



# The health costs and benefits of urban planning

Dr. Daniel Fuller @walkabilly



### Thinking like a health person....

- 1. Populations
- 2. Co-benefits/co-risks
- 3. Inequities
- 4. Costs



### Populations

Population health intervention research involves the use of scientific methods to produce knowledge about policy and program interventions that operate within or outside of the health sector and have the potential to impact health at the population level.



#### Prevention Paradox

A preventive measure which brings much benefit to the population offers little to each participating individual



https://www.flickr.com/photos/foilman/



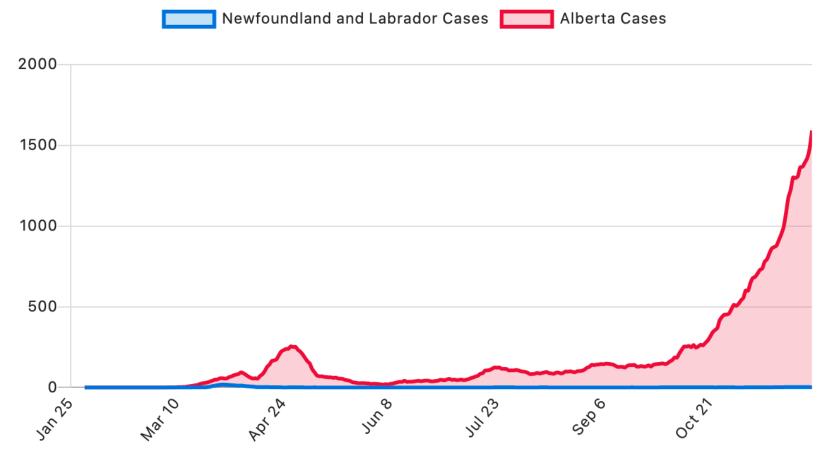
#### Causes

#### Case

 Episode of disorder, illness, or injury affecting an individual

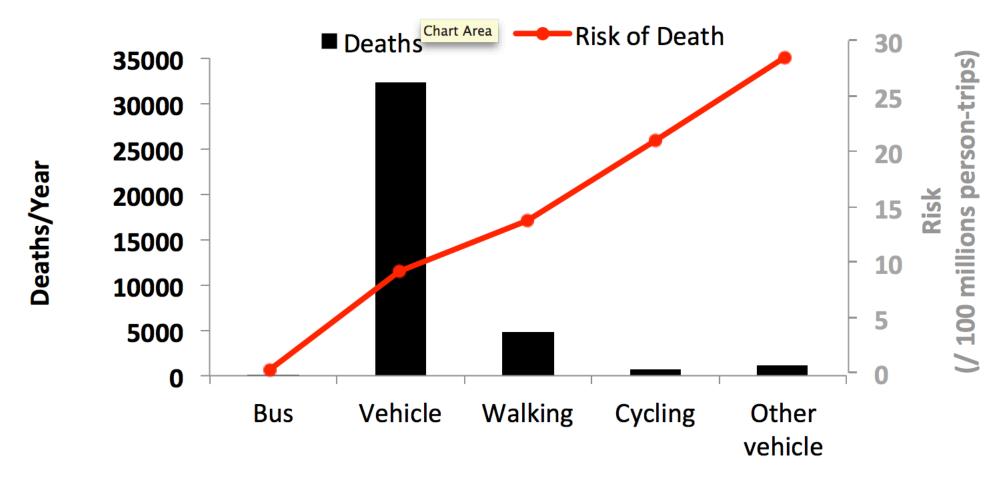
#### Incidence

 The number of cases of a disease that come into being during a specific time period





#### Causes



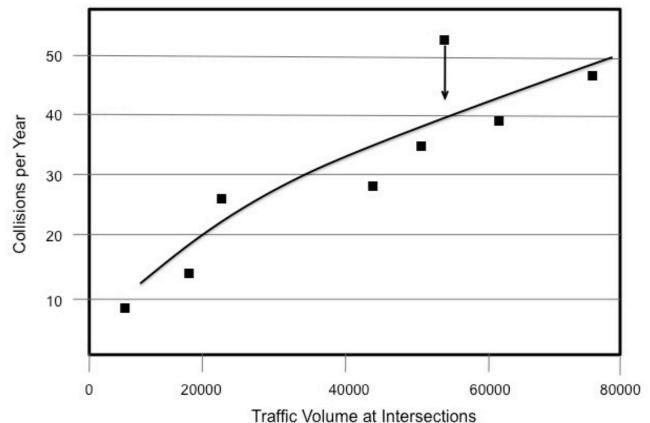


Fuller & Morency, 2013 - https://www.hindawi.com/journals/jeph/2013/916460/

### Typical High Risk Approach

 Return the deviant intersection or building or whatever to some type of norm or trend.

