

# CCHC Call for Evidence

Response ID	Start date	Completion date
[REDACTED]	[REDACTED]	[REDACTED]

1	Title	[REDACTED]
1.a	If you selected Other, please specify:	
2	First Name(s)	[REDACTED]
3	Surname(s)	[REDACTED]
4	Contact email address	[REDACTED]
4.a	Additional email address (please complete this if you are submitting evidence on behalf of someone else)	
5	Location	United Kingdom (GB)
5.a	If you selected Other, please specify:	
5.b	City	London
6	Institution/Company/Organisation	Living Streets

7	Summary of evidence	<p>Commission on Creating Healthy Cities: call for Evidence Living Streets' response August 2021</p> <p>1. Introduction We are Living Streets, the UK charity for everyday walking. We want a nation where walking is the natural choice for local everyday journeys, free from congested roads and pollution, reducing the risk of preventable illnesses and social isolation and making walking the natural choice. We believe that a walking nation means progress for everyone. Our ambition is to get people of all generations to enjoy the benefits that this simple act brings and to ensure all our streets are fit for walking.</p> <p>We have 41,003 active supporters and 55 local groups.</p> <p>2. Summary Transport is integral to the creation of healthy cities, our daily habits are often dependent on the transport available to us. To cut carbon emissions and make active travel and public transport the natural choice for daily activities, walking and cycling must be convenient, easy, and safe. This short statement to the Commission on Creating Healthy Cities does not seek to answer questions on governance and decision-making processes. It reminds the Commission of:</p> <ul style="list-style-type: none"> <li>• The importance of the spaces between buildings, in the form of walkable streets and public realm, for place making</li> <li>• That walking short journeys and as part of longer journeys is one of the most effective transport solutions improve air quality, reduce energy consumption, improve productivity and 'level-up', after the pandemic</li> <li>• A healthy city is a walkable city. We agree that health should be the prism through which to consider the full spectrum of a city's social and public policies.</li> </ul> <p>3. The built environment, design and place-making The spaces between the buildings are an essential part of place making too. Streets are not only corridors people walk through, they are destinations in their own right. This was demonstrated by 'Reinvigorate York' a programme of public realm improvements and a marketing campaign (2012-14) which recognised that the majority of the city's visitors just want to "stroll around and enjoy the ambience of York"(i.) . Public realm interventions should consider ways to make streets accessible places that people of all ages and abilities will want walk to, for the health benefits this brings. Active, vibrant streets add to the quality of the walking experience. As stated in the Manual for Streets (2007) (ii.) :</p> <p>"A 20-minute walk alongside a busy highway can seem endless, yet in a rich and stimulating street, such as in a town centre, it can pass without noticing."</p> <p>As well as encouraging active travel, attractive streets and public spaces deliver increased economic activity through increases in footfall and notable values of high streets (iii). Place matters so public realm improvements should be sympathetic to local</p>
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footpath and rateable values of high streets (iii.). Places matter, so public realm improvements should be sympathetic to local heritage and architectural features, for example, through choice of materials and street furniture (iv.). One of the best ways to find out what matters to local people is to conduct a community street audit to find out what they like about their local area and how they would like to improve it.

#### 4. Transport and movement, infrastructure and technology

Investing in walkable cities is one of the best ways to improve air quality, reduce energy consumption, improve productivity, 'level-up' and help to create a healthy city, after the pandemic. Covid19 has shown what can be done in a very short space of time to reallocate road space for walking and cycling. The virus has not gone away and that space is still needed to encourage active and sustainable travel. COVID19 also demonstrated the powerful role of technology - enabling people to work from home and reducing their need to travel.

Smartphones and the sharing of mobile data are key to the development of Mobility As A Service (MAAS) platforms, offering scope to integrate timetables and ticketing across all modes. The ability of MAAS platforms to offer wider choice and encourage active and sustainable modes of transport will depend on several key factors, such as the availability of public transport, its cost, the predictability of journey times (i.e. the ability to reliably plan your journey), congestion (which affects journey reliability or propensity to walk or cycle) and air quality. Interventions such as reducing road space for private car journeys and allocating more space for active and sustainable transport, subsidising the cost of public transport - alongside behaviour change campaigns - can help to encourage these forms of transport.

Transport schemes should be assessed against their contribution to wider public policy goals, in particular the reduction of carbon emissions and benefit to public health, to reflect a broader definition of value for money. Rebalancing transport spending towards walking and cycling should be essential to the 'levelling-up' agenda. It has been estimated that the most affluent 10% of the population receive almost four times as much public spending on their road transport needs as the poorest 10% (v.). This discriminates against the 20% of households in England (excluding London) who have no access to a car (or who for other reasons are unable to drive e.g. age, health or disability) and rely on walking, cycling or public transport instead (vi.). Changing travel patterns show that fewer young people are choosing to drive, and car traffic growth has slowed in recent years (vii., viii., ix.). The proportion of car-free households and levels of transport inequality increase to nearly 50% in the lowest income quintile (x.). People living in deprived areas are either disproportionately affected by the cost of car dependence or by the impacts of having to live, work and walk next to busy, dangerous, noisy and polluted streets.

