Online surveys

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	Sustrans

7	Summary of evidence	Sustrans is the charity making it easier for people to walk and cycle. Our vision is a society where the way we travel creates healthier places and happier lives for everyone. Cities and towns should be places that prioritise the people who live and spend time there. For too long they have been designed around cars, leaving less space for socialising, walking, cycling and spending time in; things that make our lives better and add to our happiness. Car-dominated spaces create congestion and damage our environment and health. They harm people who are already disadvantaged the most. Inequalities in health, access to transport and access to green or open space are deep rooted problems in cities, which have been exacerbated and emphasised by the COVID-19 pandemic. These inequalities which will only be tackled by a concerted, cross departmental effort from Government, but changes to the built environment should form part of that response. Central to our vision for cities and towns is the 20-Minute Neighbourhood, where residents are able to meet most of their needs within a 20-minute return walking trip. This means focusing on developing and building healthy neighbourhoods for everyone where homes are close to shops, green space and schools, streets are safe for walking and cycling, and public transport is accessible

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.) • Environment (e.g. pollution, climate, carbon emissions, ventilation, biodiversity, natural habitat, natural disasters, noise etc.) • Governance and policy

9	Please select which outcome(s) the submitted research relates to. Please select all that apply.	• Wellbeing • Health (physical): (e.g. non-communicable diseases, communicable diseases, behaviours etc.) • Mental Health • Quality of Life

10	Method of evidence submission: If you need to provide further evidence, please submit this either digitally via email or hard copy via post.	Digital (via email to gchu@kellogg.ox.ac.uk)

11	How did you hear about the Commission on Creating Healthy Cities and the associated call for evidence?	We were contacted by the Commission

Commission on Creating Healthy Cities

Call for evidence

August 2021

Sustrans is the charity making it easier for people to walk and cycle. Our vision is a society where the way we travel creates healthier places and happier lives for everyone.

Cities and towns should be places that prioritise the people who live and spend time there. For too long they have been designed around cars, leaving less space for socialising, walking, cycling and spending time in; things that make our lives better and add to our happiness. Car-dominated spaces create congestion and damage our environment and health. They harm people who are already disadvantaged the most.

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If you require any clarifications or further information on this response, please contact [redacted].

1.A - How best can City leaders ensure that the voices of citizens/users of services shape their policymaking and keep the public genuinely engaged with the process of policymaking as it proceeds from consultation to decision?

City leaders can most effectively engage with citizens by involving them early and continuously in the process of policymaking, and updating them throughout the process in response to how their feedback has been incorporated and considered.

Involving local communities through a collaborative approach is essential to deliver successful schemes. Local people are experts on their local area, have a deep awareness of issues and innovative solutions for them.

Ideally, a framework for community-led policy should be put in place, especially when considering changes to neighbourhood planning or transport schemes which change street designs or layouts. This allows for identification of the concerns and needs of the community on transport and accessibility, and the development of options for healthy streets which can be trialled and then consulted on.

Pursuing a top down approach where communities are simply invited to give their views on a number of pre-prepared designs is less likely to have community support and buy in.

Gaining input from the community early on provides access to in-depth local knowledge and can save on monitoring, traffic count and modelling costs upfront.

The neighbourhood planning process should be developed to meet three simple rules:

- Provide opportunities for engagement and ensure they are accessible, comfortable and inclusive so everyone from the community can take part if they choose to.
- Listen to the local community and make sure they know their voice has been heard by feeding back our findings to them afterwards.
- Bring ideas to life through innovative street trials, enabling people to see and feel the change on foot, by bike or by car and then refine the changes before being made permanent.

Robust evidence and feedback should be shared with citizens throughout to clarify decision-making and to keep citizens informed and engaged.

To help address inequalities, marginalised voices should be proactively sought out and amplified as part of the policy or project development process. An Equality Impact Assessment process should also be carried out to evidence adaptations taken as a result of this targeted engagement work.

1.B - What are the methods that work, and that don't work, in engaging the wider public in the task of creating a healthy city?

Methods that work in engaging the wider public include:

- Providing a strong and positive **vision for change** that shares both quantitative data as well as impactful human stories. Quantitative data alone may not counter vocal opposition that may accompany radical changes.

- **Assessing and demonstrating a public appetite** for change at the outset can be helpful before taking ideas forward for further development.

- Setting **clear objectives** helps the wider public to effectively engage in the task of creating a healthy city. Engagement that is too open-ended or without clarity can lead to difficulties in challenging the status-quo.

- Engaging the wider public in creative and varied ways, not just using the standard 'town-hall' format, but recognising that some people may prefer to engage online, and others might engage more fully when engagement is linked to an existing in-person community event.

- Developing pilot projects and trials, which can then adapt and respond to feedback over time.

Methods that don't work in engaging the wider public include:

- Top down introduction of changes to neighbourhoods which have not been community led and which do not identify and address the true needs of local people.

