

# Text B - Transport and health

## Transport and our lives

Transport policy has a huge impact on our lives. Around 6 per cent of our waking hours are spent travelling, accounting for much of the time we spend out of the house and school/workplace. We take a daily risk with our health when we venture out into the traffic, and it's not just the chance of being involved in a road accident: air pollution and stress-related illnesses from noise and the breakdown of communities are also increasing. The dominance of the motor car means that most of us walk and cycle less, losing the benefits of easy regular exercise. Transport should be one of the largest issues in preventative health.

Transport is about access and mobility: getting to places, and seeing people. The diversity of places and people that we seek is good for our health, the grind of travel is bad. Ideally, we would like to achieve the benefits without the costs yet the private car is responsible for a limited range of benefits for a limited section of the community, and almost entirely responsible for the costs borne by the whole community. The widespread use of the private motor car is a major health issue.

#### **Road casualties**

In 2001 3450 people were killed on the roads and the total number of casualties was 313,309. This places a considerable burden on the National Health Service (including around 10 per cent of hospital resources). And many (minor) injuries go unreported. These statistics can be reduced by reducing traffic and changing the behaviour of road-users.

Research into child road accidents has shown that the reductions in child fatalities have come about not because roads are getting safer, but because they are much more dangerous; children no longer have as much freedom of movement, and are driven by car to places they would once have gone on foot or by bike. Children are typically two years older before they achieve a given level of independent mobility (like going to school on their own) than they were 20 years ago; this must be having an effect on their physical and social development.

# Don't be a couch potato

Walking and cycling are good for our health. They are the simplest forms of regular aerobic exercise that we can take, and have the added bonus of getting us somewhere. Physically active people reduce the risk of heart disease and stroke by up to half. The risk of early death fall by up to a third. There are other, less measurable effects: regular exercise helps regulate weight, and the psychological effects of exercising and feeling fit help to relieve anxiety and tension, thus tackling problems which are all too prevalent in our society.

Government health advice says that children and young people should exercise for up to an hour five times a week. Walking to school, cycling and playing sports are ideal steps to better health. Around a fifth of British adults are obese and that figure could rise to a third by 2020.

#### **Community severance**

The value of social support is difficult to quantify, but studies that have focused on such things as marriage, having close friends and relatives, and being a member of groups such as a church, have found a lack of these things to be correlated with measures of psychiatric disorder, physical morbidity and with mortality from all causes.

Busy roads deter pedestrians from crossing them so that communities through which they pass may become divided. The amount of social interaction between neighbours is drastically reduced when traffic levels increase; residents living on busy streets are likely to have less in the way of health-promoting social support networks.





#### Access to health facilities

As well as the deterrent effect of busy roads for pedestrians, access is made more difficult in other ways. Hospitals and health centres (as well as shopping developments) are increasingly being moved out of town. For those without cars, around 28 per cent of households, visiting these places becomes much harder than when they are at the traditional hub of the local transport network (the High Street).

Poor public transport links, bad timetabling of services and inaccessible buses can make it difficult for people on low incomes or with mobility problems to reach the health care they need. Lack of accessible public transport imposes an additional burden on non-urgent ambulance budgets. A more fundamental approach is required, with facilities being relocated back into the town centres.

The cost of providing fully accessible door-to-door public transport, a service which would enable more disabled and elderly people to be cared for at home, is considerably lower than having them cared for in a nursing home or in a geriatric ward, a clear example of how transport and health care need to be looked at together.

## Air pollution

There is widespread concern about the quality of the air we breathe and the effect it is having on our health. There is increasing evidence that air pollution aggravates existing respiratory and pulmonary problems. Environmental health officers and others have called for better monitoring of air quality. While catalytic converters on cars can reduce noxious emissions, they do not work on cold engines or for short distances. In any case, the rising number of vehicles on our roads is offsetting any reduction in emissions due to catalytic converters. More than one in seven children in the UK now suffer from asthma, six times as many as 25 years ago. The American research found asthma levels were higher in smoggy areas and in children who played more sport and therefore inhaled more pollution through breathing more quickly and deeply.

## Ways forward

Most local journeys could just as easily be made on foot, by bike or by public transport, which would be much better for our health and the health of the community. This means that public transport needs more investment to make it faster, more reliable and more convenient; streets need to be designed so that people are important and not cars; out-of-town developments which generate more traffic need to be curtailed; and car traffic has to be actively restrained. Traffic calming has been shown to be the most cost-effective method of reducing road accidents.

Imaginative traffic calming can help drivers to change their attitudes and to learn how to share the public highway with other users.

Lower traffic speeds, for example more 20mph zones in towns and cities, would provide a better environment for walking and cycling and encourage more people to do this.

Lower speed limits on faster roads for example motorways, would reduce pollution because fuel is burnt more inefficiently at higher speeds.

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