#### 5. Health and wellbeing

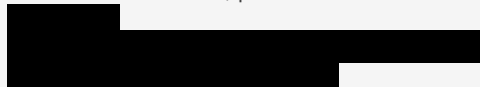
We agree that health should be the prism through which to consider the full spectrum of a city's social and public policies. A city is its people: healthy, happy people will be reflected in the health and prosperity of the city. And a healthy city is a walkable city. The built environment in cities influences incidental interactions on streets and in neighbourhoods; it can help to build (or divide) communities. It can also make space for contemplation. Walking is both a physical and social activity. Public realm design should include places where people will want to stop, chat and rest, and quiet spaces and walks with access to the natural environment, for instance, in local parks.

Before Covid19 changed everyday life for everyone, a quarter of adults in the UK would experience at least one diagnosable mental health problem in any given year (xi.) and one in six would experience common symptoms of a mental health disorder every week (xii.). Mental health problems were already one of the leading causes of absence from work - an estimated 14.3 million working days lost every year due to stress, depression and anxiety (xiii.) - costing the UK economy more than £94 billion each year - roughly 4% of its GDP (xiv.). A fifth of the UK's population felt lonely almost all or most of the time, rising to two fifths for 16-24 year olds (xv., xvi.).

As well as enabling social connections, physically active people report being happier, less anxious and have a stronger sense of social integration (xvii., xviii.). Walking can be as effective as antidepressants in treating mild depression, has been found to improve mood and sleep and alleviate symptoms commonly associated with poor mental health such as stress, low self-esteem and social withdrawal (xix.). During successive lockdowns, walking has been a lifesaver supporting people's physical and mental health.

One in four people say they would be more active if advised by a healthcare professional. In our experience, 'social prescribing' is successful at helping to manage and improve mental (and physical) health (xx.). Rotherham's Social Prescribing Service (xxi.) is a good example of providing similar support in the community at a borough-wide scale. Based on a key partnership between healthcare professionals and voluntary and community organisations, it serves to reduce demand on public services further down the line.

For more information, please contact:



#### References:

- i. Living Streets (2018). 'The Pedestrian Pound: the business case for better streets and spaces'. pedestrian-pound-2018.pdf (livingstreets.org.uk)
- ii. Manual for Streets, 2007. Designing and modifying residential streets - GOV.UK (www.gov.uk)
- iii. Living Streets (2018). Ibid.
- iv. See for example Historic England's (2018) 'Advice for Highway and Public Realm Works in Historic Places'. Streets for All | Historic England
- v. Sustainable Development Commission (2011) Fairness in a car-dependent society <http://www.sd-commission.org.uk/pages/fairness-in-a-car-dependent-society.html>
- vi. Department for Transport (2017) British Social Attitudes Survey 2017: Public attitudes towards transport. Table ATT0322

https://www.gov.uk/government/statistical-data-sets/att03-attitudes-and-behaviour-towards-roads-and-road-travel

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viii. Theo Leggett (6 January 2020) New car registrations at lowest level since 2013, BBC News <https://www.bbc.co.uk/news/business-50985412>

ix. Roger Harrabin (18 July 2018) Are young people going cool on cars? BBC News <https://www.bbc.co.uk/news/science-environment-44849381>

x. Department for Transport, 2018. Table NTS0703, National Travel Survey 2018: England <https://www.gov.uk/government/statistical-data-sets/nts07-car-ownership-and-access>

xi. McManus, S., Meltzer, H., Brugha, T. S., Bebbington, P. E., & Jenkins, R. (2009). Adult psychiatric morbidity in England, 2007: results of a household survey. The NHS Information Centre for health and social care. [https://www.researchgate.net/publication/266299241\\_Adult\\_psychiatric\\_morbidity\\_in\\_England\\_2007\\_Results\\_of\\_a\\_household\\_survey](https://www.researchgate.net/publication/266299241_Adult_psychiatric_morbidity_in_England_2007_Results_of_a_household_survey)

xii. McManus S, Bebbington P, Jenkins R, Brugha T. (eds.) (2016). Mental health and wellbeing in England: Adult psychiatric morbidity survey 2014. Leeds: NHS digital. <https://digital.nhs.uk/data-and-information/publications/statistical/adult-psychiatric-morbidity-survey/adult-psychiatric-morbidity-survey-survey-of-mental-health-and-wellbeing-england-2014>