- A lack of communication with citizens, or community engagement taking place too late in the project lifecycle. This can backfire, and cause the spread of frustration and misinformation. Proactive, positive communications throughout the project lifecycle are fundamental.

- When the majority of citizens support a proposal, it is important not to over-emphasise opposition which can be vocal and negative. If concerns are heard more loudly than support for the project, this can encourage more people to oppose a project.

2.A - Is there evidence that changes to urban design and housing quality – including energy efficiency, security, affordability – for both new development and neighbourhood regeneration, will lead to healthier cities?

Healthy cities are shaped by their urban design[1]. This ranges from how streets are arranged, how and where buildings are sited, and how climate impacts are mitigated[2], to name just a few issues.

There is evidence that well-designed and lively street frontages are more likely to encourage active travel, as well as stimulate the brain[3].

Well-considered urban design also shape the ability for children to move around independently[4], for people of all ages to feel less isolated[5], and for marginalised groups[6] to be able to travel more safely[7] and more independently.

2.C - What evidence is available to support the case for changes to local and national policies for housing and the built environment in the light of the Covid experience?

Since the beginning of the pandemic, disparities in risk and outcome for COVID-19 for different people have emphasised existing health inequalities, and societal inequalities in employment type, access to green space, reliance on public transport and quality of housing.

Disparities in the risk and outcomes from COVID-19 were found by older age, deprivation, ethnic background, and occupation[8]. These disparities reflect deep rooted health inequalities which will only be tackled by a concerted, cross departmental effort from Government, but changes to the built environment should form part of that response.

Changes should be made to the built environment to reduce car dependency and make it easier and safer for people to walk, cycle and take public transport. Ensuring that fewer people have to rely on cars to get around would build exercise into daily lives, reduce road danger from vehicles, reduce air pollution, ensure that more people can access work and education and provide more green and open space. Currently, it is more challenging for some people to walk, cycle and use public transport than it is for others, and we need to equitably re-design and re-think the built environment.

To help address these issues by changing the built environment, we have three core recommendations for reforming planning:

- Adopt the 20-Minute Neighbourhood concept as a central principle of the planning system, including both the National Planning Policy Framework and Local Plans

- Produce updated planning guidance to create active neighbourhoods that prioritise walking, cycling and public transport and reduce demand for car use

- Embed the National Cycle Network within the National Planning Policy Framework as a UK-wide network of national importance

In order for the UK Government to equitably meet its targets on walking and cycling set out in the Cycling and Walking Investment Strategy, it will be necessary to re-commit to the £2 billion for walking and cycling in the 2021 Spending Review and build on this by investing £6-£8 over the next four years.

To ensure people are not left behind or locked out of work from transport poverty; and to meet the ambitious targets set out in CWIS and 'Gear Change' we need to ensure that funding does not just go towards capital projects and schemes that increase cycling and walking fastest but also to schemes and programmes that improve walking and cycling for everyone.

This includes:

- better representing all people, especially disadvantaged communities, in the planning and development of walking and cycling in their area.

- programmes that work with and address barriers from specific groups that are underrepresented in cycling: older people, women, disabled people and people from ethnic minorities, including support to access a cycle.

- programmes that help everyone to walk and feel comfortable and welcome doing so, tackling accessibility issues in particular.

The benefits of more physical activity as part of daily life

COVID-19 can make anyone seriously ill, but there is increased risk of serious illness for people who are clinically vulnerable (moderate risk) or clinically extremely vulnerable (high risk)[9].

In terms of physical health and prevention of ill-health, a number of non-communicable diseases which place people in high or moderate risk groups, such as cardiovascular diseases, cancer and diabetes, can potentially be managed or prevented through regular physical activity[10]. Accordingly, people's level of physical activity prior to the pandemic could potentially have informed their experience of COVID-19 in terms of both its physical and mental health impacts.

In terms of maintaining mental wellbeing during lockdowns, physical activity can also reduce symptoms of depression and anxiety[11]. For people unable to access safe, open spaces as readily, exercising was more difficult to undertake in a convenient, safe manner.

2.6 - How best can Local Planning Authorities play a positive, proactive role in creating the healthy city?

Local authorities often lack the necessary resource[12] and capacity to effectively engage with developers in a proactive way, or to set strong parameters that shape healthy cities. To enable a more proactive approach to planning, rather than the open-ended (and often increasingly reactive and developer-led) negotiations of the current UK planning system[13], more resource is likely to be required in the form of urban design and masterplanning capacity.

This additional capacity would enable Local Authorities to set more precise site-by-site requirements to better align with strategic policy positions.

Developing stronger design briefs and masterplan expectations for developers would enable more consistency in relation to the development of healthier cities. Briefs could stipulate stronger standards in relation to active travel infrastructure in particular, as well as a more strategic approach to the integration of transport links across a wider area.

This is often described as an 'infrastructure-led'[14] approach and sets out healthy-city parameters for developers to work around, rather planners having to frequently negotiate around developer-led expectations of parking requirements and traffic demand, for example.

