



Take action on active travel

Why a shift from car-dominated transport policy would benefit public health

For the first time, the UK's leading organisations working on all areas of public health, including those who shape the environment we live in, have come together to give government our expert views on active travel and health



..... We call on ministers, civil servants, local authorities and all involved to make a big shift now: invest heavily in walking and cycling, and recreate an environment where children can play in the street and adults lead an active life. Nothing here is radical or new, except the call to implement in practice what policies already say – *Promote public health: take action on active travel.*

For at least two generations, planning and transport practice in the UK have focussed on the car. The unintended consequence of this has been to suppress walking and cycling across all sectors of society. This decline in physically active travel has been a significant contributor to ill-health of many types, including the obesity epidemic currently afflicting all parts of the UK. We need to reverse this trend, and to come up with a radical vision centred on active travel.

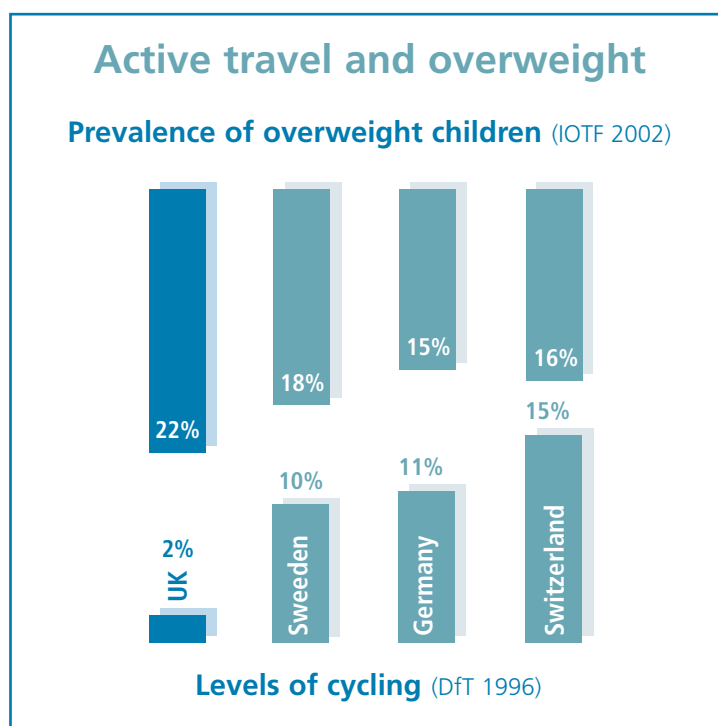
We are now facing a very different world. Global climate change, rapidly rising oil prices and concerns over security of energy supply mean we need to change the way we travel. By shifting from motorised transport to active travel we can make a significant contribution towards tackling all these issues, and at the same time reverse the declining trend in physical activity, in people of all ages. This would be good for public health and save billions of pounds in future healthcare costs.

Policies and strategies at all levels advocate walking and cycling but motor transport still takes priority in the big decisions and in the allocation of

investment. As a consequence the UK lags badly behind many European countries in levels of active travel.

To return walking and cycling to levels that can contribute to a healthy society, changes are needed in policy and practice. These are listed in our six point call to action – **Promote public health: take action on active travel.**

This document has been drawn up by the Association of Directors of Public Health, British Heart Foundation, British Medical Association, Chartered Institute of Environmental Health, CTC the national cyclists’ organisation, Cycling England, Faculty of Public Health, Improvement and Development Agency for local government, Living Streets, National Heart Forum, National Obesity Forum, National Coalition on Active Ageing, Ramblers’ Association, Royal Institute of Public Health, Royal Society for the Promotion of Health, Royal Society of Medicine, Royal College of Nursing, Sustainable Development Commission, Sustrans and the UK Public Health Association. Other signatories are listed on page 8, and at www.adph.org.uk





Promote public health: take action on active travel

We call on decision makers at all levels – UK, devolved governments, regional and local authorities: act now to bring about a population-wide shift from sedentary travel to walking and cycling.

