Questions for Chapter Two

Q. What do you believe are the major challenges to delivering an improved and more sustainable transportation infrastructure here?

- Transport promotes health by enabling access to people and places and providing opportunities for physical activity. However it also threatens health through risk of fatality, injury, pollution, noise, congestion, stress, and severance of communities by roads. One of the major challenges is to fully appreciate the potential health impacts of this strategy in the delivery of the identified economic, social and environmental factors. The Transport and Health Study Group published Policies for Health Promoting Transport in 2011 which identified four key factors for a healthy transport policy:

1. encourage walking and cycling
2. reduce the dangers faced - or perceived - by pedestrians and cyclists which requires road designs to reduce speed, provision of cycle and pedestrian facilities and change driver attitudes
3. ensure that people without cars are able to get about independently
4. seek to reduce pollution levels and reduce injuries from car use.

The RTS takes into account each of these factors which is to be commended however in the implementation of the Strategy it is critical that a focus on these areas remains at the core of any transport development.

- Investment is crucial. A recent PriceWaterhouseCoopers (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. During a similar period, private transport usage increased and public transport usage remained at a low level. IPH welcome the increased focus on active travel in this strategy but this needs to be implemented in a balanced manner. 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 with continued investment in pedestrian and cycle infrastructure alongside ensuring the public transport system offers a viable and efficient alternative.

- The transport sector accounted for 22% of Greenhouse Gas emissions in 2007. The challenge is to reduce GHG emissions by developing a sustainable transportation infrastructure. Investment is required to maintain the existing infrastructure as a priority over building new alternatives at greater cost to both the environment and economy.

- Setting high level targets within the strategic framework will assist monitoring and evaluation.

Q. What are the challenges for society?

- There is considerable scope for changing travel behaviour across the island of Ireland. The challenge is to provide viable, safe and attractive alternatives to car use which requires policies which incorporate health and equity into transport planning.

- Transport and health are closely linked. How we move about our environment impacts on levels of physical activity. Walking, cycling and using public transport (walking/cycling to the halt) contributes to the recommended 30mins of physical activity on a daily basis. In Northern
Ireland 59% of adults are either overweight or obese and 22% of children are overweight or obese - the RTS has a major role to play in tackling sedentary lifestyles in society. Obesity is also a major contributor to chronic conditions such as coronary heart disease, stroke, hypertension and diabetes which are predicted to increase by 30% in Northern Ireland by 2020.

- The health effects of transport are unequally distributed in society with disadvantaged people experiencing the least benefit and the most disbenefit. A Health Impact Assessment conducted on the Draft Air Quality Action Plan for Belfast identified that communities who had lowest car ownership were situated beside arterial routes which had the highest levels of air pollution in the City. The Sustainable Development Commission (SDC) publication 'Fairness in a Car Dependent World' highlighted that those without access to a car and who travel the least suffer the greatest impacts from others travelling, through poor air quality, noise pollution, inaccessibility to car dependent destinations and traffic danger. The needs of rural communities must also be recognised peculiarly in relation to viable access to services.

- One of the key challenges is to involve transport users in the decision making process to ensure needs are met and options for a sustainable transport system are attractive. For example, in the Republic of Ireland, Cork has developed a proposal for a Smarter Travel area as part of the Department of Transport, Tourism and Sport 'Sustainable transport demonstration initiatives'. This project was established to reduce car usage in Cork and considered types of journeys and marketing initiatives. The key aspect of the project was to involve service users and providers such as the local taxi and bus companies, the Health Service Executive, cycling associations, schools, local communities and
business. High level measures were established which linked to the overall regional objectives and anticipated outcomes were measurable e.g. 5% switch to walk mode anticipated. This initiative was part of a competition and Cork City Council coordinated the project which demonstrates how a city can develop a user led local sustainable transport plan to complement regional objectives. A similar approach could be adopted for Cities in Northern Ireland or the Belfast Metropolitan Area Plan (BMAP).

-Clear targets and timeframe need to be put in place to ensure the implementation of the Strategy is focused on achieving clear outcomes.

Q. Are they challenges for you as an individual?

Not applicable

Q. How should DRD respond to these challenges?

- IPH recommend a Health Impact Assessment (HIA) is undertaken on the RTS. HIA considers the health impacts of a proposal by assessing a range of information and developing recommendations to enhance outcomes. Undertaking a HIA on the RTS would raise awareness of the health impacts of the proposal, identify unintended negative impacts and develop recommendations to enhance the implementation of the strategy.

- There is a need to deliver a coordinated approach to land-use and transport planning. Training and awareness raising can support a move to integrating active travel into transport planning but this also needs to be integrated into the Regional Development Strategy. Public transport amenities and services should be an integral element of the development process to ensure long-term sustainable communities.
Recent guidance from the National Institute for Clinical and Health Evidence (NICE) outlines how transport planners can ensure methods of active travel are given the highest priority when developing or maintaining streets and roads which will enhance opportunities for active travel.

