

Canterbury

District Health Board

Te Poari Hauora o Waitaha

**Submission from
Canterbury District Health Board**

July 2012

**Environment Canterbury's
Draft Regional Public Transport Plan 2012**

Yes No **We wish to be heard on this submission**

Person Making Submission

Dr Daniel Williams
Clinical Director, Community and Public Health
Canterbury District Health Board

Signed: 

Date: 6th August, 2012.

Postal Address

Community and Public Health
Healthy Physical Environments
PO Box 1475
Christchurch 8140

Phone 03 364 1777

Fax 03 379 6125

Contact Person for this application

Jane Murray

DDI 03 378 6858

Email: jane.murray@cdhb.govt.nz

Thank you for the opportunity to submit on the Canterbury Regional Public Transport Plan. The links between transport policy and implementation and population health outcomes are well established. Public Transport in particular has direct links to public health by:

- 1) Reducing the need for individuals to own personal vehicles thus
 - Reducing vehicle emissions that increase air pollution,
 - Reducing emissions that contribute to greenhouse gases and climate change,
 - Increasing the proportion of available household income that can be spent on health promoting options such as more nutritious food,
- 2) Enabling 'transport disadvantaged' individuals such as the elderly, the disabled and teenagers to access schools, workplaces and shopping sites and other key activity centres
- 3) Enabling individuals using public transport to more easily reach their daily exercise targets by incorporating walks to and from the transit stops.

CDHB strongly affirms the need for an affordable, accessible high quality public transport network in the Canterbury region. The impressive record of Environment Canterbury in working towards such a system over the past two decades is noted. The current especially challenging circumstances are also noted and that if anything these serve to confirm the need for a high quality PT system.

CDHB has provided with this submission a copy of the findings from a survey of our CPH Christchurch office staff as to their level of bus use and barriers/enablers to bus use now and once the proposed network changes are in place. Two reports from a whānau ora health impact assessment on the proposed Christchurch central city bus interchange are also attached.

Within this submission CDHB has provided links to three documents which it is recommended that ECan transport planners familiarise themselves with:

- A 2010 literature review titled 'Wider health and wellbeing impacts of transport planning'¹
- A new guide titled 'Transit-oriented developments...through a health lens'².
- A recent NZTA research report 'Demand for transport services: impact on networks of older persons travel as the population of New Zealand ages'³

Thank you again for the opportunity to comment on such an important piece of regional policy which will have significant impacts on the health and wellbeing of the Canterbury population. Canterbury District Health Board is committed to working in a 'Health in all Policies'⁴ way and we have staff available to assist with such work, including health impact assessments on policy and project work. Please do not hesitate to contact Dr Anna Stevenson or Jane Murray if we can help in any way.

¹ <http://ecan.govt.nz/publications/General/HIA%20Literature%20Review%20June%202010.pdf>

²

<http://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/resources/plans/strategic+plans/transit-oriented+developments+through+a+health+lens>

³ <http://www.nzta.govt.nz/resources/research/reports/481/index.html>

⁴ <http://www.cph.co.nz/About%20DUs/Health%20Din%20Dall%20DPolicies/>

**Draft Regional Public Transport Plan 2012 Reviewer: Community and Public Health, Canterbury District Health Board.
Date: 31 July 2012**