Figure 3a. Potential effect of reducing collisions rate at targeted "deviant" intersections.

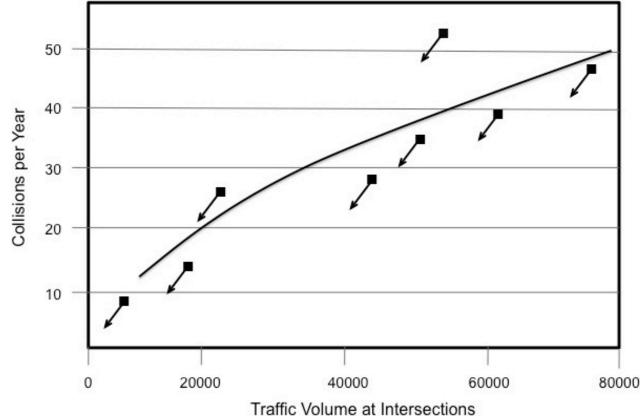




### Population Approach

 Can all intersection or buildings to change the entire curve.

Figure 3b. Potential effect of a global reduction in exposure to traffic volume at intersections.





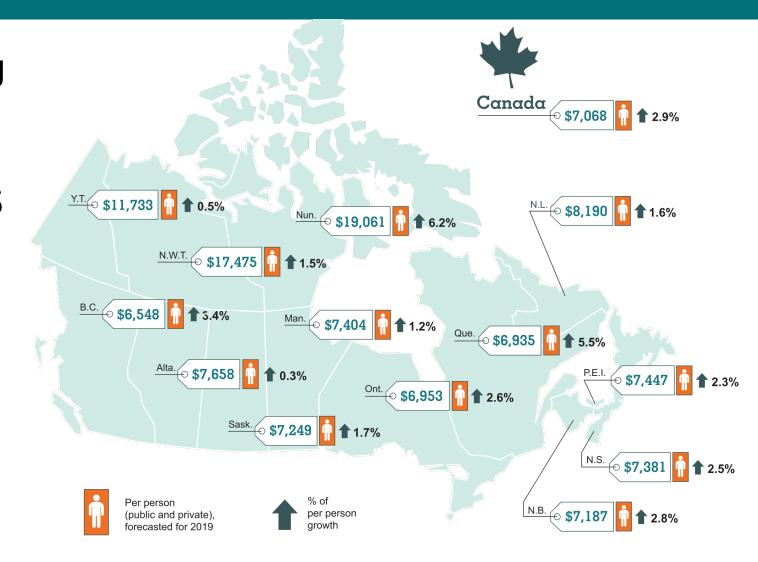
### Population Approach

	Person Trips Million	Fatal Bisk/100	Status Quo	4% Risk Reduction
	Tripo ivilliori	million	Quo	ricadollori
Vehicle	349125	9.25	32283	-1291
Walking	35366	13.7	4846	-194
Bus	11458	0.35	40	-2
Bicycle	3314	20.97	695	-28
Motorcycle	580	536.55	3112	-124



#### Costs

- Canada health spending as a share of (GDP) = 11.6%.
- NL 38.9% of provincial \$ = 2.9 Billion.