xiii. Public Health England (31 January 2019) Health matters: health and work <https://www.gov.uk/government/publications/health-matters-health-and-work/health-matters-health-and-work>

xiv. OECD/EU (November 2018) Health at a Glance: Europe 2018: State of Health in the EU Cycle, OECD Publishing, Paris. [https://ec.europa.eu/health/state/glance\\_en](https://ec.europa.eu/health/state/glance_en)

xv. Campaign to End Loneliness (No date) Loneliness Research <https://www.campaigntoendloneliness.org/loneliness-research/>

xvi. Manchester University (1 October 2018) Young people are the loneliest age group, according to new survey <https://www.manchester.ac.uk/discover/news/loneliest-age-group/>

xvii. Sport England (2019) Active Lives Adult Survey (18/19 report) <https://www.sportengland.org/media/14239/active-lives-adult-may-18-19-report.pdf>

xviii. Hassamén P, Koivula N & Uutela A (January 2000) Physical exercise and psychological well-being: a population study in Finland, Preventive Medicine 30:1, 17-25 <https://www.ncbi.nlm.nih.gov/pubmed/10642456>

xix. Sharma A, Madaan V & Petty F.D (2006) Exercise for Mental Health, Primary Care Companion to The Journal of Clinical Psychiatry 8(2):106 Exercise for Mental Health (nih.gov)

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xxi. See <http://www.rotherhamccg.nhs.uk/rotherhams-social.htm>

8	Please select which exposure(s) your evidence relates to. Further explanation on these exposures can be found on a PDF file here. Please select all that apply.	Planning (e.g. density, green spaces, housing, transport, urban design etc.)
9	Please select which outcome(s) the submitted research relates to. Please select all that apply.	<ul style="list-style-type: none"> <li>• Health (physical): (e.g. non-communicable diseases, communicable diseases, behaviours etc.)</li> <li>• Mental Health</li> <li>• Lived experiences: (e.g. social health, social wellbeing, social behaviour etc.)</li> </ul>
10	Method of evidence submission: If you need to provide further evidence, please submit this either digitally via email or hard copy via post.	
11	How did you hear about the Commission on Creating Healthy Cities and the associated call for evidence?	From the Chair of Living Streets, Dame Jane Roberts.



# Commission on Creating Healthy Cities: call for Evidence

## Living Streets' response

August 2021

### Introduction

We are Living Streets, the UK charity for everyday walking. We want a nation where walking is the natural choice for local everyday journeys, free from congested roads and pollution, reducing the risk of preventable illnesses and social isolation and making walking the natural choice. We believe that a walking nation means progress for everyone. Our ambition is to get people of all generations to enjoy the benefits that this simple act brings and to ensure all our streets are fit for walking.

We have 41,003 active supporters and 55 local groups.

### Summary

Transport is integral to the creation of healthy cities, our daily habits are often dependent on the transport available to us. To cut carbon emissions and make active travel and public transport the natural choice for daily activities, walking and cycling must be convenient, easy, and safe. This short statement to the Commission on Creating Healthy Cities does not seek to answer questions on governance and decision-making processes. It reminds the Commission of:

- The importance of the spaces between buildings, in the form of walkable streets and public realm, for place making
- That walking short journeys and as part of longer journeys is one of the most effective transport solutions improve air quality, reduce energy consumption, improve productivity and 'level-up', after the pandemic
- A healthy city is a walkable city. We agree that health should be the prism through which to

consider the full spectrum of a city's social and public policies.

## The built environment, design and place-making

The spaces between the buildings are an essential part of place making too. Streets are not only corridors people walk through, they are destinations in their own right. This was demonstrated by 'Reinvigorate York' a programme of public realm improvements and a marketing campaign (2012-14) which recognised that the majority of the city's visitors just want to "stroll around and enjoy the ambience of York"<sup>i</sup>. Public realm interventions should consider ways to make streets accessible places that people of all ages and abilities will want walk to, for the health benefits this brings. Active, vibrant streets add to the quality of the walking experience. As stated in the Manual for Streets (2007)<sup>ii</sup>:

*"A 20-minute walk alongside a busy highway can seem endless, yet in a rich and stimulating street, such as in a town centre, it can pass without noticing."*

As well as encouraging active travel, attractive streets and public spaces deliver increased economic activity through increases in footfall and rateable values of high streets<sup>iii</sup>. Places matter, so public realm improvements should be sympathetic to local heritage and architectural features, for example, through choice of materials and street furniture<sup>iv</sup>. One of the best ways to find out what matters to local people is to conduct a community street audit to find out what they like about their local area and how they would like to improve it.