2.11 - Is there evidence that outcomes are unsatisfactory for occupiers of high-rise flats? Or of out-of-town estates with no community facilities?

There is conflicting evidence linking the height of a building to the health outcomes of its occupants. Some studies point to poorer mental health outcomes of flat dwellers[15], whereas other studies note that mortality rates can actually decrease with increasing floors[16].

High-rise flats in the UK are nonetheless more likely to house social tenants[17], as well as Black, Asian and Ethnic Minority communities and those in more deprived areas.[18] These factors are more likely to impact health outcomes than the height of the building.

Many UK social housing blocks were also built with little by the way of social amenities or have been poorly maintained and managed since their construction. Many high-rise flats have also historically been built or recently converted using poor building standards, creating cramped living environments for families and communities. All these factors can contribute to poorer health outcomes, and there is not clear evidence that the building typology has a negative role to play in itself. In fact, as an urban building typology, well-designed high-density housing can help to encourage active travel, and ensure that people have most of what they need a short walk away. This can help to reduce transport poverty which in turn will lead to better health outcomes.

In relation to out-of-town estates with no community facilities. There is evidence that transport poverty links to social exclusion and disadvantage[19]. Sustrans evidenced the extent of transport poverty in England in 2012[20] and Scotland in 2016[21].

Sustrans supports the development of Liveable Cities and Towns. These are places which:

- Have social connection at their heart
- Have most of what you need just a short walk away
- Have roots and celebrates their unique character
- Are easy for everyone to more around healthily in
- Have clean air and green space for all to live and play in

Liveable Cities and Towns may include high rise flats that integrate well-maintained and managed social amenities, but out-of-town estates with no community facilities would not fit this definition.

3.A - Could the transport and mobility sectors lead the way, after the pandemic, in offering evidence-based solutions to issues of air quality, energy consumption, improved productivity, 'levelling up' and helping create the healthy city?

There is a compelling and growing evidence base on changes to transport and planning policies which would help to addresses challenges around air quality, energy consumption, productivity, levelling up and active cities.

This evidence shows there needs to be a shift towards reducing car dependency and making it easier for people to reach the things they need by walking, cycling and public transport. Fewer, rather than just cleaner, vehicle journeys are needed.

Electric vehicles can play a part in helping to reduce energy consumption, but unless growing demand for vehicle use is reversed, even electrification of the entire vehicle fleet will not mean reaching net-zero or air quality targets, and will not help to address issues such as a poor connectivity, road danger, and low levels of physical activity.

Air quality

Focusing on reducing vehicle miles and demand is needed in order to better tackle the air quality challenges currently facing towns and cities; this issue is addressed fully in question 3.5.

Energy consumption and net-zero

Transport is now the UK's largest source of greenhouse gases. Given the growing demand for road travel and planned road building programme, if the UK is to deliver its fair share of global carbon reduction, electric cars will not be enough and traffic reduction is also needed[22].

- Even if all new cars are ULEVs by 2030, transport emissions are still likely to exceed what is needed to meet a 1.5°C global warming target.
- The level of traffic reduction needed by 2030 could be between 20% and 60%, depending on the speed of the switch to electric vehicles.
- For example, even if all new cars were ULEVs by 2035 (80% battery electric, 20% plug-in hybrids), a 58% reduction in car mileage between 2016 and 2035 would be needed for car CO2 emissions to be in line with a 'well below 2°C' pathway.
- These estimates are highly dependent on a host of factors including the rate of uptake of ULEVs in the car fleet, improvements in conventional car efficiency, size of the fleet, and reductions in grid carbon intensity.

The planned Roads Investment Strategy 2 will drive energy consumption from vehicle trips[23]**:**

- RIS2 alone will add an estimated 20 million tonnes of carbon dioxide (20 MtCO2) to UK emissions between now and 2032, negating 80% of the benefit arising from the switch to electric vehicles.
- This will come from construction, higher vehicle speeds and extra traffic stimulated by more car-dependent housing, retail parks and business parks
- Even with the Government's most optimistic estimate of the adoption rate for electric vehicles, emissions from trunk roads and motorways in England are not on track to meet 'net zero' by 2050

Productivity

Well-designed employee health promotion programmes such as schemes to help more employees cycle to work, can increase employee job satisfaction by between 10% and 25%[24]. Furthermore, it has been shown that most workplace health promotion programmes show a return on investment through increased productivity[25].

Reduced absenteeism (defined as a habitual pattern of absence from work) has also been linked directly to increased physical activity among employees, with the economic benefits of reduced presenteeism considered to be even greater. Even promoting healthier travel options in the workplace has been shown to reduce absenteeism by up to 20%[26].