#### Co-benefits/co-risks

- 1. Accounting for multiple factors
- 2. Decisions with uncertainty

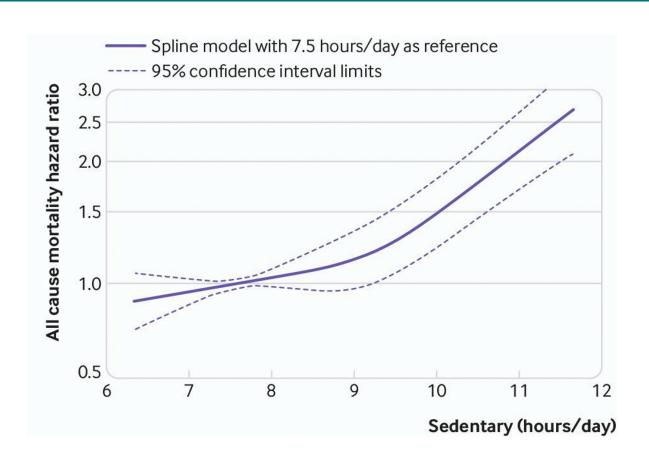


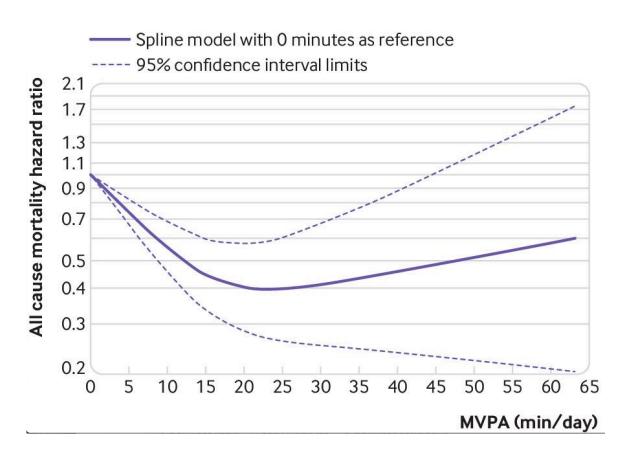
### What goes up?

- Need to consider how things work together to make people heathier (or not) overall
  - Cycling infrastructure
    - Physical activity
    - Injuries and death due to collisons
    - Air Pollution
    - Noise?
    - Greenspace?



### Quality of Evidence







### Decision making is political



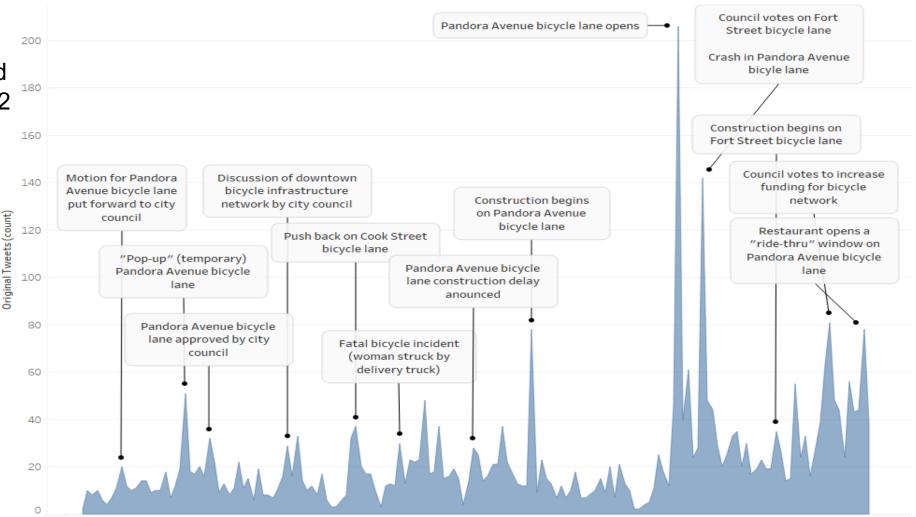


### Decision making is political

May 3, 15

Nov 1, 15

Ferster et al., 2020 - https://journals.sagepub.com/d oi/10.1177/0042098020938252



May 1, 16

Oct 30, 16

Apr 30, 17

Oct 29, 17



### Inequities

"The notion of vulnerable populations refers to groups who, because of their position in the social strata, are commonly exposed to contextual conditions that distinguish them from the rest of the population"



### Inequities

# Why We Must Talk About Race When We Talk About Bikes

SYSTEMIC RACISM CAN'T BE FIXED WITHOUT TACKLING IT WITHIN CYCLING.







