

# Doctors for Active, Safe Transport



## Submission in Support of Consent Application for Te Ara Tupua

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We would welcome the opportunity to present in person on this submission.

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### Overview

This submission strongly endorses the construction of a “seaward side” cycle path from Petone to Ngauranga.

DAST recommends that the Commissioners:

- Note the significant health benefits from increased active transport, including cycling.
- Note that these benefits will only be fully realised if there is a significant modal shift from private motor vehicles to active transport modes.
- Note that this shift is contingent on development of safe cycling infrastructure, which has recently received only a trivial proportion of transport investment in the region.
- Consent the proposed Te Ara Tupua Shared Path.
- Encourage the relevant authorities (GWRC, WCC, HCC and NZTA) to engage more actively together to maximise uptake of this critical infrastructure project.

## **Who is DAST**

We are a network of over 130 Wellington Hospital doctors advocating for the benefits of active transport.

In our roles as specialist doctors, we are often the ambulance at the bottom of the cliff. We daily see the debilitating and painful – often fatal - health consequences of a national that get's far too little exercise.

We aim to promote the health benefits of active transport for all Wellingtonians and want to help people make healthy choices.

## **The place of Active Transport in our Regional Planning**

As commissioners, you can build a fence at the top of the cliff – by leading a paradigm shift from a transport infrastructure focused on private motor vehicles to one which facilitates and promotes active transport.

The recent past has seen a vast investment in infrastructure focused on private motor vehicles, with greater than \$1.5 billion committed to motorway and roading projects in recent years.

Despite good intentions, provision for active transport is glacial in terms of progress and consumes a tiny fraction of the budget.

The Hutt Valley to Wellington Cycle Corridor – a pivotal link in the regions cycle infrastructure - was in 2<sup>nd</sup> place in the regional land transport plan in 2012. If these decisions had not languished, it would have been built by now and many lives would have been saved from premature mortality.

For the sake of the health of the people of our region, and that we care for, this must change.

## **Health Benefits of Active Transport**

In high and middle income countries physical inactivity has become the fourth leading risk factor for premature mortality.<sup>1</sup> Declining rates of functional active travel have contributed to this population-level decrease in physical activity, and evidence suggests that rising levels of obesity are more pronounced in settings with greater declines in active travel.<sup>2,3</sup>

Evidence for the considerable health benefits of cycling continues to grow.

A recent 5-year prospective study of over 250,000 people (median age 52)<sup>4</sup>, published in the British Medical Journal, found cycling reduced:

- The risk of all-cause mortality by 41%
- The risk of any cancer by 45%

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<sup>1</sup> UK Department of Health. Start active, stay active: a report on physical activity from the four home countries' chief medical officers. DoH, 2011.

<sup>2</sup> Pucher J, Buehler R, Bassett D, Dannenberg A. Walking and cycling to health: a comparative analysis of city, state, and international data. *Am J Public Health* 2010;100:986-1992

