IPH response to Department for Regional Development Regional Transportation Strategy Review

21 Dec 2009

Department for Regional Development (DRD) launched a review into the current Regional Transportation Strategy Review in 2009. Travel behaviour can make a significant contribution to physical activity levels and subsequent risk of poor health including conditions such as obesity. DRD can play a key role in tackling obesity in Northern Ireland through the Regional Transportation Strategy. IPH submitted the below response.

IPH Submission to the Regional Transportation Strategy Review Department for Regional Development

Submitted: 18th December 2009

Introduction

The Institute of Public Health in Ireland

The Institute of Public Health in Ireland (IPH) aims to improve health on the island of Ireland by working to combat health inequalities and influence public policies in favour of health. The Institute promotes cooperation between Northern Ireland and the Republic of Ireland in public health research, training and policy advice.

IPH acknowledges that health is influenced by a wide range of social determinants, including economic, environmental, social and biological factors. Transport is one of the key determinants of health and IPH welcomes the opportunity to comment on the Department for Regional Development (DRD), Regional Transportation Strategy (RTS) Review.

Key points

• Decisions made in 2010 for future transport systems in Northern Ireland will have a significant influence on transport patterns and subsequently health outcomes for the next 20 years and beyond.

• Travel behaviour can make a significant contribution to physical activity levels and subsequent risk of poor health including conditions such as obesity. Thus DRD can play a key role in tackling

obesity in Northern Ireland through the Regional Transportation Strategy. Improving health and well being should be at the core of the new Strategy

• IPH recommends DRD strengthens supports for healthy active travel by investing in public transport, walking and cycling infrastructure to facilitate individuals and populations in making active travel choices.

• IPH calls for greater emphasis on encouraging community behaviour change towards sustainable transportation methods. This may be initiated by developing 'sustainable travel towns' which could be used as examples of best practice in Northern Ireland.

• IPH calls for greater recognition of and action on the different travel needs of different population groups particularly children, older people and those living on low income or in rural areas to avoid further exacerbating current inequalities.

• IPH calls for the revised RTS to be screened for health impacts by undertaking a Health Impact Assessment.

1. What are your views on the Regional Transportation Strategy so far?

The aims of the Regional Transportation Strategy (2002) were to address underinvestment in transport infrastructure, promote sustainable travel and encourage the use of modes of travel other than the private car.

The RTS is heavily focused on developing structures for the motorised vehicle and whilst this is required to support infrastructure and economic growth there is a need to complement this investment with other measures which focus on encouraging active travel such as walking and cycling. Since the inception of the Regional Transportation Strategy in 2002, Northern Ireland's greenhouse gases have been increasing and transport accounts for 25% of these emissions. Northern Ireland's transportation patterns heavily rely on private transport with 84% of travel to work in 2007 being car, van or minibus . Looking specifically at independent journeys, the average length of car journey is just over seven miles long and 17% of all journeys are less than one mile.

It is evident from the Review that usage of private transport has increased since the inception of the RTS and public transport usage remains at a low level. A recent PWC report 'Bridging the Gap' identified that public transport in Northern Ireland has received less investment than other regions in the UK and Republic of Ireland.

The RTS has therefore contributed to the development of Northern Ireland's road infrastructure but increasing private vehicle journeys create major concern due to high levels of greenhouse gases and lack of active transport options for the population.

2. What is your opinion to our suggested way forward?

Increasing population trends and the impact of increased private transport is a cause for concern in Northern Ireland. IPH calls for leadership in the development of a sustainable Regional Transport system which will contribute to:

- · Behaviour changes to reduce the need to travel by private vehicles
- · Reducing greenhouse gases which contribute to climate change
- · Providing options for individuals in terms of their journey patterns
- · Promoting health enhancing behaviours

IPH notes the acknowledgement that home to work car journeys are increasing in numbers and regular usage of public transport remains at a very low level. IPH calls for a stronger commitment to looking at the alternatives to cars especially in areas outside the cities of Belfast, Derry, Lisburn and Newry. A heavier focus should be placed on car sharing, improved public transportation system and cycling routes to make a real attempt to reverse the increased usage of private vehicles in Northern Ireland. IPH believes that 'sustainable travel towns' across Northern Ireland can provide best practice models to demonstrate the behaviour change towards transport. Such schemes can be studied and benefits promoted to show the positive impact of the change to transportation patterns.

