9884adcac7ca84e44794337>
- ²⁵ National Academies of Sciences, Engineering, and Medicine 2021. *Community Safety and Policing: Proceedings of a Workshop in Brief*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/26099>
- ²⁶ Bailey JA, Jacoby SF, Hall EC, Khatri U, Whitehorn G, Kaufman EJ. *Compounding Trauma: The Intersections of Racism, Law Enforcement, and Injury* [published online ahead of print, 2022 May 12]. *Curr Trauma Rep*. 2022;1-8. doi:10.1007/s40719-022-00231-7, [Compounding Trauma: the Intersections of Racism, Law Enforcement, and Injury - PMC \(nih.gov\)](https://doi.org/10.1007/s40719-022-00231-7)
- ²⁷ Delores Jones-Brown & Jason M. Williams (2021). [Over-policing Black bodies: the need for multidimensional and transformative reforms](https://doi.org/10.1080/15377938.2021.1992326). *Journal of Ethnicity in Criminal Justice*, 19:3-4, 181-187, DOI: [10.1080/15377938.2021.1992326](https://doi.org/10.1080/15377938.2021.1992326).
- ²⁸ Goldsmith, R. E., Martin, C. G., & Smith, C.P. (2014). *Systemic Trauma*. *Journal of Trauma & Dissociation*, 15(2), 117–132. doi: [10.1080/15299732.2014.871666](https://doi.org/10.1080/15299732.2014.871666)
- ²⁹ Pinderhughes, H., Davis, R., Williams, M. (2015). [Adverse community experiences and resilience: A framework for addressing and preventing community trauma](https://doi.org/10.1007/978-1-4939-9888-8_10). Prevention Institute.
- ³⁰ National Institute of General Medical Sciences. *What is physical trauma?* (2020) Retrieved from <https://www.nigms.nih.gov/education/fact-sheets/Pages/physical-trauma.aspx>
- ³¹ Luiz Alves Peixoto de melo, W., Goncalves de Souza, W., Balduino de Santana, M., Gomes de Oliveira, R., Mendes, L., Alves, W., Rossetto, J., & Silva, D. (2021). *Physical and psychological trauma caused by traffic accidents*. *International Journal of Advanced Engineering Research and Science (IJAERS)*, 8(10). <https://dx.doi.org/10.22161/ijaers.810.8>
- ³² Stop Street Harassment. (2014) *Unsafe and Harassed in Public Spaces: A National Street Harassment Report*.
- ³³ SAMHSA’s Trauma and Justice Strategic Initiative. (2014). *SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach*. <https://store.samhsa.gov/system/files/sma14-4884.pdf>
- ³⁴ Darroch, F., Roett, C., Varcoe, C., Oliffe, J., Montaner, G. (2020). [Trauma-informed approaches to physical activity: A scoping study](https://doi.org/10.1016/j.ctcp.2020.101224). *Complementary Therapies in Clinical Practice*. <https://doi.org/10.1016/j.ctcp.2020.101224>
- ³⁵ Schroeder, K., Noll, J., Henry, K., Suglia, S., Sarwer, D. (2021). [Trauma-informed neighborhoods: Making the built environment trauma-informed](https://doi.org/10.1016/j.pmedr.2021.101501). *Preventive Medicine Reports*, 23. <https://doi.org/10.1016/j.pmedr.2021.101501>
- ³⁶ Suglyama, T., Francis, J., Middleton, N., Owen, N., Giles-Corti, B. (2010). [Associations between recreational walking and attractiveness, size, and proximity of neighborhood open spaces](https://doi.org/10.2105/AJPH.2009.182006). *American Journal of Public Health*, 100(9). Doi:10.2105/AJPH.2009.182006
- ³⁷ Untokening: People for Mobility Justice. *Untokening 1.0 – Principles of Mobility Justice*. (2017). Retrieved from www.untokening.org/updates/2017/11/11/untokening-10-principles-of-mobility-justice
- ³⁸ Redstone, S. M. (n.d.). *Building Community Resilience: Coalition Building and Communications Guide*. Retrieved January 18, 2023, from <https://publichealth.gwu.edu/sites/default/files/downloads/Redstone-Center/BCR%20Coalition%20Building%20and%20Communications%20Guide.pdf>
- ³⁹ Lauren Lansford. (2020). *Beyond Diversity: Trauma Sensitivity in Cycling*. Retrieved from <https://www.gravelstoke.com/gravel-cycling-gear-blog/beyond-diversity-trauma-sensitivity-in-cycling>
- ⁴⁰ City of West Sacramento. (2022, June 26). City of West Sacramento. *Active Transportation Wayfinding Signage Program*. Retrieved February 17, 2023, from <https://www.cityofwestsacramento.org/government/departments/capital-projects->

department/projects/active-transportation-wayfinding-signage-program#:~:text=Wayfinding%20signage%20is%20the%20collection,right%20direction%20to%20their%20destination.

⁴¹ SAMHSA's Trauma and Justice Strategic Initiative. (2014). SAMHSA's *Concept of Trauma and Guidance for a Trauma-Informed Approach*. <https://store.samhsa.gov/system/files/sma14-4884.pdf>

⁴² Amanda J. Waters, M., & Lisa Asbill, M. (2013, August). *Reflections on cultural humility*. Retrieved from American Psychological Association: <https://www.apa.org/pi/families/resources/newsletter/2013/08/cultural-humility>

⁴³ Lekas, H. M., Pahl, K., & Fuller Lewis, C. (2020). *Rethinking Cultural Competence: Shifting to Cultural Humility*. *Health services insights*, 13, 1178632920970580. <https://doi.org/10.1177/1178632920970580>