



NZ Climate & Health Council

www.orataiao.org.nz

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GPS Policy Team
Ministry of Transport
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OraTaiao submission on Government Policy Statement on Land Transport 2018/19-2027/28

OraTaiao: The New Zealand Climate and Health Council wishes to submit to the Ministry of Transport on the Government Policy Statement on Land Transport for 2018/19 – 2027/28 (GPS2018).¹

Climate changes fundamentally threaten human health and wellbeing; yet well-designed climate action can mean greater health and fairness in both the short and longer term. Transport is integral to this. There are close links between transport, climate and health, where eg.:

- active and sustainable modes of transport (such as walking and cycling) positively affect health;
- the current reliance on private motor vehicle transport has negative impacts on health through greenhouse gas emissions, road traffic crashes, air and noise pollution and increased sedentary time.¹

This submission relates to the GPS2018 and:

- acting on climate change
- prioritising active transport
- prioritising public transport
- the opportunity costs of poorly cost-effective roading choices including lost health gains
- the importance of making transport user hierarchies and the NZ Health Strategy integral to GPS2018's Strategic direction and Objectives.

Acting on climate change and health

OraTaiao calls for the GPS2018 to give higher priority to reducing carbon emissions.

OraTaiao: The New Zealand Climate and Health Council (OraTaiao, The Council) was formed in 2009 in response to climate change. We are an incorporated society of over 500 health professionals and associates calling for urgent and fair climate action – with real health gains now and for our future. Within its membership OraTaiao has world-leading climate-health

¹ <http://www.transport.govt.nz/ourwork/keystrategiesandplans/gpsonlandtransportfunding/>,
<http://www.transport.govt.nz/assets/Uploads/Our-Work/Documents/MOT-GPS-2018-web.pdf>

experts, and strong links with health bodies and other climate-health organisations in New Zealand and internationally. See more at our website, www.orataiao.org.nz.

Climate changes fundamentally threaten human health and wellbeing; yet well-designed climate action can mean greater health and fairness in both the short and longer term. There is a growing international urgency with the links between climate changes and health – The Lancet Commission¹³ has described climate change as both a global medical emergency but also identifies tackling climate change as potentially the greatest global health opportunity this century. Transport policy, which has significant implications for both climate change and health, is an integral part of this.

Thus, climate change is a serious emerging risk to global public health, development and equity.⁴ Greenhouse gas emissions from transport, especially from car use, are a leading contributor to climate change. In comparison, public transport has much lower emissions per passenger, and walking and cycling are emissions-free.

Hence OraTaiao acknowledges that the GPS2018 specifically notes the ‘mitigation of adverse environmental effects, including reduced CO₂ emissions’. Well-designed policies to reduce emissions, such as this, can bring about substantial health and health equity co-benefits.^{1,4,10} These co-benefits arise because some emission reduction measures impact on important determinants of health. For example, greater use of low-emission transport (walking, cycling, public transport) increases physical activity, and can reduce air pollution and road traffic injuries.

The New Zealand Government is committed to reducing carbon emissions by 50% from 1990 levels by 2050.⁵ Given the transport sector represents 20% of New Zealand’s total emissions and is the fastest growing sector,⁶ the GPS2018 should and must give higher priority to reducing carbon emissions.

Prioritise active transport

OraTaiao calls for the GPS2018 and funding frameworks to better prioritise active transport, including through:

- dedicated cycle ways, especially those that physically protect cyclists from vehicular traffic (mode separation)
- safer pedestrian and cycle routes (e.g. improved lighting, mode separation, traffic calming measures)
- pedestrian and cycle priority at certain intersections (e.g. near public transport hubs)
- making active transport the attractive convenient choice (e.g. through creating pedestrian and cycle shortcuts, plantings, high quality cycle parking facilities, etc)

It is extremely important that special emphasis is placed on socioeconomically disadvantaged communities, with prioritisation of investment in these communities. Not only are these areas often the most poorly served currently in terms of active transport infrastructure, but deprived communities also have the greatest potential to benefit given existing health and social inequities.

OraTaiao acknowledges the GPS2018 supporting active transport, including that ‘walking and cycling support a more efficient and cost effective transport system, provide transport choice and provide substantial health benefits’.

Active transport (physical activity undertaken as a means of transport) includes travel by foot, bicycle and other non-motorised vehicles. Public transport use is also more active than car use, since it is usually accessed by walking or cycling. There are strong links between this 'incidental exercise', and improved health. Active transport can help improve physical as well as mental health, community life, social wellbeing and community interaction and safety.^{1,10}

Physical activity is essential to good health, with the positive benefits of activity well proven in almost every human organ system. Lack of physical activity is also one of the most significant causes of heart disease, stroke, cancer and other leading causes of death in New Zealand. Increasing physical activity is about creating environments that support everyone to be more active in their day to day lives. It is not about creating more sports people, but creating a nation of people who are active every day.¹⁰ Good transport choices are essential for this.¹ Physical activity needs to be designed back into our everyday lives, specifically through, *inter alia*, transport strategy (and resources) refocussing to incentivise and prioritise public transport, walking, and cycling as regular daily transport.