#### How do we know what we know?

Two general types of studies

- 1. Natural Experiments
- 2. Health Impact Assessment



#### How do we know what we know?

AAA Cycling Network Victoria, BC

Arbutus Greenway Vancouver, BC

Bus Rapid Transit Saskatoon, SK

Community Sustainability Plan Montreal, QC





### Natural Experiment Studies

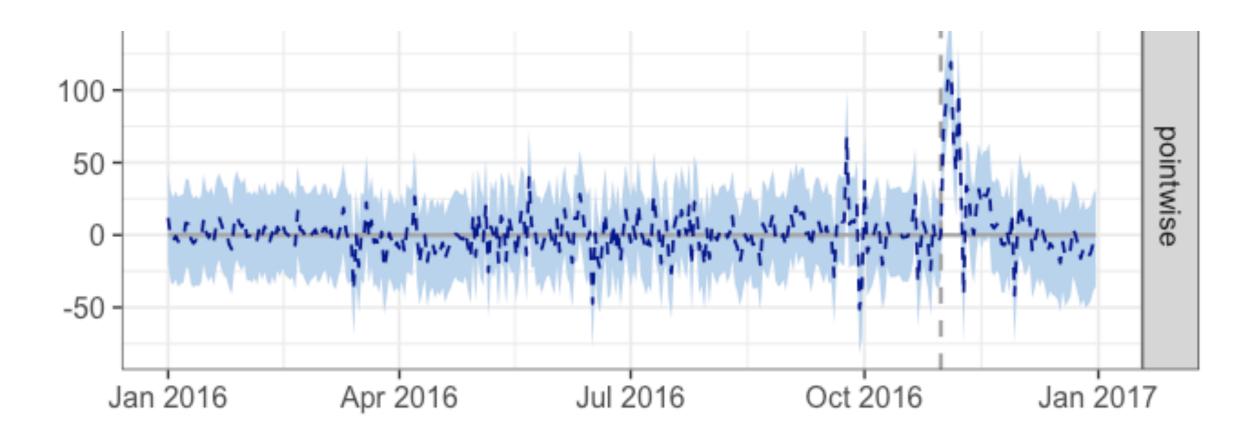
- Evaluations of the health impacts of environmental changes
- We evaluate the impact of the changes that you design and create

WATCH: Halifax seeking feedback on proposed downtown bikeway system





### Natural Experiment Studies





### Health Impact Assessment

A combination of procedures, methods and tools that systematically judges the potential, and sometimes unintended, effects of a policy, plan, program, or project on the health of a population and the distribution of those effects withint the population. HIA identifies appropriate actions to manage those effects.



#### **ITHIM**

## Integrated Transport and Health Impact Model

- Estimates overall health impact of transport interventions
  - DALYs
  - All Cause Mortality





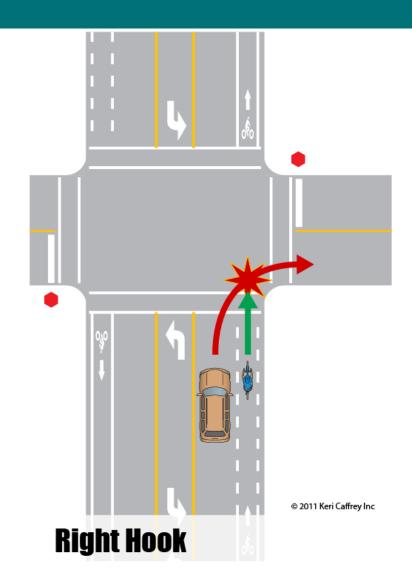
#### **ITHIM**

#### London Cycle Hire Scheme

- Men: -72 DALYs (95% Crl -110 to -43)
- Women: −15 (95% Crl −42 to −6)

- Gender differences = Women are killed much more on bikes in London
  - Physical activity is the most important
  - Collision risk





### Transport and Health Impact Modelling

# Health Cobenefits and Transportation-Related Reductions in Greenhouse Gas Emissions in the San Francisco Bay Area

Neil Maizlish, PhD, James Woodcock, PhD, Sean Co, MS, Bart Ostro, PhD, Amir Fanai, CEng IMechE, and David Fairley, PhD

Greenhouse gas emissions (GHGE) linked to global warming and climate change are the most significant threat confronting public health in the 21st century. Approximately 7% of US GHGE are generated in California, which is the 12th largest emitter worldwide. California's transportation sector is the single largest source (38%), and personal passenger vehicles account for 79% of that sector's GHGE. The State of California has enacted legislation to achieve a 2050 goal of reducing GHGE to 80% below its 1990 level. Strategies to reduce GHGE include reducing carbon di-

Objectives. We quantified health benefits of transportation strategies to reduce greenhouse gas emissions (GHGE).