If employees can incorporate greater levels of physical activity into their days through walking and cycling part or all of their journey to work; and workplaces put programmes in place, e.g. cycle parking and vouchers to help them to do it, the benefits to job satisfaction, productivity and reduced absenteeism are large:

- Workers that undertake physical activity take 27% fewer sick days[27].
- Employees who cycle regularly to work are less frequently ill, with on average more than one day per annum less absenteeism than colleagues who do not cycle to work[28]. Furthermore, a dose-response relationship was observed between the speed and distance of cycling and absenteeism.

Levelling-up

Investing in cycling and walking can contribute to our economic recovery from Covid-19 and levelling up, with the potential to create 103,000 jobs in the next two years[29].

There are a number of key areas where walking and cycling contribute towards economic performance. These are:

- Direct job creation
- Keeping people and business moving
- Supporting local businesses and high streets
- Improving business productivity

Direct job creation

Investing in cycling and walking can help with direct job creation, by providing better access to jobs and stimulating construction projects. There is potential to reduce social and economic inequity and provide affordable, healthy and safe mobility for people.

Lower income households have lower levels of car ownership, with female heads of house, children, young and older people, ethnic minorities and disabled people concentrated in this group. In addition, there are considerable affordability issues with car ownership that can lead to a risk of transport poverty. Cycling helps people who do not have a car to access essential services and jobs.

Recent analysis by Transition Economics[30] compared the job creation potential of 23 different infrastructure projects that the government could invest in as part of Covid-19 economic recovery.

Their research found that building cycle lanes and pedestrian infrastructure have the highest employment multiplier, i.e. creating the most jobs per £1 million invested, after energy efficiency retrofit projects.

The modelling undertaken estimates that cycling and walking infrastructure projects could create 32.6 immediate jobs per £1 million invested per year, mostly in construction and in the supply chain that supports it. These are sectors that have had high proportions of workers furloughed, with 40.5% in construction and 28.8% in manufacturing, respectively. These jobs are distributed across the country, supporting local economies.

Keeping people and business moving (congestion reduction) and improving accessibility

Congestion is getting worse in cities across the UK and current projections have suggested a cost to the economy of £6.9 billion per year[31].

According to the British Chamber of Commerce the expenses associated with congestion are on average thought to cost each individual business approximately £17,000 a year[32].

It is apparent that the wider economy would greatly benefit from a healthier and more efficient transport system. Reduced congestion is a key output from the WebTAG economic appraisal framework[33], providing an output related to reduced car usage. Modal shift from the car to walking and cycling will reduce congestion.

In addition, reduced capacity on public transport will make it harder for many people to access their daily needs such as work, education, local shops and services. This is especially the case for many people from more deprived backgrounds who are least likely to have access to a car. Investing in walking and cycling can provide a more inclusive and low cost way for people to access the things they need and participate in society.

Supporting local businesses and high streets

Retail is a crucial sector of the UK economy. Almost 11% of all employment is in the retail sector. It is the UK's third largest industry and accounts for 14% of small businesses[34]

This level of car usage is much less than the predominance anticipated by many retailers; surveys of shoppers have been conducted by Sustrans in Bristol, Swansea and Newcastle:

- On independent shopping streets in Bristol and Newcastle, less than a third of shoppers arrived by car.
- On one of the main city centre shopping streets in Swansea, 50% of shoppers had arrived by car.

The contribution of sustainable transport to town and city centre shopping areas is much greater than assumed and so any investment would be more suitably focussed on improvements that support people walking, arriving by cycle or public transport.

The pedestrianisation of York city centre was found to help trade. Large stores such as Marks and Spencer noted that three months after, their turnover had increased by over 20%[35]. People in pedestrianised areas have more time to stop, look, and spend without the hassle of navigating busy roads and worrying about traffic[36]. H

However, despite this evidence, fear of losing revenue from traffic calming measures, and changes in the streetscape to reduce car access and increase access by other means creates opposition. Therefore, the evidence such as that below needs to be better communicated to local businesses to show the positive economic impact to them of these schemes.

Evidence shows that:

- Cycle parking delivers 5x the retail spend per square metre than the same area of car parking[37]
- High street walking, cycling and public realm improvements can increase retail sales by up to 30%[38]
- People walking, cycling and using public transport spend the most in their local shops, spending 40% more each month than car drivers[39]

- People who cycle take more trips to the High Street over the course of a month (12 on average), than those who drive (8 on average)[40]
- Shop keepers overestimate the number of customers who reach them by car by up to 3x the actual number (63% estimated, 20% actual)[41]
- More retail space was filled by businesses in London following improvements to make cycling and walking easier, with a 17% decline in empty shops[42]

In the recovery from the Covid-19 pandemic, it will be crucial to ensure that people are able to access local business and high streets without using a car while public transport capacity is still limited.

Town and city centres have not yet seen a return to pre-pandemic spending levels, and making it easy for people who do not have access to a car to reach shops by walking and cycling will free up space on public transport for those who need it most. A switch from public transport to car use is also likely to increase carbon emissions, air pollution and congestion.