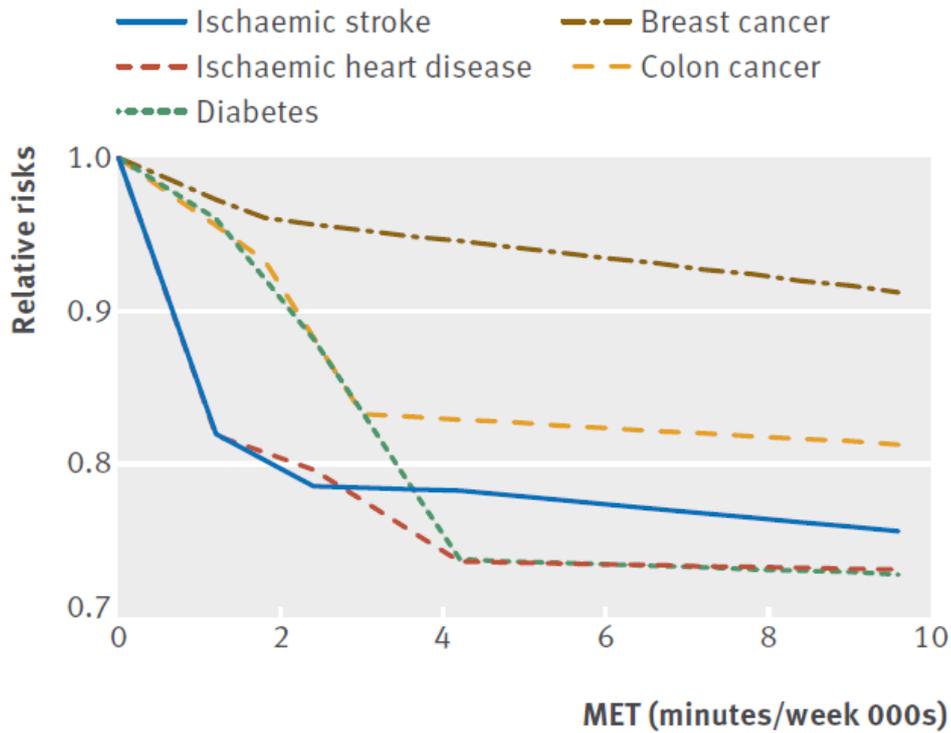
<sup>3</sup> Bassett D, Pucher J, Buehler R, Thompson D, Crouter S. Walking, cycling and obesity rates in Europe, North America, and Australia. *J Phys Act Health* 2008;5:795-814.

<sup>4</sup> Celis-Morales CA, Lyall DM, Welsh P, et al. Association between active commuting and incident cardiovascular disease, cancer, and mortality: prospective cohort study. *BMJ* 2017;357:j1456. doi: 10.1136/bmj.j1456

- The risk of cardiovascular disease by 46%

Commenting on this study, the Guardian said, "If a magic pill were invented that could generate all of these benefits, we would be falling over ourselves to buy it."<sup>5</sup>

A summary of 174 individual studies have given us insight into how the risk of cancer, diabetes, and ischaemic heart disease reduces with exercise. The message is clear: the more the better<sup>6</sup>:



Cycling has clear benefits to business. A 3-year study in Cambridge, UK, found a 54% in sickness absence from work each year<sup>7</sup>.

A recent, large study published in the British Medical Journal examined the effect of active transport (cycling and walking) on the obesity epidemic and compared this affect with sport involvement.<sup>8</sup>

<sup>5</sup> <https://www.theguardian.com/environment/bike-blog/2017/apr/20/its-good-to-hear-cycling-to-work-reduces-your-risk-of-dying-but-thats-not-why-i-do-it>

<sup>6</sup> Kyu HH, Bachman VF, Alexander LT, et al. Physical activity and risk of breast cancer, colon cancer, diabetes, ischemic heart disease, and ischemic stroke events: systematic review and dose-response meta-analysis for the Global Burden of Disease Study 2013. *BMJ* 2016;354:i3857. doi: 10.1136/bmj.i3857

<sup>7</sup> Mytton OT, Panter J, Ogilvie D. Longitudinal associations of active commuting with wellbeing and sickness absence. *Prev Med* 2016;84:19-26. doi: 10.1016/j.ypmed.2015.12.010

<sup>8</sup> Associations between active commuting, body fat, and body mass index: population based, cross sectional study in the United Kingdom, *BMJ* 2014;349:g4887 doi: 10.1136/bmj.g4887 (Published 19 August 2014)

	Reduction in BMI		Reduction in Percentage Body Fat	
	Men	Women	Men	Women
Attributable to active transport	-0.97	-0.87	-1.35	-1.37
Attributable to involvement in sport	-0.10	-0.26	-0.19	-0.34

These findings show a robust, independent association between active commuting and two objective markers of obesity, BMI and percentage body fat. Those who used active modes had a lower BMI and percentage body fat compared with those who used private transport.

These differences are larger than the effect sizes seen in most individually focused interventions based on diet and physical activity to prevent overweight and obesity.<sup>9</sup> They are also approximately four times larger than the reductions in obesity due to involvement in sport.

Active commuting to work has been strongly recommended by the UK National Institute for Health and Care Excellence (NICE) as a feasible way of incorporating greater levels of physical activity into daily life.<sup>10</sup> Policies designed to effect a population-level modal shift to more active modes of work commuting therefore present major opportunities for public health improvement.

