Consultation Response: Strategic transport objectives

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Introduction

The Faculty of Public Health (FPH) is a membership organisation for over 5,000 public health professionals across the UK and around the world. Our role is to improve the health and wellbeing of local communities and national populations. The FPH Transport Special Interest Group (SIG) is responsible for leading the Faculty's response on issues relating to transport systems, with the aim of promoting transport policies which function to improve health and reduce health inequalities.

Summary

The FPH sees access to good transport systems to be a key determinant of good health and, properly managed, a powerful driver in reducing inequalities. Therefore, the FPH would like to see Public Health professionals represented at all levels of transport planning, with embedded Consultants in Public Health included in national and regional transport strategy groups, and local Directors of Public Health included on local transport delivery groups. We would also like to see a 5 nations transport planning framework that includes Public Health input. The FPH recommends a 'health in all policies' approach, where improving health and wellbeing, and reducing disparities is embedded in all national and local strategies, policies and programmes. To support safer active travel and a reduction in reliance on motorised vehicles, the FPH recommends that Vision Zero is included in all transport strategies, and transport policies which focus on the efficient movement of people.

The FPH recommends that the links between transport, health and inequality are explicitly included within the strategic objectives. At the societal level, recognition of the role that transport can play in reducing health and other inequalities, and addressing the wider determinants of health is needed. At the individual level, the physical and mental health consequences of different modes of travel must be recognised. Better defined objectives, a set of principles to guide prioritisation of investment, and health outcomes and outcomes relating to social inclusion would support decision makers at all levels to design, develop and deliver interventions to meet the strategic objectives. This could also enable decision-making and funding to be devolved, so that transport plans can be better integrated with other public policy areas within the relevant tier of sub-national government.

Defining objectives

1. What is your understanding of the Government's strategic transport objectives? Are they the right ones, and if not, how should they be changed?

The Faculty of Public Health notes that there are a number of transport strategies, but has not identified a document that outlines the overarching vision with clear outcomes for the UK. The outline delivery plan describes the following 4 priorities, and our headline comments on each are included in italics next to each point. We have expanded on these points in our responses to the later questions in the consultation.

- **Improving connectivity** across the UK and growing the economy by enhancing the transport network, on time and on budget.
  We agree that improving connectivity is important, but that this needs to be done alongside an explicit goal of reducing inequalities in access to transport. The transport network also needs to be explicitly defined to include pavements, cycleways, public transport (including buses, trains and trams), community transport, shared transport (such as taxis and car clubs), private cars, delivery and freight. There should be explicit references to how the network (and economic growth) will work to reduce, rather than increase inequalities.
- **Building confidence** in the transport network as the country recovers from COVID-19 and improving transport users' experience, ensuring that the network is safe, reliable, and inclusive.
  We agree that this is an important objective and would like to contribute to any consultation on the definitions of safe, reliable, and inclusive, together with SMART targets to deliver these.
- **Tackling climate change** and improving air quality by decarbonising transport.
  We agree that decarbonising transport is essential, given that around a quarter of the UK's carbon emissions are from transport. We note, however, that decarbonisation on its own will not bring the required improvement to air quality, and we would like to see an explicit reference to a model shift to active and sustainable travel, with ambitious targets set for this. Our goal should be to reach Dutch/Danish levels of active travel by 2050 (or before) as part of the UK Net Zero strategy. We would also like to see shipping and aviation emissions included in decarbonisation plans. While we note that electric vehicle made share is increasing, which is positive from carbon reduction perspective, active travel and public transport remain preferable to electric cars from a public health perspective. This is because e-vehicles will do nothing to resolve levels of physical inactivity, congestion, and levels of road deaths and serious injuries. Furthermore, whilst switching to electric vehicles would result in the reduction in some forms of air pollution, non-exhaust emissions would be maintained. To understand the significance of non-exhaust emissions, in the UK non-exhaust emissions make up 7.4% and 8.5% of primary $PM_{2.5}$ and PM_{10} emissions (AQEG, 2019). As electric vehicles are typically heavier than petrol or diesel vehicles, these non-exhaust emissions could rise further, causing on-going harm to human health.
- We will also play our part in **increasing the global impact** of the UK, boosting our influence and maximising trade.
  We note the importance of good public transport infrastructure, as well as good walking routes in cities, to our tourism market. While aviation will continue to have a role in the UK, we would like to see it properly taxed, so that it does not undercut other more sustainable forms of transport, such as rail or bus journeys.