The Government initially provided £250m emergency funding for local authorities to make it easier for people to walk and cycle locally, but local authorities urgently need further support to ensure that schemes are successfully put in place and high streets are supported.

3.B - What are likely to be the long-term effects of the pandemic on use of public and private transport and, in particular, changed working/commuting behaviour?

As the recovery from the pandemic begins, it is crucial that we continue to support and promote public transport, walking and cycling to avoid locking in a car led recovery. While driving has bounced back to pre-pandemic levels, public transport use is still comparatively very low and we need to restore confidence that it is safe to use.

There has also been a shift to living locally, and we must support this too.

Transport trends

When the first lockdown was introduced in March 2020, car use and public transport use plummeted, while walking and cycling journeys increased hugely. However, since reopening began in 2021, car use has risen to pre-pandemic levels while public transport use remains comparatively very low compared to pre-pandemic levels and cycling has returned to pre-pandemic levels[43]

In terms of active travel, while there was a boom in walking and cycling, this coincided with a spell of record breaking sunny weather, very little traffic on the road and restrictions on other forms of movement and exercise. Cycling levels dropped back once traffic returned.

There is a real risk that this increase in car travel will be locked in to the recovery, with huge implications for greenhouse gas emissions, air quality, road dander, and the viability of public transport. Confidence in public transport use is growing[44] but we need to do more to encourage its use.

To avoid locking in a car led recovery, we must:

- Improve public transport operating models, increase investment and make public transport affordable or free
- Invest in multi-year, high level funding for walking and over the next 5 years
- Introduce road pricing and increase fuel duty, fairly
- Cater for local living

Improve public transport operating models, increase investment and make public transport affordable or free

Public transport is the backbone of our transport networks. Without it, our cities, towns and roads would be even more car dominated, congested, unsafe and polluted. If we are to reduce greenhouse gas emissions from transport, walking and cycling must better integrate with journeys by bus and rail to offer alternatives for longer journeys.
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Public transport use declined significantly during the lockdowns. Bus use outside of London fell by up to 90%, and national rail patronage by 96%.[45]. Full capacity is starting to be restored but patronage levels remain at approximately 58% of expected levels across the rail and bus networks[46].

Increasing the numbers of buses on our roads will help increase capacity and these services provide a vital mode for the 19% of people living in the UK who do not have access to a car[47] and have no other transport options, many of whom are key workers.

Public transport should:

- Receive proper investment to ensure services and capacity are increased wherever possible
- Be made free for people on low incomes or not in work
- Better integrate across different operators with smart ticketing
- Better integrate with other modes
- Meet service standards to increase the frequency, safety and comfort of local services, especially in more rural locations and poorly served areas
- Invest in vehicle fleets to meet air quality and climate change goals

Invest in multi-year funding for walking and over the next 5 years.

Funding for walking and cycling is far below required levels if we are to make walking and cycling a normal choice for people and reduce car use.

The £2bn of earmarked active travel investment in England is welcomed but the second Cycling and Walking Investment Strategy must stimulate higher long-term levels of funding. Over the next four years, between £6bn and £8bn is required to make walking and cycling the normal choice for people for short journeys or as part of longer journeys integrated with public transport.

This investment also needs to better address all people's needs and prioritise where need is greatest. Currently too much investment focuses on improving infrastructure for commuter trips into and out of the city centre. This ignores the travel needs of many people.

Walking and cycling investment should focus more on connecting areas with reduced public transport options, areas of higher deprivation and unemployment, or tackling journeys most likely to contribute to climate change.

Investment needs to prioritise the infrastructure we need to make walking and cycling attractive, welcoming and comfortable – protected space for cycling, better pavements and increased crossing priority, low-traffic neighbourhoods across all our cities and towns.

However we also need to increase revenue funding. This should prioritise subsidised access to, and maintenance of cycles, for all people, including adapted and e-bikes and access to programmes within communities to increase cycling skills and confidence.

Increase fuel duty, fairly

The cost of buying, owning and using a car fell by 16% between 1997 and 2016. In contrast, the cost of bus and coach fares increased by 33% and rail fares by 23%.[48]

And whilst the upfront costs of car ownership are high, once you own a car and have insurance driving is far cheaper than paying for other modes of transport. This pricing structure incentivises anyone who owns a car to drive more. Many people simply do not want to have to pay more for public transport.

Fuel duty has been frozen in the UK since 2010. Studies suggest this freeze has increased UK CO_2 emissions by up to 5%.[49] At the same time Fuel Duty is used in England to pay for the Roads Investment Strategy. This increases road capacity, inducing further demand and encouraging more car journeys.

Increasing fuel duty is vital to reduce car use and associated greenhouse gas emissions. Fuel duty should be prioritised on roads maintenance and electrifying motor vehicles. It should however not fund increasing road capacity.

Steps should be taken to ensure policies to increase the cost of driving are fair, introduced in line with increased public transport, and do not penalise people who are on lower incomes and are car dependent and have no other option but to drive.