Methods. Statistics on travel patterns and injuries, physical activity, fine particulate matter, and GHGE in the San Francisco Bay Area, California, were input to a model that calculated the health impacts of walking and bicycling short distances usually traveled by car or driving low-emission automobiles. We measured the change in disease burden in disability-adjusted life years (DALYs) based on dose–response relationships and the distributions of physical activity, particulate matter, and traffic injuries.

Results: Increasing median daily walking and bicycling from 4 to 22 minutes reduced the burden of cardiovascular disease and diabetes by 14% (32 466 DALYs), increased the traffic injury burden by 39% (5907 DALYS), and decreased GHGE by 14%. Low-carbon driving reduced GHGE by 33.5% and cardiorespira-



#### WHO HEAT – St. John's

# Making St. John's more walkable worth more than \$100M over 10 years, say MUN researchers





#### WHO HEAT

- Doubling the mode share of walking in St. John's from 4.6% to 9.2%
- Economic benefit to be \$117,656,000
- Health benefit of 18 premature deaths prevented over a 10-year period.
- If \$3 million were invested annually, the benefit-cost ratio would be 4
  - Benefit would be 4 times greater than the cost.



#### WHO HEAT

#### **Data Inputs and Assumptions**

- Active Modes Data
- Motorized Modes Data
- General Adjustments
  - Take up time
- Contrast Adjustments
  - Proportion of new trips
- Monetization Parameters
- Fixed Parameters



#### WHO HEAT

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### **Building Tools**

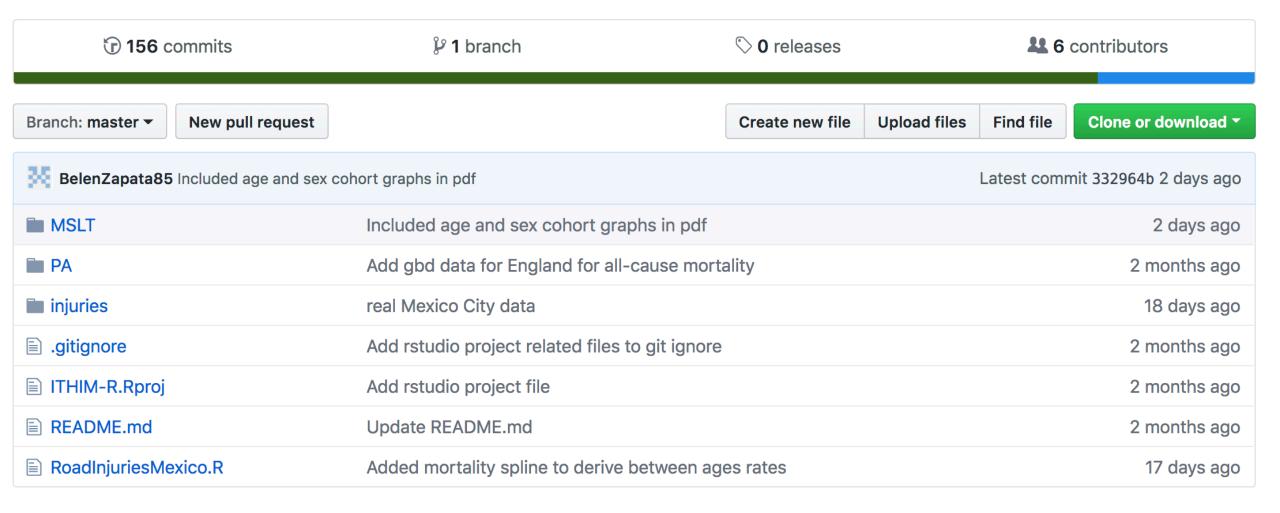
#### **ITHIM**

- Various iterations
  - Excel sheet from hell
  - Analytica Software
  - R Packages <a href="https://github.com/ITHIM/ITHIM-R">https://github.com/ITHIM/ITHIM-R</a> still in progress
- WHO HEAT
  - Website <a href="https://www.heatwalkingcycling.org/#homepage">https://www.heatwalkingcycling.org/#homepage</a>





Development of the ITHIM-R, also known as ITHIM version 3.0. Started in January 2018.



### **Building Tools**

- We don't get grants for building tools
- Side of desk projects
- Lots of half baked tools

Partner with your local researcher!



### Thank you

dfuller@mun.ca

@walkabilly

@thebeaplab









Canada Research Chairs Chaires de recherche du Canada