Transport is a means to an end, not an end in itself. It plays an important role in supporting delivery of many areas of wider government policy. There is a need for an overarching national transport strategy which lays out the vision for a sustainable transport network. It should describe the

contribution transport will make to the achievement of government's social, economic, environmental priorities. This will support the articulation of the desired outcomes.

The FPH therefore requests that the links between transport health and inequality are explicitly included within the strategic objectives. This plays out on two levels: firstly, at the societal level, there needs to be recognition of the role that transport can play in reducing health and other inequalities and addressing the wider determinants of health. Secondly, at the individual level, it is important to recognise the physical and mental health consequences of different modes of travel. We would like to see a 'health in all policies' approach, where improving health and wellbeing and reducing disparities is embedded in all national and local strategies, policies and programmes.

Specifically in relation to transport's role in reducing inequality, the FPH would like to make the following points:
- Transport can be integral to improving equality, by increasing access to jobs, education and services. Policies that improve the accessibility and affordability of transport can therefore help promote equality.
- If transport costs are too high, then people are not able to make the journeys they need to get into work or move into education and training that could improve their prospects. Lack of options can keep people spending a high proportion of their income on car travel as the only way to access their work.
- Some groups can be at higher risk of poverty and transport poverty. People from ethnic minorities, young people not in education, employment or training, students, older people and women are particularly at risk of transport poverty. The impacts of transport poverty are worst for poorer people in rural (and small urban) areas.
- **Limited transport options reduce access to healthcare**. Getting to hospitals is particularly difficult for people without a car or who are living in places with inadequate public transport options. This lack of access can lead to missed health appointments and associated delays in medical intervention.[i]
- There is an urgent need for policies to recognise the important social value of transport more explicitly. Public transport service limitations, combined with largely unregulated land-use development are driving a mobility culture that most advantages already highly mobile and well-off sections of the population, while worsening the mobility and accessibility opportunities of the most socially disadvantaged in the UK.

2. How well has the Government articulated the outcomes and objectives it seeks from the country's transport network? How could this be improved, and what impact would better-defined objectives have on transport planning and investment?

The FPH does not believe that these outcomes and objectives are well articulated at present.

The government should start with a strategic transport vision and articulate the outcomes to be achieved. Better defined objectives, and in particular, the inclusion of health outcomes and outcomes relating to social inclusion would allow less car-centric forms of transport to be prioritised. Clearly defined objectives together with a set of principles to guide prioritisation of investment would support decision makers at every level to design, develop and deliver interventions to meet the strategic objectives.

This could also enable decision-making (and funding) to be devolved so that transport plans can be better integrated with other public policy areas, such as planning and housing within the relevant tier of sub-national government.

Using objectives to guide investment

3. How well does the appraisal and decision-making process for new transport investment meet the Government's strategic transport objectives? How should this be improved?

To answer this question, we have identified some key metrics that we would like to see included in any appraisal, and then have some specific comments on the Green Book.

The FPH believes that the appraisal and decision-making process for new transport investment should be strengthened though including explicit SMART targets for the following:
- health improvement (in particular, in relation to reducing rates of physical inactivity),
- impact on protected groups and on people on low incomes.
- improvement in air quality (NOx and particulates)
- reduction in greenhouse gas emissions
- modal shift away from motorised vehicles (including e-vehicles) and towards active / sustainable transport.
- compliance with Vision Zero
- reduction in UK domestic flights and a ban on those where the rail journey is less than 2.5 hours.

Specific Comments on the current ICE Green Book
If transport is to play a key role in creating better outcomes for society and the environment, the appraisal and decision-making processes used to assess projects and programmes should be positioned to enable this to happen. (ICE Green book paper).

The appraisal and decision-making process for new transport investment currently has too narrow a focus. Historically, the appraisal process has prioritised economic factors and outcomes, embodied in its approach to evaluation through a cost-benefit analysis. For example, while the Green Book has a long and well-developed analytical tradition for measuring the economic impacts of projects and metrics like travel time cost savings have clear and widely agreed economic formulas attached. In contrast tools for measuring social value, including environmental value, have been adopted relatively recently and are not as well developed. (ICE Green book paper.)

The cost-benefit approach recommended in the Green Book does not enable a clear assessment of how a policy will affect health. The Green Book provides guidance on quantifying and monetising health outcomes, but this is neither clear nor sufficiently directive, as explained in this recent BMJ article (written by the 2021-22 BMA President) on why prioritising population health is essential to prosperity.