Cater for local living

The global Covid-19 pandemic has generated new habits to live more locally as a result of government advice during lockdown, and a reduction in public transport capacity. For example a recent survey suggested 59% of consumers in Britain have used more local stores and services to help support them during lockdown.[50]

Steps should be taken to capitalise on this trend in the future through investment. Having a larger number of local high street centres makes accessing local everyday services easier for more people. It also enables more local journeys, enabling people to leave the car at home and encouraging walking or cycling.

We need to:

- Adopt a 20-minute planning principle for all new developments
- Ensure everyone has the choice to live in a 20 minute neighbourhood
- Invest in and incentivise 20-minute neighbourhood planning for new developments and urban regeneration
- Invest in local high streets to create welcoming and safe shopping environments with more space for people

3.4 - Is there evidence of changing attitudes toward, and expectations for:

The role of the car (in particular the role of SUVs)

Desire for reduced traffic

Through Sustrans' Big Pedal research we revealed that less than one quarter of students wanted to travel by car to the school gates. Two-thirds wanted to get to school by walking, cycling, scooting or public transport[51]. Additionally, 57% of children surveyed said there were too many cars in the area around their school gates.

The Department for Transport's report into Public Opinion Survey on Traffic and Road Use support this data more widely, data showed that 78% of respondents supported the reduction of road traffic in their local area / neighbourhood[52].

Growth in SUVs

In contrast, SUV trends are troubling. Growing demand for SUVs was the second largest contributor to the increase in global CO2 emissions from 2010 to 2018[53] and in the UK, three-quarters of the 360,000 SUVs sold in 2019-20 in the UK were bought by people living in towns and cities[54], where arguably these vehicles are least needed.

Research indicates that there are four messages, primarily being pushed by vehicle manufacturers, which particularly mislead individuals into buying an SUV: get back to nature, dominate the road, help the environment, and protect your family[55]. Tackling the distribution of these messages is important, as is demonstrating how they can be achieved by reducing the numbers of cars on our roads.

Public transport and continuing need for social distancing

Demand is returning

Use of public transport in 2020 was significantly impacted by COVID-19, guidance to minimise journeys and to implement social distancing. However, statistics from DfT illustrate that public transport use is recovering. At the time of writing, national rail use was 46% of what would be expected and bus use was 61% of what would be expected[56].

Investment is wanted and needed

73% of residents of Bike Life cities indicated that they would like to see more government spending on public transport[57].

Public transport is such a critical mode of transport for so many and use is much higher by specific demographic groups. For example young adults, people over the age of 65 and people from minority ethnic groups. Public transport use is also much higher in many urban areas, especially our larger cities and towns.

Since 2010 the proportion of rail journeys involving a bicycle has increased by 75%, and this figure could be increased if good facilities are provided, indeed 67% of Bike Life city residents said better links with public transport would help them to cycle more[58] [59]. Making it easier for people to access public transport by foot or by cycle is essential to enabling people to reduce their reliance on the private car, as well as alleviating congestion in our urban centres and around principal public transport stations.

Novel forms of transport – mobility as a service, sharing, Uber etc

In the excitement of the possibilities of new technologies, we must not rule out the aspiration for future mobility to rely more heavily on well-established technologies. Cycling and walking should be at the heart of future urban mobility strategy.

The urban infrastructure required to enable cleaner transport, automation, data and connectivity, new modes, and elements of shared mobility and new business models require significant new infrastructure to even give them the possibility of proving effective. And the benefits of this investment are uncertain.

Innovative technologies do not have a good track record in supporting inclusive society. For example, a mapping of the MAAS (Mobility as a Service) provision in Los Angeles clearly shows that areas where users are less wealthy, they are not served by transportation services. Additionally, autonomous and electric vehicles are still vehicles, and they still impact on the 'pleasantness' of urban space. Solutions that have a better impact on urban space, liveability, noise, congestion, public health, etc., should be prioritised.

Walking and cycling – and health – risks, safety etc.

In 2020, overall cycling levels in the UK increased by 50% compared to 2019, while every other transport mode saw a significant decrease in miles travelled[60].

However, 2020 should be considered an atypical year; as outlined in question 3B, the boom in walking and cycling coincided with a spell of record breaking sunny weather, very little traffic on the road and strict restrictions on other forms of movement and exercise.

Cycling levels dropped back to pre-pandemic levels once traffic returned, weather worsened and other activities opened up again. However, it does demonstrate the impact of reduced traffic on making it more attractive to cycle. This is echoed in Sustrans' bike Life research which shows that 80% of residents think reducing the levels of traffic on our roads is important for improving cycle safety[61].

Bike Life data also revealed that 28% of people don't cycle but would like to start. For many the conditions created by lockdown provided the opportunity to do just that. With significant, well planned and sustained investment in active travel and commitments to reducing vehicle traffic those conditions could be recreated.