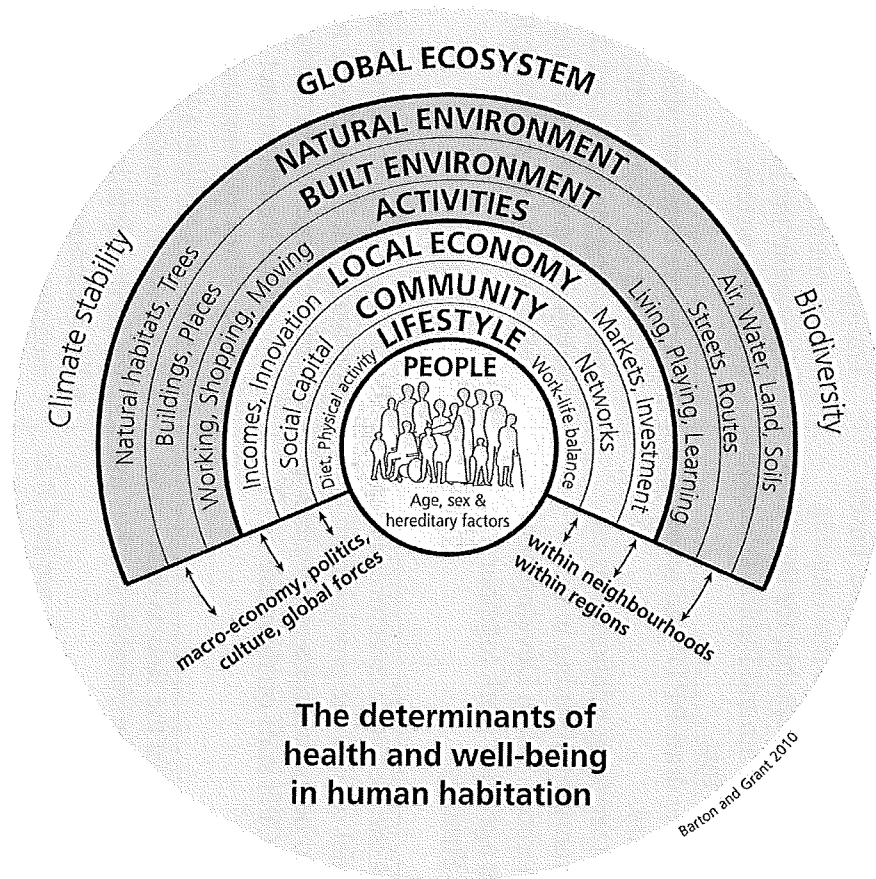
Submission point	Discussion:	CDHB's recommendations/ proposed amendments to the Plan:
Chapter Three	<p>CDHB is aware of the Strategic context of the plan. While the current farebox recovery ratio at 35% is less than the 50% desired by current central government policy, there is no clear rationale for why PT users should be charged at this level. It would be useful for comparison purposes to have some analysis of the equivalent cost recovery ratios of road users in general, and specifically the cost recovery strategies for new motorway users.</p>	<ul style="list-style-type: none"> • We recommend that EC can continue to advocate for a lower recovery ratio. • More transparency is needed around the real costs of transport for private car users. • Based on the above costs, a new pricing structure for PT users might need to be considered.
Page 13 of the draft	<p>Given the enormous amount of new suburban and rural township housing that is being planned post earthquakes the suggestion that 'PT services should be planned to support the evolving pattern of urban development, with an emphasis on providing good alternatives in areas of urban consolidation, and the provision of services to new areas of development' is very timely.</p> <p>The needs of the transport disadvantaged are of special interest to public health practitioners as we have a mandate to monitor and address preventable health and wellbeing disparities within our society. The new central city plan is intended to be fully accessible to the 'disabled' in our community which includes the elderly, parents with small children, and those with physical impairments. A special focus on enabling transport disadvantaged to get where they need to be in a timely fashion will increase the acceptability of PT to all and is strongly supported by CDHB.</p> <p>CDHB is acutely aware of the already high proportion of elderly in Canterbury and projections that our community will become increasingly 'top heavy' in terms of age structure. This has implications for the demographic makeup of the 'travel disadvantaged'. A recent NZTA research report 'Demand for transport services: impact on networks of older persons travel as the population of New Zealand ages'⁶ describes many of the issues and what will be required to enable our elderly to travel safely and with confidence around our city and community using PT. Addressing the needs of elderly passengers has considerable overlap with the needs of other transport disadvantaged groups.</p>	<p>We recommend that you refer to the guide 'Transit-oriented developments...through a health lens'⁵ when considering PT services and network changes.</p> <p>CPH recommends that a universal design approach is taken to designing PT infrastructure and the services that surround it. Such measures will make PT use more attractive for all users and are likely to have positive spin offs for patronage.</p>