There needs to be a modal shift to more sustainable and efficient modes of transport. Northern Ireland has higher greenhouse emissions than the UK which can be attributed to our transport (and agriculture) emissions. These issues need to be addressed by:

• Shifting away from motorised modes to cycling and walking. Such a shift has enormous benefits to health which include increased physical activity, improved air quality, greater social cohesion and noise reduction.

• Shifting from private motor vehicles to public transport. Using public transport usually involves walking to access the service which enhances physical activity levels. One study has shown that using public transport can contribute nearly two-thirds of the recommended 30 minutes of daily physical activity levels. However to ensure that public transport is identified as a transport option, services need to be efficient, cost effective, connected to different forms of public transport e.g. buses and trains and also supported by safe environments in which people wait to access the service.

Other options such as park and ride schemes which are designed to reduce private car usage in town centres need to be sited far enough from the city centre to make real benefits. Park and ride sites need to have appropriate security measures in place e.g. lighting to ensure they are seen as attractive to users. Town centre car parking options also need to be reduced to fully support a drive towards decreased private transport usage.

DRD has a key role to play in addressing the current obesity epidemic. In Northern Ireland, obesity has become a major issue with 59% of all adults identified as being either overweight or obese and 24% of these are obese. The Northern Ireland Child Health System in 2004/05 found that 22% of children were either overweight or obese, with more than 5% already obese. Obesity can lead to diseases such as diabetes, heart disease and some forms of cancer. A major contributor to obesity is the environment in which we live and how we use travel options to facilitate our journey requirements. The cost of physical inactivity and obesity to the Northern Ireland economy is likely to exceed £500m in 2010. It is therefore essential that there is a shift towards more active travel patterns in Northern Ireland.

The Northern Ireland Assembly Health Committee recently published an inquiry into obesity which identified that 'all Departments and sectors have a crucial role to play in tackling obesity' and there was a need for the 'Executive to fully recognise the potential impact of the obesogenic environment on the health and wellbeing of the population'.

IPH calls for DRD to proactively assess any future plans to assess their health impact and potential contribution to addressing obesity in Northern Ireland.

3. What are the major challenges for transportation?

IPH advocates that transportation providers have a role to play in providing choice of transport modes which in turn influences health outcomes. This link has to be made to ensure that the new transportation strategy impacts positively on health outcomes. It is evident that transportation options impact on our levels of physical activity and there should be strong connections between the Department of Health, Social Services and Public Safety (DHSSPS) and DRD. The Regional Transportation Strategy has a key role to play in contributing to the PSA target to 'halt the rise in obesity by 2010'.

There are also a number of current strategic level reviews which influence transportation e.g. Office of the First Minister and Deputy First Minister (OFMDFM) Sustainable Development Strategy and also the Northern Ireland Assembly Regional Development Committee Inquiry into Sustainable Transport. There is a need to ensure that all strategies complement each other.

4. How should we meet these challenges?

IPH calls for greater coordination between government departments and an acknowledgement in future strategies outlining how they will contribute to improved health. For example, it has been shown that a 10% increase in the number of frequent cyclists would result in a cost saving for the NHS of £200m per year which helps the Northern Ireland Executive to work towards a more cost efficient devolved administration.

5. Are there any particular measures which you believe should or should not be included in the revised Strategy?

IPH believes that maximising the potential health benefits of transport should be at the core of the revised Strategy.