So while 2020 was atypical, properly planning, resourcing and funding active travel could see walking and cycling return to levels seen during the pandemic.

3.7 - Is there evidence of benefit to health and wellbeing from access for citizens to green space facilities, parks, allotments, etc?

There is a significant amount of evidence detailing the benefit to health and wellbeing from access for citizens to green spaces. These spaces have been clearly linked to relaxation and stress relief, and promote social cohesion all of which promotes good health[62]. They also promote physical activity; which itself is associated with lower death rates, lower risk of heart problems and depression.

It benefits people of all ages, ranging from helping children maintain a healthy weight to reducing conditions such as hip fractures in frail older people[63]. Plus green spaces reduce exposure to air pollutants, noise and excessive heat, all of which otherwise have negative impacts on health[64].

The Natural Capital Committee estimates that investing in green infrastructure would reduce costs to the National Health Service by £2.1bn[65].

The impact of access to green space has been particularly highlighted through the pandemic. Official Statistics from Natural England revealed that 45% of adults said 'visiting green and natural spaces has been even more important to their wellbeing since coronavirus restrictions began'[66].

However, access to green space is not equal. Ramblers report that only 57% of adults questioned said that they lived within five minutes' walk of green space, be it a local park, nearby field or canal path.

That figure fell to just 39% for people from a black, Asian or minority ethnic (BAME) background and 46% for those with a household income of under £15,000 (compared to 63% of those with a household income over £35,000 and 70% over £70,000)[67]. Similarly, IPPR state that the 10% most deprived wards in England have five times fewer parks or general public green spaces than the most affluent 20%.[68]

Then, even where green spaces are geographically available lots of people face barriers to using them. Steps, restrictive barriers, narrow paths and poor surfaces can be impossible for people using wheelchairs, pushchairs or other mobility aids.

Fear of ambush and assault is another very real barrier; fenced-in narrow paths, lack of exit points and places to lurk make urban green spaces no-go places for many. Heavy urban traffic and a lack of safe routes make it difficult for many people to walk, cycle and take public transport. At the same time, there is a lack of good quality routes for walking and cycling within green spaces themselves.

As a consequence, the benefits of the green spaces are not felt evenly, with lack of access compounding existing health inequalities.

3.5 - What evidence exists to help us to assess the impact of electric vehicles and the outcomes from less air pollution?

Air pollution is the term given for a number of different substances in the air that are harmful to human, animal and plant life as well as the built environment including Nitrogen Dioxide (NO_2) and Particulate Matter (PM2.5).

Between 28,000 and 36,000 early deaths are attributable to air pollution each year in the UK[69], and road transport is responsible for 80% of roadside NO_2 pollution where legal limits are being broken[70].

Evidence shows that while electric vehicles will help to reduce carbon emissions and improve air quality to an extent, this must be done alongside a managed programme of traffic demand reduction.

Given that 45% of particulate matter emissions from vehicles are come from tyre and brake wear (15% comes from exhaust emissions)[71], replacing petrol, diesel and hybrid vehicles with electric vehicles will not effectively curtail the emissions of particulate matter, and local air quality is not likely to significantly improve.

Accordingly, focusing on reducing vehicle miles and demand is needed in order to better tackle the air quality challenges currently facing towns and cities.

4 A - Is the Commission right to see health as the prism through which to consider the full spectrum of a city's social and public policies? (Health and equality).

Health is a useful prism through which to consider a city's social and public policies. Good health is not evenly distributed across the population and certain groups face more barriers to enjoying good health. Accordingly, health acts as a strong indicator for inequity within a city and existence or lack of policies to address this inequity.

For example, data shows that if everyone in England had good access to quality green space the NHS could save over £2 billion in treatment costs[72]. However, while 59% of households with incomes of £60,000 or more - roughly the top 10% by income - are within a 10-minute walk of a publicly accessible natural green space, just 35% of those with incomes below £10,000 have the same access[73].

Linked to this, data shows that disadvantaged groups, for example lower socio-economic groups, older people, people with disabilities and people from black and Asian communities, are more likely to be inactive[74]. A lack of access to green space or safe, local walking and cycling routes can contribute to these lower levels, and therefore decreased health. Altering policies to better enable physical activity within these groups would then be reflected in health outcomes.

Similarly, analysis has shown that areas with higher numbers of poorer households are exposed to higher levels of traffic-related pollution[75]. Long-term exposure to air pollution can cause heart and lung conditions such as heart disease and COPD (chronic obstructive pulmonary disease) as well as lung cancer, leading to reduced life expectancy[76]. Identifying where interventions, such as Clean Air Zones, are placed to ensure pollution levels are reduced furthest and fastest will have a positive outcome for health.

4.B - How can our highly centralised and illness-orientated health service be transformed to achieve more responsive, more preventative, more holistic and more personalised outcomes?

