

#### Chartered Institution of Highways & Transportation response to the Cabinet Office and Department for Health and Social Care's consultation Advancing our Health: prevention in the 2020s (October 2019)

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CIHT is a charity, learned society and membership body with over 14,000 members spread across 12 UK regions and four international groups. We represent and qualify professionals who plan, design, build, manage and operate transport and infrastructure networks. Our vision is for world-class transportation infrastructure and services. Our values are to be Professional, Inclusive, Collaborative and Progressive.

## **Q** - What could the government do to help people live more healthily: in homes and neighbourhoods; when going somewhere; in workplaces; in communities?

When going somewhere: CIHT recommend that sustainable approaches to transport are considered a key enabler of advancing our health. Such approaches are largely non-existent and we are currently not creating healthy spaces. Poorly located and designed new developments which seriously hinders healthy lifestyles are the norm. CIHT believes in radically improving the outputs and outcomes of planning and transport. This starts with a clear vision to create better places for people to live in and is achieved by adopting new approaches at both strategic level and when planning individual developments.

CIHT led report Better Planning, Better Transport, Better Places addresses this issue. By enabling compact, higher density, and mixed-use patterns of development, you encourage more people to incorporate physical activity into their daily journeys, improving productivity and dramatically reducing ill health. The government, professionals, and communities recognise the need for change. The revised National Planning Policy Framework of February 2019 (NPPF) has moved national policy in the right direction, but practice must also change significantly if we want future developments to provide healthy, successful spaces for people to live in.

Within planning departments, transport specialists are rarely employed to support the development management function, and these teams generally have significantly less knowledge of and expertise in sustainable and healthy transport than traffic and highway issues. Further, a shift towards specialisation means that transport engineering has come to focus on issues such as capacity, safety, and time saving. Wider public objectives like emissions, health and well-being, and inclusivity are not considered key issues.

**In communities:** CIHT are working to the principle that street design needs to meet the requirements of all users so that inclusive environments are created, and in 2018 CIHT report Creating Better Streets: Inclusive and Accessible Places reviewed current practice and policy efforts to deliver on this principle:

Government, at all levels, should be clear that the consideration of the built environment has to include highways and transport networks and the services they deliver, as they are often viewed separately from buildings. There has to be better coordination across government in this regard or efforts to create places and services that are accessible to all will be diluted.

There should be a clear national strategy for collaboration between different policy areas in making inclusive and accessible environments. Guidance required to support this aim should be refreshed or developed and used in the development and training of the people delivering services across the built environment. There must be a better understanding of diversity and inclusion, both in terms of the needs of all when using the built environment and by those that are delivering services to the built environment. Currently, it is not compulsory to have training in designing for people with disabilities for transport and engineering professionals,

and those skills are vital to ensure that we are building good practice in to our infrastructure and transport networks.

## Q - What government policies (outside of health and social care) do you think have the biggest impact on people's mental and physical health?

- CIHT urges government to assist in the integration of transport and planning which is needed to ensure sustainable developments. Improving accessibility through active and less polluting travel modes, walking, cycling and public transport, sits at the core of sustainable developments and is directly related to our health. To enable this, government should make requirements for sustainable transport and accessibility to have equal weighting as the requirements to demonstrate a deliverable five-year supply of housing and protecting the Green Belt. Any further guidance from the government needs to better support local authorities, communities, and developers to deliver sustainable transport solutions and should include advice on more effective place based or vision-led methodologies. Current guidance does not give local authorities sufficient confidence to move away from car-led development to secure more sustainable options, including locational factors.
- National governments could expand transport project appraisal tools to include mental health and wellbeing impacts. Currently transport appraisal guidance for England (WebTAG) considers some health aspects such as road traffic injuries and the impact on some aspects of physical activity. These tools should be expanded to take on mental health and wellbeing impacts, drawing on experience from other disciplines and practice. The aim is to develop acceptable combined measures of health and wellbeing impacts as a result of transport investment. For example, Transport for London has developed the Integrated Transport & Health Impact Model (ITHIM) to test transport measures in terms of overall health impacts. CIHT carried out a review of the relationship between transport and health in 2016 and not surprisingly it found that the local planning system does not take sufficient account of health and wellbeing in decision-making. Mandatory health impact assessments (HIAs) for planning and transport would inject some of the robustness of an epidemiological approach used by public health professionals into the appraisal of transport plans and projects.
- Traditional forecasting techniques in transport have used trends to predict the future and this has informed decision-making and investment. However, the future of transport is linked to the decisions we take today and so the approach of predicting and providing can be a self-reinforcing cycle. If we consider car-based transport, increased road capacity has traditionally led to increased car traffic. There is a need to break this cycle in order to enable more active and healthy travel. This will require a change to the prevalent models and mindsets used to justify decision-making and we need to recognise that our choices will influence how people travel in the future, and that the future is uncertain and trends will change. CIHT FUTURES, a research project, found that many transport professionals feel discouraged to challenge the traditional regime and the need for justifying their decisions to their immediate superiors inhibits change. This holds true for early career professionals accountable to their seniors who are directly accountable to locally elected councillors. For change to happen, we need leadership all the way from central government who need to challenge traditional models and in consultation with the public develop a national vision for our transport network, that is not based on predictions of traffic growth.

## Q - What more can we do to help local authorities and NHS bodies work well together?

CIHT recommend that local partnerships – including Health and Wellbeing Boards, Local Enterprise Partnerships and Clinical Commissioning Groups – take a strategic approach to transport, health and wellbeing by quantifying the existing impacts and preparing plans to solve them at scale and in a timely manner.

For example, local partnerships, in collaboration with transport officers, should conduct a joint review of how the local transport plan could help to improve the health of the local population. Funding across these partnerships should be aligned to achieve the desired health and wellbeing outcomes.

Local authorities could assess the health and wellbeing impacts of local plans, for example ensuring that these benefits are identified in proposed transport policies. Conducting Health Impact Assessments (HIA) as part of the preparation of local plans would help to ensure that health is better considered at all stages of the planning process. The involvement of public health professionals as early as possible is crucial.

The public and private sectors could include a HEAT (Health Economic Assessment Tool) or similar assessment in the business case for significant projects that will have an impact on walking or cycling. Whilst we encourage the use of Heat, there is an opportunity for a "HEAT light" methodology to be developed by DHSC, NHS England and DfT to encourage proper assessment for smaller schemes that would unlock walking and cycling opportunities.

# **Q** - What other areas (in addition to those set out in this green paper) would you like future government policy on prevention to cover?

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CIHT would recommend that the Department of Health and Social Care should consider preparing a set of twin guides similar to those it published for urban planners and public health practitioners. These explain language, terminology, processes and procedures for both sectors in ways that each discipline can understand as a precursor to working together more closely.