Socially disadvantaged groups tend to have poorer access to cars. As such, these groups can particularly benefit from neighbourhoods where it is convenient and safe to walk or cycle to key destinations like shops, schools, workplaces, health care and other social services. Communities with good access to education, employment, health care and other social services are also more conducive to good health. Making communities easier and safer to get around by walking and cycling can improve accessibility to key destinations, reduce injury risk, enhance social connections, and facilitate activity for vulnerable population groups, thus helping to improve health equity.¹⁰

Most journeys of less than 2km can be completed by most people by walking. Most journeys of less than 10kms can be completed by most people by cycling. However, New Zealand's current transport infrastructure does not provide sufficient support for either walking or cycling, as it is primarily focused on cars and trucks. Building new road infrastructure in the absence of safe, coordinated pathways for active transport is likely to increase car use at the expense of more active modes.¹⁰

Pivotal modelling at the University of Auckland has indicated that transport policy that enables safe commuter bicycling in Auckland has the potential to yield benefits (with respect to injury, physical activity, fuel costs, air pollution, and carbon emissions) that are 10-25 times greater than costs.

Prioritise public transport

OraTaiao also calls for the GPS2018 and funding frameworks to better prioritise public transport, with special emphasis on socioeconomically disadvantaged communities.

Although active transport brings greatest overall benefits to health, the use of public transport rather than private transport still brings additional health benefits. Using public transport often incorporates active transport as a part of the journey and therefore encourages physical activity.² In addition, at average occupancy, public transport produces less harmful emissions compared with car use and so is the preferred mode of long distance travel.³

Public transport can often meet the needs of people where active transport may be less feasible – for example people who are aged, have physical disability, those with young dependents, and

those needing to travel long distances. Improved mobility for women, children, the elderly, and low income groups enhances health equity.^{1,4,10}

OraTaiao supports the GPS2018 and the intention to see improved returns from public transport. However, OraTaiao requests the GPS 2018 states explicitly the potential health and other benefits of public transport, and better describe and quantify the extent that socioeconomically disadvantaged communities are or may be underserved by public transport networks.

The opportunity cost of poorly cost-effective roading choices means lost health gains

While OraTaiao calls for the take-up of active/public transport, we also concurrently oppose competing poorly cost-effective roading that comes with high opportunity costs.

While active transport and public transport are cost-effective options, and need to be seen as such, sustainable healthy transport policy is not simply investing in active and public transport as add-ons. There also needs to be less investment in sedentary private transport infrastructure that undermines the viability of public and active transport, as well as creating considerable health costs through less physical exercise.¹⁰ This type of infrastructure also encourages more private vehicle use, which is a significant contributor to transport emissions and therefore climate change.

Large-scale motorway infrastructure projects with poor benefit: cost ratios (eg. RoNS) risk underinvestment in safety improvements to other roads, regional active and public transport modes, or other public services. This in effect is an opportunity cost.

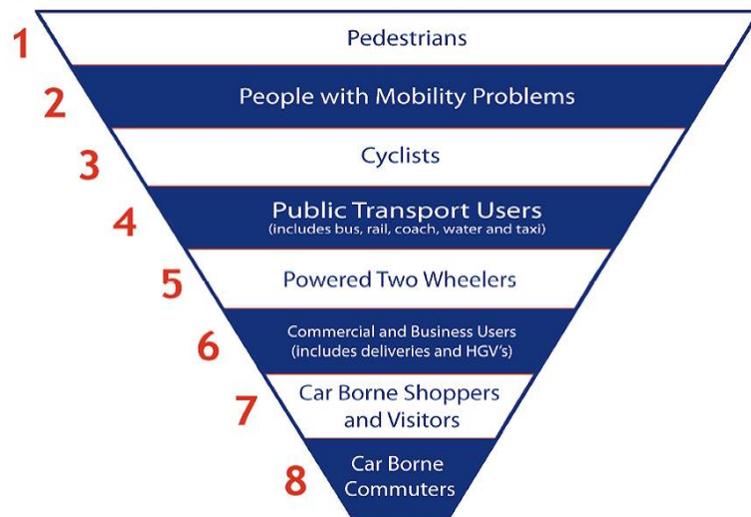
OraTaiao is aware that some RoNS projects have negative economic evaluations⁸⁻¹⁰ – with added likely undercounting of health costs, let alone the opportunity costs of such investments instead of, for example, improved child health outcomes. We consider this a vicious cycle that ultimately does not address road congestion, yet confers considerable costs, both directly through road construction and indirectly through detriments to population health.

GPS2018's Strategic direction and Objectives

OraTaiao calls for the GPS2018 to be strongly based on a transport users' hierarchy, and requests that page 6 include the New Zealand Health Strategy¹² in its list of Government policies relevant to transport.

Transport users' hierarchies (eg. the figure below) are important approaches for strategic planning, prioritisation of funding and implementation of all transport and urban design projects integral to the GPS2018. The GPS2018 should be strongly based on such a transport hierarchy.

Figure: Transport User's Hierarchy (City of York)¹



* Note: Pedestrians with mobility problems are given the highest priority

OraTaiao also requests that page 6 of the GPS2018 includes the New Zealand Health Strategy in its list of Government policies relevant to transport. This is because health and wellbeing is significantly determined by factors that lie outside the health and disability sector itself, eg. the Transport sector.

In addition, one of the key themes of the New Zealand Health Strategy is 'closer to home'; this cannot be achieved without effective transport systems providing increased access to health care, no matter where people live.

Thank you for allowing OraTaiao to submit on this Policy Statement. We hope our feedback is helpful, and please do not hesitate to contact OraTaiao if we can be of further assistance.

Yours faithfully,

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