6. Are there any particular equality issues that we need to consider when revising the Strategy?

Transport plays a vital role in connecting communities to services but acknowledging the different needs of different users is essential. IPH recommends adopting a lifecourse approach which would consider the needs of young children through to elderly people.

• The number of children walking or cycling to school is rapidly decreasing which is a worrying trend as exercise habits established in childhood are a key indicator of physical activity in adulthood.

• Older people must also be catered for as exercise and social connectedness are critical aspects of a healthier older age.

• The needs of rural communities are very different from those in urban areas and often the private transport mode is the only option. DRD needs to link closely to the Department of the Environment, Planning Service to look at accessibility to local services in rural areas and ensure transport options are efficient and effective.

• Deprived communities are also less likely to own private transport, have a higher rate of public transport usage and be more vulnerable to road traffic injuries. Given that low income groups are more likely to use public transport it is essential that this option is efficient in terms of financial costs, reliability and choice which will not further exclude this group from employment and education opportunities and access to healthcare services. There is a need to review the travel

patterns of all users to make sustainable transportation more attractive in terms of travel times, convenience and financial cost.

Health inequalities are the differences in health outcomes between different population groups. IPH calls for an assessment of how the new Transportation Strategy will impact on such groups to ensure that current inequalities are not exacerbated in the revised Strategy.

7. Are there any particular health issues that we need to consider when revising the Strategy?

The health impacts connected to the RTS are multi-faceted.

• Obesity levels in Northern Ireland are a major cause for concern as it is identified as a major risk factor for a number of diseases including diabetes, cardiovascular disease and some forms of cancer. Increasing physical activity levels in Northern Ireland through changing transport patterns can assist in addressing the obesity epidemic we are currently faced with. The potential health impacts of the new Regional Transportation Strategy in Northern Ireland should be maximised by developing a sustainable system which gives consideration to alternative forms of transport other than the motorised vehicle. Attractive and accessible features of transport design are essential in promoting exercise. Recent guidance from the National Institute for Clinical and Health Evidence (NICE) states that transport planners should 'ensure pedestrians, cyclists and users of other modes of transport that involve physical activity are given the highest priority when developing or maintaining streets and roads which can be achieved by widening pavements and introducing more cycle lanes'.

• A well planned transport system can facilitate social connections which are important for mental health. Neighbourhood designs most likely to promote social networks are those that are mixed use and pedestrian orientated, enabling residents to perform daily activities without the use of a car. As traffic volumes increase, people's sense of neighbourliness decreases which results in decreased social connections. Lowering speed limits in residential areas also improves road safety as the introduction of 20mph limits could reduce all causalities by 60% and child causalities by 70%. Reduced speed limits also reduce noise levels and can encourage walking, cycling and public transport use. IPH recommend a multi-sectoral approach to ensure sustainable transport systems are a key element of any new development or neighbourhood.

• Climate change has been identified as one of the biggest public health issues of the 21st Century. Levels of greenhouse gases attributed to transport need to be reduced. The health impacts of climate change include floods, infectious and foodborne diseases and an increase in temperature change impacting on mortality levels. Regional transportation systems and behaviours have a major role to play in addressing climate change.

• A sustainable transport approach which reduces dependency on private transport by encouraging a modal shift to more sustainable travel patterns such as public transport, walking and cycling can help to reduce greenhouse emissions and also improve overall air quality. Urban areas are particularly affected by vehicle-related air pollution which can contribute to respiratory disease especially amongst vulnerable groups such as the elderly. Disadvantaged urban areas tend to be characterised by high traffic volume, with residents at increased risk of road traffic accidents.

IPH welcomes the attention given to health in the future strategy and calls for a Health Impact Assessment (HIA) to be undertaken on the draft strategy. This will identify the potential positive and negative impacts of the strategy and develop a set of recommendations to ensure the potential negative health impacts are minimised and potential positive impacts are maximised. The HIA will also identify potential vulnerable groups who require attention.

8. Are there any other issues the Review of the Strategy should consider?

None to note.

Contact details

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