One way that we can help the health service is by working to improve prevention of ill health by building exercise into people's everyday lives and making it easier to walk, cycle and use public transport. Government departments, including DoHSC, DfT, DEFRA, MHCLG will need to work together to achieve this by putting public health at the heart of decisions on policy and investment.

Physical inactivity costs the UK £7.4 billion per year, and costs the NHS £1 billion per year[77]. Equally, evidence shows that people who are obese or carry excess weight are associated with an increased risk of the following for Covid-19: a positive test, hospitalisation, advanced levels of treatment (including mechanical ventilation or admission to intensive or critical care) and death[78].

Making it easier for people to build exercise into their daily lives can help to reduce these costs. If cycling trips were doubled every eight years across just seven major cities in the UK, 34,000 long-term health conditions would be averted, saving the NHS £319 million[79].

To achieve this, each policy and investment decision across Government should make a positive benefit towards public health. Presently, some Government transport investment policy is not compatible with its own public health goals; for example, the commitment to investment in road building does not support air quality, physical activity and net-zero objectives.

Government departments must work more closely together to ensure that planning, transport, public health and energy policy are truly integrated to better support public health.

4.1 - What evidence supports the case for investment in public health and prevention?

Active travel has great potential to incorporate physical activity into our day to day lives. Evidence shows how this could lead to significant improvements in health whilst also reducing economic costs for businesses and society.

For example, a five-year study of 250,000 UK commuters, conducted by the University of Glasgow revealed that cycling to work prevents major diseases, cutting the risk of death from any cause by 41%, the incidence of cancer by 45% and heart disease by 46%[80].

More widely, daily physical activity:

- Lowers risk of cardio-vascular disease by 20-35%
- Lowers risk of type 2 diabetes by 30 – 40%
- Reduced the risk of hip fracture by 36 – 68%
- Lowers the risk of colon cancer by 30% and breast cancer by 20%
- Lowers risk for depression and dementia for adults by 20 – 30%[81].

Additionally, evidence suggests that switching to active travel for short motor vehicle trips could save £17bn in NHS costs over a 20 year period[82]. The largest cost savings would be reductions type 2 diabetes with an annual cost to NHS of £9bn[83].

4.2 - Does the evidence suggest the most cost-effective improvements in health and wellbeing will come from encouragement of healthier lifestyles and diets, combatting obesity, inactivity and tobacco/alcohol/substance abuse? How big a part can education play – from early years throughout the life course – to make a significant difference?

Focusing on the role that active travel can play in creating improvements in health and wellbeing. Encouragement and behaviour change initiatives are a critical part of the puzzle, but should sit alongside well-designed infrastructure.

For example, the 2018/19 Sustrans school programme worked with 1,100 schools to deliver 11,000 active travel activities to a minimum of 180,000 pupils across the whole of the UK. The programme saw a 6% point increase in active travel modes. As a result of the activities, 12,000 more pupils travelled actively, leading to 700,000 hours of physical activity. 82% of teachers agreed that Sustrans' project has been successful in getting the wider school community physically active.

However, 77% of residents in our Bike Life surveys[84] want more physically protected cycle tracks away from traffic. This finding supports many surveys which tell us that people's primary fear preventing them from cycling and walking is safety, so taking people away from sharing space with traffic will increase the numbers of those walking and cycling.

Neither aspect alone is enough and should be provided together to increase participation in active travel modes.

4.4 - Is there evidence of the success of the social prescribing route to achieving health and wellbeing?

Evidence gathered by PHE suggests that one in four people say they would be more active if advised by a healthcare professional[85].

However, a review by the University of York on the effectiveness of social prescribing highlighted a lack of robust studies into the topic.

The small scale evidence they were able to draw from suggested that there were no significant differences in physical activity, physical fitness, or clinical outcomes between exercise referral schemes compared with usual care, alternative exercise interventions, or exercise referral schemes plus behaviour change interventions[86].

A similar, more recent review, published in the British Medical Journal supports this view stating "current evidence fails to provide sufficient detail to judge either success or value for money"[87].

4.5 - How can citizens and local employers be involved in co-production and co-ownership of local solutions to improve health and wellbeing? Should the CCHC use surveys and opinion polls to establish how users of services can best engage in creating healthier cities?

Citizens and local employers should be proactively involved in the co-production of local solutions to improve health and wellbeing. One way is through the co-design and co-creation of active travel projects.

This could include infrastructural changes, such as Low Traffic Neighbourhoods, or behaviour change interventions, such as bike libraries or led-rides. This process could take the form of collaborative workshops, and surveys in varied and accessible formats, styles and locations, as well as collaborative interventions such as temporary street trials, and street events, such as school streets or play streets.

At Sustrans, we have developed a community-led street design approach[88], which has worked well to engage the wider public in creating a healthy city, particularly on community-led Street Design projects. Examples include Marks Gate, a community-led design project in east London[89], Levenshulme Bee Network – an Active Neighbourhood in Manchester[90], and our work with older people in Birmingham on the Age Friendly Tyburn project[91]

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