

NCD Alliance Response: HABITAT III Issue Paper 19: Transport and Mobility

This response was prepared by the NCD Alliance, a global network of 2,000 civil society organisations in 170 countries working towards a world free of preventable suffering and death from non-communicable diseases (NCDs).

The NCD Alliance commends the drafting of the Issue Papers, and welcomes the opportunity to submit comments on the Issue Paper on Transport and Mobility as part of the Urban Dialogue on Urban Housing and Basic Services. The majority of people with NCDs live in urban settings, and urbanisation is associated with increasing exposure to risk factors for NCDs. As such, urban settings offer great opportunity for implementing effective policies and interventions for the prevention and control of NCDs.

General Comments

This paper clearly summarises the key issues related to urban transportation systems. The NCD Alliance is pleased to see the references made to walking and cycling, but recommends a stronger emphasis be placed on the need to encourage urban planning to facilitate transport by these means, and health promotion campaigns to convey the clear benefits to health of doing so – through reducing both emissions and also physical inactivity. Many of the issues relating to walking and cycling in this submission are also related to Issue Paper 11 on Public Spaces.

Key Facts and Figures

- NCDs, including cancer, cardiovascular disease, chronic respiratory diseases, diabetes and mental and neurological disorders share common risk factors, of which physical inactivity and poor air quality are major causes of morbidity and mortality, responsible for 3.2 millionⁱ and 3.7 millionⁱⁱ deaths annually worldwide respectively. The NCD Alliance commends the clear reference made to the burden of morbidity to outdoor air pollution, and recommends also including these statistics to demonstrate the health benefits of active transport.
- The penultimate paragraph of page 3 on non-motorised transport should include a clause on the health benefits of non-motorised transport. Car ownership and use correlates with physical inactivityⁱⁱⁱ. It is estimated that physically active individuals reduce their risk of developing type 2 diabetes by up to half^v. In Delhi, India, lower-carbon-emission motor vehicles and increased active travel scenarios would reduce the burden of diabetes by 6-17%, and groups of diseases including heart disease and stroke by 11-25% each^v. If half of short trips were made by bicycle in the US, an annual USD 3.8 billion would be saved from avoided mortality and reduced health care costs^{vi}.

Issue Summary

- The NCD Alliance strongly supports the objective to “create compact, walkable neighbourhoods” in the issue summary, and the note of the particular relevance of this to combating socioeconomic inequalities relating to health, education and jobs.
- Strongly recommend making specific reference to how walking and cycling have also deteriorated in recent years with increasing urbanisation. Linked to this, and to the issue paper 11 on public spaces, there is an urgent need to invest in careful design of infrastructure and roads to be pedestrian/cyclist friendly and protected for their use, protected from encroachment often the case in LMICs. Pedestrians are in fact the most often injured in road traffic accidents.
- Benefits of public and active transport should be framed in particular as an opportunity for smaller cities in developing countries which are not yet reliant on such high numbers of private vehicles, as well as an area for improvement for cities which already have a high number of private vehicles.



Key Drivers for Action

- The NCD Alliance commends the clear reference made the “polluter pays” principles, including congestion charges, tolls and parking fees. City inhabitants could be still further encouraged to use alternative forms of transport by reinvesting these funds in schemes for shared city bicycles which are particularly common in Europe.^{vii}
- While the key facts and figures section clearly notes the need to reduce emissions, this section on drivers for action does not make specific reference to setting and enforcing emissions standards, which will be at the very centre of ensuring monitoring and accountability across other interventions described.
- Reference to the need for vehicle safety standards and road traffic regulation, penalties and enforcement ought also to be included to reduce road crash injuries and deaths. In particular, pedestrians and cyclists tend to bear the greatest injuries in the absence of ample road safety regulations, and effective regulations have a dual benefit of improving the environment for these forms of active transport.
- Fuel pricing and taxation on vehicle import fees, in particular for private vehicles, should be mentioned as specific examples of effective national policies to reduce emissions. In addition, there is need for favourable taxation policies for clean fuels, which in particular can be prioritised for use by public transport.
- One area which should also be included as a driver for action is social marketing: it is critical that the inhabitants of cities support policies that will be in the long term be for their benefit but in the short-term may be unwelcome (e.g., fuel pricing, taxation etc.) Hence, strategic communication campaigns that change social norms and behaviours will be critical.

Platforms and Projects

- Two case studies that could be included in this section or elsewhere as successful examples of interventions yielding environment and health co-benefits are Bogota’s Ciclovía, and London’s congestion charge.
 - Bogota is a world renowned sustainable city. Investment in public transport and accessible pathways have improved the urban environment, active travel and sustainability since 1995. The landmark feature of the city’s sustainability is the ‘Ciclovía’, where 120km of road is inaccessible to cars every Sunday. Women regularly participating in Ciclovía are 7 times more likely to be physically active.^{viii}
 - In London, motorists must pay £8 to enter the centre of London during working hours, and data suggests that car journeys within the charging “zone” have fallen by a quarter. The “congestion charge” was estimated to save 1,888 extra years of life had been saved among the city’s seven million residents in its first five years.^{ix} Cycle journeys also increased by 20% across the city^x

ⁱ World Health Organization, Global Health Risks: Mortality and Burden of Disease Attributable to Selected Major Risks. 2009.

ⁱⁱ World Health Organization, Fact sheet N°313: Ambient (outdoor) air quality and health. 2014

ⁱⁱⁱ Mackett RL & Brown B, Transport, Physical Activity and Health: Present knowledge and the way ahead, University College London, 2011

^{iv} Department of Health, At least five a week: Evidence on the impact of physical activity and its relationship to health. 2004

^v Woodcock J et al, Public health benefits of strategies to reduce greenhouse-gas emissions: urban land transport. The Lancet 2009

^{vi} Grabow ML et al, Air quality and exercise-related health benefits from reduced car travel in the midwestern United States. Environmental Health Perspectives, 2012

^{vii} Larsen J, Bike-Sharing Programs Hit the Streets in Over 500 Cities Worldwide. Earth Policy Institute, 2013 (online)

^{viii} World Health Organization, Policy Brief: Physical Activity, Sports and Transport, April 2011

^{ix} British Broadcasting Corporation, Congestion charge 'boosts health'. 2008 (online)

^x Edwards P, Tsouros AD, A Healthy City is an Active City: A Physical Activity Planning Guide. World Health Organization European Regional Office, 2008