- **set ambitious targets for a growth in walking and cycling – and ensure they are met:** publish a coherent strategy for growth in walking and cycling, based on experience of what works; monitor and performance-manage progress; give transport departments a clear public health objective, and make clear the roles of other government departments and other partners
- **invest at a realistic level:** commit 10% of transport budgets to walking and cycling immediately, and in future ensure that transport funds are allocated proportionate to the new, ambitious target levels
- **create safe, attractive walking and cycling conditions,** with coherent high-quality networks linking all everyday destinations, so that walking and cycling are faster and more convenient than motor travel, backed up by individualised travel marketing, school and workplace travel plans, practical walking promotion programmes and high-quality cycle training
- **make 20mph or lower speed limits the norm for residential streets** and those used by shoppers, tourists and others, close to schools or public buildings, or important for walking and cycling or children’s play. In urban areas only the busiest strategic traffic routes should now qualify for higher speed limits
- **tackle bad driving,** through improved driver training and awareness campaigns, backed by stronger and better enforced traffic laws
- **‘health check’ every transport and land use decision,** focusing on the potential impact on levels of walking and cycling and other aspects of health; invest public money to the benefit of public health, and reject proposals whose impact on walking and cycling will not be positive.

And most important: do it now! New residential developments now being planned across the UK must be developed according to these principles. We must not create obesogenic new towns.



The potential for change

Across the developed world there are a number of constant factors in travel behaviour, which have not changed noticeably in decades. Among these are that most car journeys are short enough to be walked or cycled – research for the Department for Transport found that 55% of car trips in three English towns were under 5km (3 miles). Better conditions for walking and cycling could make many of these trips health promoting.

Researchers in the same three towns looked at the alternative options available to individuals who chose to drive their local journeys. With only limited modifications to the physical environment and better information provision, roughly half of the car trips could be walked, cycled or made by public transport, **today**¹.

Based on analysis such as this, we believe that with effective, forward-looking transport policies and practices it should be possible to bring UK cities and towns up to the levels of active travel found in highly liveable and economically successful cities in continental Europe, such as Basel (Switzerland) where just one in four trips are driven, or Münster (Germany) with 35% of trips by bicycle. Today's reality is that around two thirds of all trips in the UK are made by car.

Obesity and inactivity

The 2007 Foresight Tackling Obesities report laid bare the shocking scale of our obesity problem. Unless we act decisively and immediately, by 2050 almost 60% of the UK population could be obese, with the economic cost of overweight and obesity reaching £49.9 billion at today's prices².

Foresight said "The top five policy responses assessed as having the greatest average impact on levels of obesity across the scenarios [include]: ... increasing walkability/cyclability of the built environment...."

Obesity alone justifies our call to shift transport policy from sedentary to active travel, but the benefits of physical activity go much wider. People who are active have significantly lower risk of heart disease and stroke, many types of cancer, non-insulin-dependent diabetes, depression and other mental illnesses, osteoporosis and falls in later life³. One of the best ways to endow our children with lifelong health is to leave them an environment which encourages healthy, active travel; we have to make villages, towns and cities more people-friendly.

Addressing health inequalities

Good health is not distributed equally, and some groups of people suffer disproportionately poor health and record lower than average physical activity levels. Active travel, especially walking, is cheap and potentially inclusive and accessible. Walking infrastructure, in particular, should everywhere be brought up to a standard that actively encourages people to walk. Promotional and marketing approaches need to be targeted to ensure that they do not miss those most at need.

Investing for health

Walking and cycling have always been at the tail end of budget allocation and investment decisions. This must change. Walking already achieves 24% of all trips in Great Britain⁴, and cycling has been shown to have massive potential for growth. We call for 10% of transport budgets



to be allocated immediately to walking and cycling. We also call for ambitious walking and cycling targets to be set within two years, and future transport budgets to be allocated proportionate to these target levels.

Set targets and measure

All UK governments should set ambitious national objectives for the proportion of trips made by walking and cycling, the number of people engaging in active travel, and the provision of adequate infrastructure, and ensure they are met. Local authorities should measure their own progress, through their Overview and Scrutiny Committees and within their Local Area Agreements or equivalents. Local strategic partners, including NHS bodies, business and community groups, should hold planners and developers to this.