The FPH requests that the Green Book is updated and improved to include evaluation of the health impacts of transport policies. We support the recommendation made by the BMA in its report above including the following changes:
- The technical guidance on valuing and quantifying risks to life and health should be updated and clarified.
- There should be clearer narrative reporting standards that explicitly require the disaggregation of benefits and risks of each option, including the impact on health.
- Government should reduce the reliance on external consultants to undertake policy appraisals and build internal expertise.
- Treasury should develop training for those undertaking policy appraisal on how to quantify risks to health.

4. How should wider economic, environmental and social impacts be appraised and valued, including when the gains will largely be felt in policy areas other than transport?

As stated above, the FPH would like to see the health and social impacts of transport policy properly calculated and included in decision making. In particular, we would like to see active travel prioritised, and a reduction in reliance on motorised vehicles, especially in cities. We would like to draw the attention of the Committee to the evidence of the positive impact of active travel on health outcomes:

Active travel gives benefits to people's physical health,[ii] weight,[iii] mental health and wellbeing, congestion, productivity, connection to nature and to local communities.[iv]

Physical inactivity contributes to 1 in 6 deaths in the UK, with a third of men and nearly half of women taking too little activity to protect their health[v]. Walking and cycling are safe[vi], cheap and easy ways to address this.[vii] In the UK, walking is a particularly important contributor to meeting physical activity thresholds for women, people with disabilities, older people, people on lower incomes, and people from South Asian, Black and Other ethnic backgrounds.[viii]

Active travel can contribute significantly to children's activity levels[ix] and help make children more independent.[x] It also helps maintain physical activity and health in older adults.[xi] It is cheap and convenient, allowing people to go where they want, when they want, and can be built into the normal day, using time that would otherwise be spent on a sedentary journey. Cyclists and walkers are the happiest commuters[xii] and studies from the Netherlands and the UK show cyclists also take less time off sick,[xiiixiv] and are less likely to be overweight.[xv]

Reducing motorised transport has a major impact on air quality. The first UK lockdown in 2020 leading to a 69% reduction in traffic volume and a 38% reduction in NO2 and 17% reduction in PM2.5.[xvi]

Air pollution causes even more harm to children than to adults,[xviixviii] and their peak exposure is on the school run.[xix] Using active travel for the journey to school not only gives children a good start to the day, with evidence of improved health and educational outcomes among children who are more physically active[xx] [xxi] but also reduces the number of cars on the road, thereby improving air quality for all as well as reducing carbon emissions[xxii] and road traffic collisions involving children.[xxiii]

Air quality is worse in more deprived areas[xxiv] and on crowded roads. There is mixed evidence on whether exposure to air pollution is greater in a car, walking, or on a bicycle,[xxvxxvi] but pedestrians and cyclists can reduce exposure through using quieter routes (or for people walking, the less busy side of the road). Active travel confers health benefits even in areas with poor air quality,[xxvii] but the goal should be to reduce traffic in our cities, especially near schools and at the beginning and end of the school day.

The FPH notes that cycling rates in the UK have dropped dramatically since the 1940s, but have been rising slowly over the last 20 years, notably in inner London. This is perhaps unsurprising, given that average traffic speeds in central London dropped from 8.7mph to 7.1 mph and in inner London from 12-5mph to 11.6 mph between 2008- 2018 - both considerably slower than cycling.[xxviii] Many other

UK cities now have very high levels of congestion and the busier the roads become, the worse the air quality on them and the less safe they are perceived to be. This is a major limiting factor to increasing cycling, but encouraging more people to walk or cycle would have a significant impact on congestion. We note that in the UK road traffic miles increased 29% between 1990 and 2018, from

255 billion to 328 billion miles. Almost 20% of car journeys are less than a mile and 60% are less than 2 miles – supporting people to walk or cycle for these journeys would make a huge difference to the quality of life in local areas.

However, we also note that in 2020 two thirds of adults[xxix] agreed or strongly agreed with the statement 'it is too dangerous for me to cycle on the roads', and only 14% disagreed or strongly disagreed – the lowest levels since 2011. While the deaths/bn km travelled are similar or even higher for walking[xxx] our cycling injury rates do not compare well with some other Northern European countries,[xxxi] and the FPH would like more to be done to protect cyclists in urban settings; over three quarters of cyclists aged 0-24 killed or seriously injured in 2019/20 were travelling on roads with a 30mph speed limit.[xxxii] There is evidence for 'Safety in numbers': more people walking and cycling makes it safer, and encourages others to travel actively, thus increasing safety for all.[xxxiii xxxiv] **For this reason, the FPH supports Vision Zero, and would like to see this included in all transport strategies.**

5. How can longer-term certainty in planning be achieved in order to promote greater private sector investment from a range of sources?