- There is a need to ensure that transport is fairly distributed across society and does not contribute to existing health inequalities in Northern Ireland. Men living in the 20% most deprived areas live on average eight years less than those in the least deprived areas, for women this is five years. How we move around our built environment has a key role to play in tackling health inequalities and undertaking a HIA can enhance this work.

Q. Do you agree that particular interests such as freight, active travel and the needs of older and disabled people should be mainstreamed in the Strategy rather than being considered separately?

- IPH support a move to mainstream active travel into the RTS which could be supported by then developing an Active Travel Plan. Active travel is a core element of any transport strategy as highlighted in the recent IPH document, Active Travel: Healthy Lives, and although this is recognised in the RTS mainstreaming this objective will ensure it is considered alongside vehicle transportation methods as the draft RTS is suggesting. This will also maximise the potential health benefits from the RTS rather than solely looking at health impacts associated with active travel.

- Health and wellbeing needs to be given greater recognition. The cross-department strategy, Investing for Health (IfH), outlines the role all government departments play in improving health and tackling
health inequalities. The RTS supports the IfH objectives but there needs to be a greater focus placed on this.

- The RTS must ensure equity is given due consideration. Transport interventions need to be universal, however some groups may require additional interventions to ensure they are not further disadvantaged by measures to bring about population-wide changes. This includes older and disabled people and also those on a low income or people who belong to an ethnic minority.
Questions for Chapter Three

Q. Do you agree/disagree that growing the economy in a sustainable way should be at the core of our strategy and if so why/why not?

The RTS is aligned with the public health agenda to reduce traffic crashes, encourage active travel by making walking and cycling safer, improve public transport, improve air quality through reduced pollution and increase physical fitness. The health implications of the RTS have not been fully addressed within the strategy.

Savings may be made through reduced healthcare costs, better productivity and less time off work due to serious illness or disability. In Scotland, it is estimated that if 40% of all short journeys were switched from car to bicycle, this would result in a saving of at least £2 billion per year due to reduced mortablity and closer to £4 billion per year when improved health is included (data currently not available for Northern Ireland).

The draft Obesity Framework for Northern Ireland identifies 260,000 working days are lost each year due to obesity which costs the economy approximately £500m. Stopping the year-on-year increase in levels of obesity could save the DHSSPS an estimated £210m over the next 20 years.

The road traffic collisions in 2008 were estimated at costing the NI economy £180m.

The implications of the long term effects and costs of health issues to the economy need to be considered within the RTS.
Q. What do you see as advantages or disadvantages in this approach?

Intersectoral collaboration is needed to ensure that shared interests are explored and achieved. The RTS has major implications for health but this can only be fully maximised through communication, leadership and capacity building to promote dialogue and exchange good practices between sectors.

Q. Do you agree with the strategic objectives proposed?

Each overarching strategic objective has the potential to benefit health. For example improving access in our towns and cities will enhance opportunities for active travel and consequently increase physical activity; improving social cohesion enhances opportunities for social interaction with mental and physical outcomes; and reduced greenhouse gas emissions from transport can improve air quality and impact on climate change. IPH agree with the strategic objectives proposed but there is still a strong emphasis on road building. There needs to be a greater recognition of the interconnected health links for all objectives as the only association to health is related to reducing noise and air pollution.

Q. Please rank the strategic objectives as you see them? (Please use the table on the next page)

IPH has not ranked the strategic objectives as there needs to be a focus on each area for improved health outcomes.

Q. Are there other strategic objectives that you believe should be
included? If so please add them to the table and rank them.

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<td>STRATEGIC OBJECTIVE</td>
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<td>Improve connectivity within the region</td>
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<td>More efficiently use road space and railways</td>
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<td>Better maintain transport infrastructure</td>
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<td>Improve access in our towns and cities</td>
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<td>Improve access in rural areas</td>
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<td>Improve connections to key tourism sites</td>
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<td>Improve safety</td>
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<td>Improve social inclusion</td>
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<td>Develop transport programmes focussed on the user</td>
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<td>Reduce greenhouse gas emissions from transport</td>
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<td>Protect our biodiversity</td>
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<td>Reduce noise and air pollution</td>
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### Questions for Chapter Four

**Q. Do you agree with the interventions listed?**

The intervention 'promotion of walking and cycling' needs to be supported by improving safety measures for walking and cycling and providing cycling infrastructure. This intervention needs to be supported by investment in infrastructure and could be renamed as 'maximise options for active travel'.

Equity must be a key consideration in all interventions. The intervention 'improved accessibility for older people and people with disabilities' could be widened as interventions must be universal and support the needs of other groups such as those on a low income or young children.

**Q. Have you any other interventions to suggest or any alternative wording that you would prefer?**

As above

### Questions for Chapter Five

**Q. Do you agree with our proposals for a prioritisation framework?**

The prioritisation framework presents a transparent approach to meeting the strategic objectives. IPH propose that improvements to existing networks are considered before any new infrastructure projects.
IPH recommend a mechanism is included which considers the distributional impact of each objective.

IPH recommend that major projects are assessed by key stakeholders. The DHSSPS and the Public Health Agency (PHA) are well placed to contribute to this work.

Q. Have you any other prioritisation mechanism to suggest?