All transport schemes and land use decisions should be assessed to evaluate their impact on walking and cycling, as well as other aspects of health such as road safety and air pollution. This should ensure that future investment goes to the measures which most effectively bring about a shift from the car to healthy and active travel.

Planners should accept their responsibility to make the environment more conducive to walking and cycling, and to avoid severing community access routes or otherwise discouraging physically active forms of travel.

The action to take!

The evidence is strong; existing policies are clear; the need is demonstrated and the potential to benefit public health is immense. Nothing here is

radical or new, except the call to implement in practice what policies already say – **Promote public health: take action on active travel.**

Let the children play

Two generations ago children played and adults socialised in the streets between their homes. In many continental cities and towns this is still true, but in the UK it has become unconventional, and worthy of disapproval, for parents to let their children play out in the street. We call for a new approach to street design and layout, which puts the needs of residents, especially children, above those of drivers. The car should be a guest in residential, shopping and other populated streets and walking pace should be the normal driving speed.

The “five-year-old test” – and other users

It is common in Dutch, Belgian or Scandinavian cities to see whole families, including young children, cycling from place to place. We want to see urban areas linked and crossed by traffic-free routes and streets with very low speed limits, so that even a family with young children can safely and enjoyably make trips to visit friends, enjoy leisure or go to school. If a five-year-old child can cycle with his or her parents or play in the street without fear, that is a sign of a civilised city.

We also advocate a “seventy-five-year-old test” – although many of the criteria may be common.

Older people, and those with impaired mobility or vision, should feel able with complete confidence to walk across their neighbourhoods. The approach we call for here will in most cases meet the needs of all people with disabilities better than at present, but all transport and land use decisions should of course be fully disability proofed.



The Odense (Denmark) traffic management system (above left) rewards cyclists, and drivers who keep to cycling speed, with a regular green light at junctions, guided by the "green wave" of roadside LEDs

Walk from your door

We believe in a civilised society everyone should be able to walk from their home, on clean well-maintained footways, free from obstructions and pavement parking, and to access high quality, well-maintained parks, playgrounds and other public spaces within easy walking range. Equally, destinations such as public buildings should give priority to the pedestrian; walking routes within the site should be direct, attractive, well planted and well signed, and should never give way to motor traffic.

Cutting speeds

Perhaps the single biggest step in making the streets safer (and making them **feel** safer) is to reduce speeds. Towns and cities all across Europe have successfully implemented town-wide 30kph (19mph) limits; Portsmouth is the first UK example. We call on all UK governments immediately to legislate for easier implementation of town-wide 20mph zones, and for local authorities to implement them, including in rural villages. In residential areas traffic should move at speeds appropriate to sharing with people.

No through road

Filtered permeability is the principle followed in European towns and cities – such as Freiburg and Groningen – which have been most successful in restraining car use. It means giving walking and cycling an advantage, in terms of speed, distance and convenience, over private motor traffic (walking and cycling are often faster as things stand, but this advantage should be enhanced and made widespread).

There are many ways in which this can be done, including: separate cycleways and walkways, re-

allocation of road space to footways and cycleways, pedestrian and cycle bridges, selective road closures which allow walkers and cyclists only, two-way cycling on one-way streets, pedestrian priority at crossings and traffic light system phasing at cycle speed.

This is not to say that people shouldn't still – generally – be able to drive up to their front doors. But in the 21st century everyone in the UK should be able to live in a residential neighbourhood without through-traffic, safe enough to see children playing in the streets once more.

The London Congestion Charge

The congestion charge scheme is the UK's most notable intervention in shifting the balance from sedentary transport to active travel, although it was planned without explicit public health objectives. Cycling in central London has risen by over 80% since 2000⁵, and although Transport for London is only now establishing a completely robust system to monitor walking, outline monitoring indicates growth here too.

Among the strongest elements of the scheme is the ongoing expansion of its impact, both geographical (expansion of the zone) and financial (increases in the charge level). This sends a clear message to travellers in London that as time goes by it will become progressively better value to walk, cycle or use public transport. That in turn affects the life planning of individuals and organisations. London's bold initiative should be recognised as benefiting health, road safety and the global and local environment, and widely replicated (and London will, we hope, continue to expand and refine the scheme).