## Transport and movement, infrastructure and technology

Investing in walkable cities is one of the best ways to improve air quality, reduce energy consumption, improve productivity, 'level-up' and help to create a healthy city, after the pandemic. Covid19 has shown what can be done in a very short space of time to reallocate road space for walking and cycling. The virus has not gone away and that space is still needed to encourage active and sustainable travel. COVID19 also demonstrated the powerful role of technology – enabling people to work from home and reducing their need to travel.

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## Health and wellbeing

We agree that health should be the prism through which to consider the full spectrum of a city's social and public policies. A city is its people: healthy, happy people will be reflected in the health and prosperity of the city. And a healthy city is a walkable city. The built environment in cities influences incidental interactions on streets and in neighbourhoods; it can help to build (or divide) communities. It can also make space for contemplation. Walking is both a physical and social activity. Public realm design should include places where people will want to stop, chat and rest, and quiet spaces and walks with access to the natural environment, for instance, in local parks.

Before Covid19 changed everyday life for everyone, a quarter of adults in the UK would experience at least one diagnosable mental health problem in any given year<sup>xi</sup> and one in six would experience common symptoms of a mental health disorder every week<sup>xii</sup>. Mental health problems were already one of the leading causes of absence from work – an estimated 14.3 million working days lost every year due to stress, depression and anxiety<sup>xiii</sup> – costing the UK economy more than £94 billion each year – roughly 4% of its GDP<sup>xiv</sup>. A fifth of the UK's population felt lonely almost all or most of the time, rising to two fifths for 16-24 year olds<sup>xv xvi</sup>.

As well as enabling social connections, physically active people report being happier, less anxious and have a stronger sense of social integration<sup>xvii xviii</sup>. Walking can be as effective as antidepressants in treating mild depression, has been found to improve mood and sleep and alleviate symptoms commonly associated with poor mental health such as stress, low self-esteem and social withdrawal<sup>xix</sup>. During successive lockdowns, walking has been a lifesaver supporting people's physical and mental health.

One in four people say they would be more active if advised by a healthcare professional. In our experience, 'social prescribing' is successful at helping to manage and improve mental (and physical) health<sup>xx</sup>. Rotherham's Social Prescribing Service<sup>xxi</sup> is a good example of providing similar support in

the community at a borough-wide scale. Based on a key partnership between healthcare professionals and voluntary and community organisations, it serves to reduce demand on public services further down the line.

**For more information, please contact:**

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<sup>i</sup> Living Streets (2018). 'The Pedestrian Pound: the business case for better streets and spaces'. [pedestrian-pound-2018.pdf \(livingstreets.org.uk\)](https://www.livingstreets.org.uk/pedestrian-pound-2018.pdf)

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<sup>iv</sup> See for example Historic England's (2018) 'Advice for Highway and Public Realm Works in Historic Places'. [Streets for All | Historic England](https://www.historicengland.org.uk/advice-for-highway-and-public-realm-works-in-historic-places/)

<sup>v</sup> Sustainable Development Commission (2011) Fairness in a car-dependent society <http://www.sd-commission.org.uk/pages/fairness-in-a-car-dependent-society.html>

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<sup>vii</sup> Marsden, G. *et al.* (2018) All Change? The future of travel demand and the implications for policy and planning. First Report of the Commission on Travel Demand [http://www.demand.ac.uk/wp-content/uploads/2018/04/FutureTravel\\_report\\_final.pdf](http://www.demand.ac.uk/wp-content/uploads/2018/04/FutureTravel_report_final.pdf)

<sup>viii</sup> Theo Leggett (6 January 2020) New car registrations at lowest level since 2013, BBC News <https://www.bbc.co.uk/news/business-50985412>

<sup>ix</sup> Roger Harrabin (18 July 2018) Are young people going cool on cars? BBC News <https://www.bbc.co.uk/news/science-environment-44849381>

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- <sup>xiii</sup> Public Health England (31 January 2019) Health matters: health and work  
<https://www.gov.uk/government/publications/health-matters-health-and-work/health-matters-health-and-work>
- <sup>xiv</sup> OECD/EU (November 2018) Health at a Glance: Europe 2018: State of Health in the EU Cycle, OECD Publishing, Paris. [https://ec.europa.eu/health/state/glance\\_en](https://ec.europa.eu/health/state/glance_en)
- <sup>xv</sup>Campaign to End Loneliness (No date) Loneliness Research  
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<https://www.ncbi.nlm.nih.gov/pubmed/10642456>
- <sup>xix</sup> Sharma A, Madaan V & Petty F.D (2006) Exercise for Mental Health, Primary Care Companion to The Journal of Clinical Psychiatry 8(2):106 [Exercise for Mental Health \(nih.gov\)](https://doi.org/10.4088/JCOP.0802106)
- <sup>xx</sup> Public Health England (16 October 2019). Physical activity: applying All Our Health  
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- <sup>xxi</sup> See <http://www.rotherhamccg.nhs.uk/rotherhams-social.htm>