Studies consistently suggest that use of active commuting modes translates into higher levels of overall individual physical activity.<sup>11 12 13</sup> A recent UK study provided 103 commuters with accelerometers for seven days and found that total weekday physical activity was 45% higher in participants who walked or cycled to work compared with those who commuted by car, while no differences in sedentary activity or weekend physical activity were observed between the two groups.<sup>9</sup>

### Is Cycling Safe?

A New Zealand study of ACC injury risks of road cycling 3 times a week, compared to various other activities, found cycling had similar risks to DIY twice a month, 140-fold fewer injuries than skiing 4 – 5 times a year, and 530 fold fewer injuries than playing rugby every 3 weeks.

The study concludes that fear of cycling in car-dependent NZ arise from causes other than the actual risk of injury.<sup>14</sup>

<sup>9</sup> Stephens K, Cobiac J, Veerman J. Improving diet and physical activity to reduce population prevalence of overweight and obesity: an overview of current evidence. *Prev Med* 2014;15:167-78.

<sup>10</sup> National Institute for Health and Care Excellence. Walking and cycling: local measures to promote walking and cycling as forms of travel or recreation (public health guidance 41). NICE, 2012. [www.nice.org.uk/guidance/ph41](http://www.nice.org.uk/guidance/ph41).

<sup>11</sup> Faulkner GE, Buliung RN, Flora PK, Fusco C. Active school transport, physical activity levels and body weight of children and youth: a systematic review. *Prev Med* 2009;48:3-8.

<sup>12</sup> Ogilvie D, Foster CE, Rothnie H, Cavill N, Hamilton V, Fitzsimons CF, et al. Interventions to promote walking: systematic review. *BMJ* 2007;334:1204.

<sup>13</sup> Audrey S, Procter S, Cooper AR. The contribution of walking to work to adult physical activity levels: a cross sectional study. *Int J Behav Nutr Phys Act* 2014;11:37

<sup>14</sup> Chieng M, Lai H, Woodward A. How dangerous is cycling in New Zealand? *Journal of Transport & Health* 2017 doi: 10.1016/j.jth.2017.02.008

## **The Hutt to Wellington Cycle Corridor**

Te Ara Tupua is a vital link in the commuter corridor from the Hutt Valley to Wellington – a corridor used by tens of thousands of commuters a day – the majority in private motor vehicles.

This corridor is already used for upwards of 800 cycle trips a day – despite the real danger of cycling on the verge of a busy state highway.

We consider there is potential for many thousands of people to switch to cycling on this route – the proposed cycleway offers a short, direct and scenic route that will be attractive to many cyclists who would not dream of cycling in the verge of a busy dual carriageway.

## **The Environmental Impact**

There is little remaining natural coastline on this route – it has been profoundly damaged by both road and rail infrastructure. We endorse the efforts of NZTA to substantially improve the coastline ecosystems on this section of coastline.

It would be both tragic and deeply ironic if environmental concerns jeopardised the construction of facilities for the healthiest and most environmentally friendly means of commuting into Wellington – leaving the most environmentally damaging means of transport (private motor vehicles) as the preferred means of transport.

## **Changing Culture, Not Just Doing Projects**

This path has been agreed in policy statements by each of the regions councils. Funding is available.

We applaud this progress.

However, this is a complex process and a “new way of doing business” for council staff, engineering consultants and contractors, community consultation processes, and local businesses.

This is about much more than laying concrete. It is about changing culture and behaviours. It is about changing the choices each of us make each time we leave our homes to go anywhere.

Councils must give their internal and community champions real influence. They must review their processes for the commissioning and design of all roading works to ensure they enhance the safety and attractiveness of cycling.

This requires leadership – local, regional and national decision makers to be looking at this evidence and making our cities and roads the best they can be for everyone – not just motorists.

We encourage Commissioners to both approve the consent for this project *AND* require the participating councils to work together to maximise its use. This will require a focus on:

- Promotion to further encourage mode shift
- Construction of appropriate feeder routes in the Hutt Valley
- Continued improvement of the portion of the corridor from Ngauranga to the CBD
- Requirements for better “trip end” facilities in businesses in Wellington.