The FPH notes that currently the lack of certainly regarding funding for transport improvements makes attracting investment difficult, and that businesses are not encouraged to act in ways that promote active travel or the use of public transport to their workforces.

To support strategic planning of transport as part of a systems approach the FPH supports Transport for the North's recommendation *that a five-year regional indicative funding envelope is established*, within which statutory advice on strategic infrastructure and service priorities is prepared and which complements simplification of funding at the local level. An indicative five-year funding envelope, accompanied by longer term notional envelopes and built into existing regulatory and statutory processes, would bring significant opportunities to accelerate decision making, reduce uncertainty and avoid duplication of effort at national, regional and local level.

The FPH would like to see the policy of charging business rates for parking, as in Nottingham, extended to all cities in the country, and would also like to see parking charges introduced in out-of-town shopping centres, with the funding raised used to improve public transport and active travel infrastructure. This would also help city centres operate on a more level playing field with out-of-town shops.

Improving coordination and alignment

6. How effectively is strategic transport planning and investment coordinated across and between transport modes, including with reference to achieving modal shift?

The FPH feels that currently strategic transport planning and investment is poorly co-ordinated across and between transport modes, and that there is little evidence of any serious intention to achieve modal shift towards active and sustainable travel, which is required if we are to meet our statutory duties in relation to climate change and clean air.

The fragmented system of roles and responsibilities and priorities of the various transport bodies together with the absence of an overarching strategic vision inevitably lead to a lack of coordination. Funding streams are separate for key elements of the transport system, funding decisions made at different levels, budgets are annual, and authorities have to compete for funding. This is inefficient

and inhibits coordination across and between modes. In addition, there are currently no means of assessing whether resources provided to different modes, projects and regions are appropriate against wider aspirations for what the network needs to achieve.

We note that at present the UK appears to have a bias towards car-centric planning, which privileges the needs of automobiles and their drivers over other modes of transport. This often results in environments that are undesirable for active travel, for example unlit streets, poor quality/missing pavements, absence of kerb cuts, limited crossings/prioritisation of vehicles at crossings, absence of cycling infrastructure such as dedicated cycle lanes and secure cycle storage, and insufficient or unsafe public transport. This prioritisation of private motor vehicles when transit infrastructures and urban space are designed means that vehicle ownership is built into living in or and accessing certain spaces. This marginalises some groups, in particular those on lower incomes, people with disabilities, women, and older people, and limits their employment, educational and social opportunities, leading to transport related social exclusion. Additionally, some people are forced into car ownership, and need to buy a car despite the significant financial implications of this. Forced car ownership often leads to deprivation in other areas of life, for example, fuel poverty, food poverty, and social poverty.

The FPH would like to see transport policies (especially in cities) refocused so that they are based around efficient movement of people rather than vehicles. This would require road space reallocation away from motorised vehicles (especially parked cars) and towards space for public transport, cyclists, and pedestrians.

7.   How could planning for transport infrastructure across government and coordination of policy (for example, with policy on energy, digital or planning) be made more coherent and streamlined?

The FPH believes that increasing cross-departmental working could bring major benefits to improving planning transport infrastructure and coordinating policy. We would like to see health and education included in this. We note that the most effective way of increasing active travel appears to come from a mix of interventions that work together to:[xxxv xxxvi xxxvii xxxviii]
- Make it safer and easier ('making the healthy choice the easy choice').
- Place some limits on motorised vehicles ('making the unhealthy choice harder').
- Recognise and address cultural and social factors.

This approach can be summarised as '5 Es' (Encouragement, Education, Enforcement, Environment, Evaluation).[xxxix] This approach lends itself well to multiagency and cross-departmental approaches.
To this end we would like to see the following programmes of work enacted in order to improve our transport systems, improve health, and reduce the number of people killed and seriously injured on our roads. In addition, these measures will help reduce inequalities, reduce carbon emissions, improve air quality, reduce congestion, improve productivity and community cohesion.
While there is good evidence for the following interventions, many will require political bravery and good community engagement. We need strong national leadership on this.

National actions
- There is an urgency to improving air quality and to reducing carbon emissions. Achieving these requires a reduction in the use of motorised vehicles, and an increase in active travel. There needs to be a national programme of public engagement on this, and less emphasis on electric cars.

