Urban Forestry Commission/IDT Annual Meeting Wednesday, October 3, 2016 12:00 noon - 4:30 pm Camp Long

Meeting Notes

Meeting Attendees:

Urban Forestry Commission

Jessica Jones Shari Selch
Joanna Nelson de Flores Steve Zemke
Michael Walton Weston Brinkley
Sandra Whiting Whit Bouton

Sarah Rehder

Urban Forest Interdepartmental Team

Anna Rylko
Ben Roberts
Jim LeBlanc
Chanda Emery
Jon Jainga
Clayton Antieau
Lisa Ciecko
Cindy Kozak
Maggie Glowacki
David Bayard
Michael Yadrick

David Bayard Michael Yadrick
David Body Nick Johnson

David Mutchler Sandra Pinto de Bader

Deb HeidenShane DewaldEric SternerStephen Socie

Glen Allen

Guests

Andrea Petzel - Facilitator Michelle Caulfield - OSE
Bobby Cochran - presenter Sara Pizzo – note taker
Kathy Wolf - presenter Tracy Stanton - support

Meeting Goals:

- Strengthen the partnership between the Urban Forestry Commission and the Urban Forest Interdepartmental Team in order to accomplish the goals of the Urban Forest Management Plan (UFMP).
- 2. Explore opportunities for including a public health component as part of the Urban Forest Management plan update.

Meeting Summary

Kathy Wolf, Ph.D. gave a presentation that highlighted trees as a health asset. Dr. Wolf discussed the public health benefits of trees and green space at every stage of human life. Following Dr. Wolf's presentation, meeting attendees discussed and shared what they learned and would like to implement in their work at the City.

Following the Q&A period, meeting attendees broke into small groups to share what they learned from Dr. Wolf's presentation and how they would want to implement what they learned in their work. Below are the comments and questions that surfaced during the large group discussion:

- We constantly try to educate residents about the level of service we provide for trees, or hazards and risk factors, and people never seem to like the answer to their questions.
 Therefore, we need to get information out to the public, especially newer residents that might not understand why we do what we do and the health benefits of urban forests.
- Is anyone doing research to discredit the benefits of trees?
- How does vegetation affect gentrification? This should be discussed explicitly in the plan update and can be inspired from or coincide with the Equity and Environment Initiative.
- What are we planting when trees are removed for development?
 - Are the trees we plant optimal when it comes to health benefits, biodiversity, etc.?
 - o Is our selection of vegetation for replanting best in the long term, or will they cause additional problems we are not anticipating?
- We remove native biomass during development and replace it with new sterile soil. We should strive to retain the old soils because soils are a critical part of the ecosystem.
- Can we draw on wetland mitigation regulation to inform soil and vegetation retention?
 - SDOT is working on an incentive for developers to protect the soil and get credit for doing so.
- There should be analysis and strategic planning regarding the incorporation of environmental and health impacts.
- We need to take into consideration cultural practices to make urban forests more "user friendly" in Seattle.
- We need to be aware that "urban forest" might mean danger to some populations.
- If human health is a goal in this plan, then it might shift strategies for forest health.
- Are there pathways for lumping trees and neighborhood benefits together, maybe through a fee in-lieu approach?
- We should address homelessness in the plan.
- What technology is used to monitor and maintain trees/the built environment?

- Just because sidewalk is damaged does not mean it is time to remove a tree.
- We need to find a way to work with all agencies because we run up against their properties in our work, especially WSDOT. The parcels need to be combined together to create a large-scale urban forest that will provide public health benefits across the region.

After a brief break, Bobby Cochran delivered a presentation on how urban forests can improve public health and provided practical examples of how health data and metrics are used to shape public policy. Mr. Cochran pointed out that when people and communities are thriving, nature can thrive too. Mr. Cochran strongly emphasized that social equity is central to improving public health outcomes and discussed how urban forests can be a means to that end. After Mr. Cochran's presentation, meeting attendees discussed how they would like to integrate public health values into the Urban Forest Management Plan update.

Following the Q&A period, meeting attendees broke into small groups to discuss how public health will be incorporated into the Urban Forest Management Plan update. Below are the groups comments and questions from their discussions:

- Can we frame the plan from different neighborhood's perspectives?
 - Tailor the goals of the plan to each neighborhood.
 - o Engage the community in storytelling.
- Weave public health into the whole plan; do not leave as a separate topic in one section.
- There are lot of opportunities with this plan.
 - Commitment to partnership with different government agencies.
 - o Engage leadership.
 - o Research opportunities because Seattle may be one of the first cities to bring public health into an urban forestry plan.
 - o Experiment with different practices and learn from those experiments.
- Human health is difficult to put into action. How do we make this actionable?
 - Use data to instigate efforts to make the plan actionable.
 - We need uniform data across departments.
 - Use data to get health indicators/health outcomes.
 - What are the key metrics?
- If we only focus on trees in urban forestry work, we lose the soil and other parts of the ecosystem. The plan should be inclusive of all ecosystem components.
- Humans are also part of the ecosystem, so the plan must be human-centered.
- Humans cannot be separated from the ecosystem (and vice versa). Although this group of people understands this concept, we struggle to make that connection for others.
- We need standards for health beyond number of doctor visits.

- o (i.e. happiness, stewardship, social connectedness).
- A human health centered plan requires us to make more leaps.
 - o For example, having a complete ecosystem is good because it will improve mental health, which will lower suicide rates.
 - Instead of thinking of it as "leaps," use the social determinants of health framework.
- This should not be just a 5-year plan, it should be long-term. It should include a discussion of climate change, composition of the forest, and how it can change, and what we need to be tracking.

Concluding Remarks - Thank you and Wrap Up

This annual meeting is an opportunity to connect the commission with staff, so thank you all for participating and thank you Kathy Wolf and Bobby Cochran for being the guest speakers this year.