Delivering on existing policies

Nothing advocated here is new. Government policies at all levels, public health guidance and expert opinion have all pointed in this direction for years. The radical element is this: it is time to stop talking and act.

Existing policies and guidance calling for active travel, at UK, national, regional and even local level include, among many others:

- **Healthy Weight, Healthy Lives: A Cross Government Strategy for England**, Department of Health 2008
- **Choosing Activity: a physical activity action plan**, Department of Health 2005
- **Promoting and creating built or natural environments that encourage and support physical activity**, National Institute for Health and Clinical Excellence 2008
- **Let's Make Scotland More Active: a strategy for physical activity**, Scottish Government 2003
- **Better Health, Better Care: Action Plan**, Scottish Government 2007
- **Climbing Higher - a strategy for sport and physical activity**, Welsh Assembly Government 2005
- **Fit Futures: Focus on Food, Activity and Young People**, NI Department of Health, Social Services & Public Safety 2006
- **Walking and cycling: an action plan**, Department for Transport 2004
- **Design to Delivery: eco-towns transport worksheet**, Communities and Local Government / Town and Country Planning Association 2008 (in press at time of print)
- **Manual for Streets**, Department for Transport 2007
- **XXXXXXXXXX full title children's plan**
- **National Transport Strategy**, Scottish Government 2006
- **People, Places, Futures - The Wales Spatial Plan**, Welsh Assembly Government 2004 (now in revision)
- **Northern Ireland Cycling Strategy**, NI Department for Regional Development 2000

- **Walking Northern Ireland: An Action Plan**, Department for Regional Development 2003

Additional useful reading includes:

- **Foresight Tackling Obesities: Future Choices**, Government Office for Science 2007
- **Building Health: creating and enhancing places for healthy, active lives**, National Heart Forum / Living Streets / Commission for Architecture and the Built Environment 2007
- **Active Design: Promoting opportunities for sport and physical activity through good design**, Sport England 2006.

Policy in relation to active travel is evolving rapidly; important work is in development relating to land use and planning, children and play, and sustainability, as well as the more traditional areas of transport and of public health.

Decision makers should not be swayed by a vocal minority of motoring enthusiasts; the public are in favour of transport policies that support walking, cycling and public transport over the private car¹.

References

- ¹ **Travel Behaviour Research Baseline Survey 2004, Sustainable Travel Demonstration Towns, 2005** Sustrans
- ² **Foresight tackling obesities: future choices, 2007** Government Office of Science
- ³ **At least five a week: Evidence on the impact of physical activity and its relationship to health: A report from the Chief Medical Officer, 2004** Department of Health
- ⁴ **Transport Statistics Great Britain 2007, 2008** Department for Transport
- ⁵ **Central London Congestion Charging Impacts monitoring: Fifth Annual Report, 2007** Transport for London

We call for action on active travel

The bodies listed below call on all UK governments and local authorities to promote public health: **take action on active travel**. We commit to do what we can to bring this about in our own spheres of influence. And we call on others to join with us. You can see an updated list of signatories at www.adph.org.uk

Association of Directors of Public Health
British Heart Foundation
British Heart Foundation Health Promotion Research Group
British Medical Association
Chartered Institute of Environmental Health
CTC the national cyclists' organisation
Cycling England
Faculty of Public Health
Improvement and Development Agency for local government
Living Streets
National Heart Forum
National Obesity Forum
National Coalition on Active Ageing
Ramblers' Association
Royal Institute of Public Health
Royal Society for the Promotion of Health
Royal Society of Medicine
Royal College of Nursing
South Asian Health Foundation
Sustainable Development Commission
Sustrans
UK Public Health Association

Published on behalf of the working group partners by Sustrans, 2 Cathedral Square, Bristol BS1 5DD

Photos and graphics: Sustrans, J Gehl & L Gemzoe, T Snowdon, XXXXXXXXXXXX, S Morgan, T Andersen, J Bayne and G Gilbert

ISBN: 978-1-901389-71-5

Available for download at www.adph.org.uk and on the websites of other working group partners

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