- Electric cars, however, are part of the solution and there must be a rapid expansion of the charging network, particularly in more deprived and densely populated areas (where home charging is less feasible) and linked to car sharing opportunities such as car clubs.
- The Department for Transport (and other relevant bodies) should conduct rigorous health impact assessments for new policies and reject or amend new policies if the assessment identifies risks. To support this, health impact assessments should be made mandatory across the whole of the UK, in line with the approach in Wales, and the UK Government should include an HIA on cross-border, devolved nations approach to delivering health benefits to ensure these are not negatively affected.
- Reducing speeds reduces road traffic collisions[xl] and can make the roads feel safer, improve air quality, community cohesion and business viability.[xli] The speed limit in built up areas should be reduced to 20mph.
- Using speed cameras is effective at reducing speed and road traffic collisions,[xlii] so the law should be changed to increase the use of speed cameras.
- Mobile phones distract drivers, even when hands free kit is used. All mobile phone usage should be banned when driving.
- All new urban roads, and any changes to existing roads, should be designed to prioritise the needs of pedestrians and cyclists.
- All segregated routes must be accessible to people with disabilities, including those using wheelchairs or on adapted bikes.
- Given the proven health impacts of both active and motorised modes of transport, health impact assessments should always be included alongside cost benefit analyses and other appraisals of transport policies and proposals.[xliii]
- Cycling should be included in the national curriculum, and there must be safe spaces for children to learn to ride, with a change in the law allowing children and other vulnerable users to ride on the pavement.[xliv]
- All cities should have London levels of public transport – this is essential to move people out of cars. Walking to a bus or train helps many people attain their physical activity levels, as well as giving access to longer journeys and to a choice of mode of transport.
- Accessibility standards should ensure that people with mobility, cognitive and sensory impairments are enabled to access and use public transport.
- We note that e-scooters, while requiring far less physical energy than walking or cycling, appear to be a very popular from of transport, and have the same road space requirements as bikes. We therefore recommend that e-scooters are included in transport planning and that more evidence is collected on how they can be most safely used in the UK context.

Local actions
- Low traffic neighbourhoods[xlv] are effective at reducing car usage and increasing active travel[xlvi], the plans need to include extensive local engagement.
- Restricting and charging for parking encourages cycling and decreases car use.
  A study of why residents of Cambridge choose not to cycle to work found that provision of free workplace parking was a strong predictor of choosing to drive rather than cycle.[xlvii] Nottingham's workplace parking levy has been highly effective in reducing car journeys into the city and has been used to improve public transport.
- Good pavement maintenance is essential, as is ensuring that pavements are not blocked by parked cars.
- Interventions that increase active travel to school are cost effective[xlviii] even when infrastructure costs are included, and with 'bicycle trains,' [xlix] walking buses, and educational initiatives[l] being particularly effective for primary school children.

- A recent evidence review[li] included creating clean air zones around schools, ('School Streets') and the promotion of active travel among the measures that would improve air quality in and around schools.
- There should be segregation of cyclists from busy traffic, but shared space for cyclists and pedestrians needs to be used with caution. Unless the routes are wide enough to accommodate both sets of users, more experienced cyclists, those want to travel at a reasonable speed, or on a more direct route, may well choose not to use them. Shared cycling/pedestrian routes can feel unsafe and deter pedestrians, particularly older people, and disabled people. Having segregated routes is good but roads also need to be safe.
- Cycling and walking routes need to be properly lit as some of the off-road routes that make cycling more pleasant in the daytime can feel very unsafe after dark. Lighting these routes has been shown to increase walking and cycling numbers,[lii] but needs to be done with care so as not to cause light pollution, with its consequences for wildlife and biodiversity.
- Cycle storage and security must be prioritised. Bicycle theft is a major deterrent to people cycling, and people need to have space to keep their bikes securely at home, at school/college, at work, and at venues/in town centres. This requires planning authorities to require suitable safe, accessible, storage to be provided in all developments.
- Bike sharing, cycle loan and cycle to work schemes should be promoted.

8. How effectively is strategic transport planning and investment coordinated between national, devolved, regional and local government and other public bodies? Do the current division and distribution of powers help or hinder?

It is the view of the FPH that currently the strategic transport planning is not well coordinated between different bodies and that the current distribution of powers are not helpful. The FPH sees access to good transport systems to be a key determinant of good health and, properly managed, a powerful driver in reducing inequalities. For this reason, the FPH would like to see Public Health professionals represented at all levels of transport planning with embedded Consultants in Public Health included in national and regional transport strategy groups, and local Directors of Public Health included on local transport delivery groups. In addition, we would like to see a 5 nations transport planning framework that includes Public Health input.

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