⁵ <http://www.sahealth.sa.gov.au/vps/wcm/connect/public/content/sa+health+internet/resources/plans/strategic+plans/transit-oriented+developments+through+a+health+lens>

⁶ <http://www.nzta.govt.nz/resources/research/reports/481/index.html>

Submission point	Discussion:	CDHB's recommendations/ proposed amendments to the Plan:
Chapter four	<p>The vision for the RPTP is recognised however a clearer definition of a healthy sustainable Canterbury region is recommended.</p> <p>The five RLTS objectives are strongly supported by CDHB as are the described outcomes. However CDHB does not believe the outcomes ensuring a fully resilient transport system will be met with the current level of funding. As an example, buses have been off the roads after the last three snow falls. We recommend that ongoing public discussions take place about what level of resilience is acceptable for the Public Transport System, what expectations there are from the public around Public Transport reliability, and what level of funding is necessary to achieve that .</p>	<ul style="list-style-type: none"> • We recommend the wording of the vision is changed to “Our public transport in Canterbury is both health promoting and environmentally sustainable. Public Transport is ...” • We recommend that public discussions take place about the level of acceptable resilience in the PT system.
Chapter five	<p>CDHB notes the challenges described in Chapter five of the draft RPTP and recognises that many are outside of Environment Canterbury’s control.</p> <p>It is particularly important in this situation that excellent working relationships are continued between all of the agencies responsible for transport planning in the Canterbury region including the TAs, the Greater Canterbury Urban Development Strategy team and government agencies, and that these agencies work together to achieve the outcomes of the Regional Land Transport Strategy.</p>	<ul style="list-style-type: none"> • To ensure transport planning processes are working and transparent, we recommend that monitoring strategies are documented, publicised and aligned with the proposed outcomes and identified in the plan.
Chapter six	<p>The rationale outlined in Chapter six for the changes in the Network structure is clear. The comment that ‘a key to the success of the new model will be the provision of suitable interchange facilities to enable those transfers to be as seamless as possible’ is strongly supported by the results of the recent survey of CPH staff on their use of PT</p>	<p>We strongly support the provision of suitable interchange facilities. Please refer to the central city interchange recommendations in the Whānau Ora Health Impact Assessment attached. Many recommendations remain very applicable for smaller suburban interchanges.</p>
Chapter seven	<p>CPH is one of the first medium sized businesses to set up within the four avenues, and as such CPH surveyed its staff on their level of bus use and barriers/enablers to bus use now and once the proposed network changes are in place.</p> <p>To promote the use of public transport for commuters across Christchurch, we feel it is important the ECan work closely with medium and large size businesses to ascertain their public transport and active transport needs so then ECan can be more responsive to the future demand of PT users.</p>	<ul style="list-style-type: none"> • Refer to our submission on the network plan for further details. • We recommend that ECan advocates that any medium size business applying for a resource consent for a new building needs to submit a Travel Demand Management Plan and that ECan be responsive to those plans in their network planning.

Community and Public health is the division of the Canterbury District health Board which is concerned with the addressing ‘determinants of health and wellbeing’ – those factors which are on the causal pathway to health or disease.



The determinants of health are visually displayed in the diagram above which was created by Barton and Grant⁷ for planners, to provide a focus for collaboration between practitioners of a variety of disciplines: planners, urban designers, public health professionals and ecologists across a number of topics e.g. transport.

A 2010 literature review titled ‘Wider health and wellbeing impacts of transport planning’⁸ provides a short summary of the relationship between transport and thirteen determinants of health: safety, equity, cultural diversity, active lifestyles, healthy environments, accessibility issues for transport disadvantaged groups, food security, housing, social and community capital, economic development, resilient communities, sustainability concerns and neighbourhood amenities such as green spaces and cultural institutions.

⁷ http://eprints.uwe.ac.uk/7863/2/The_health_map_2006_JRSH_article

⁸ <http://ecan.govt.nz/publications/General/HIA%20Literature%20Review%20June%202010.pdf>