

# **An Innovative Performance Based Approach to the Health Impacts of Transit Investments**



**Sean Co**  
**Transportation planner**  
**Metropolitan Transportation Commission**

**Obesity and physical  
activity linked**

**Food or  
Exercise?**

# Changing Portion Sizes in America

**1950**

**Movie Popcorn**

**3 cups**

**174  
calories**

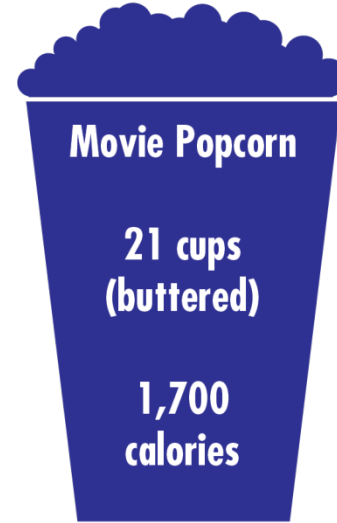


**2004**

**Movie Popcorn**

**21 cups  
(buttered)**

**1,700  
calories**



**1900**



**Hershey Bar**

**2 ounces**

**297 calories**

**2011**



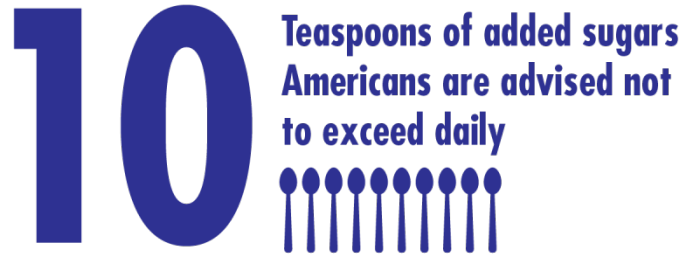
**Hershey Bar**

**7 ounces**

**900 calories**

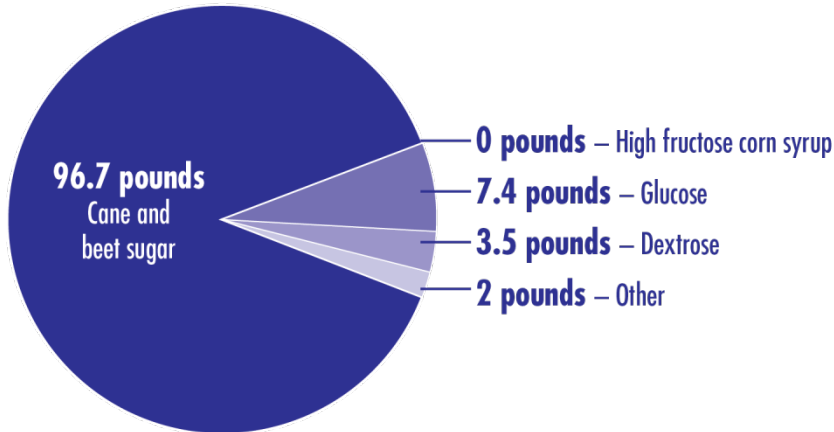
# Sweet Tooth

America's sugar consumption increased by 39 percent between the 1950s and 2000.



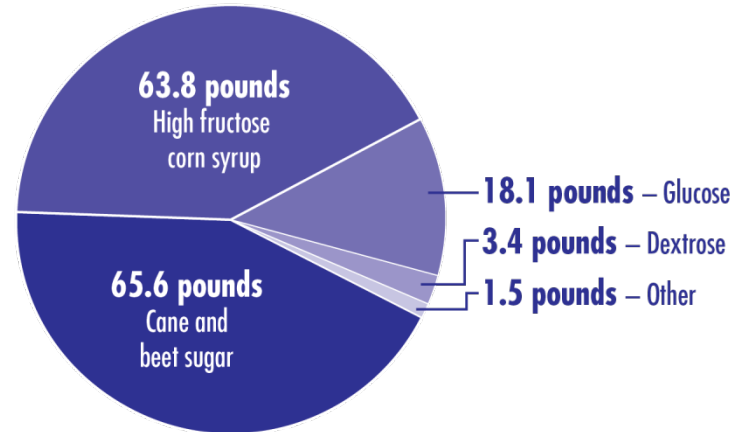
## 1950-59

Total caloric sweeteners:  
109.6 pounds, per capita, annually

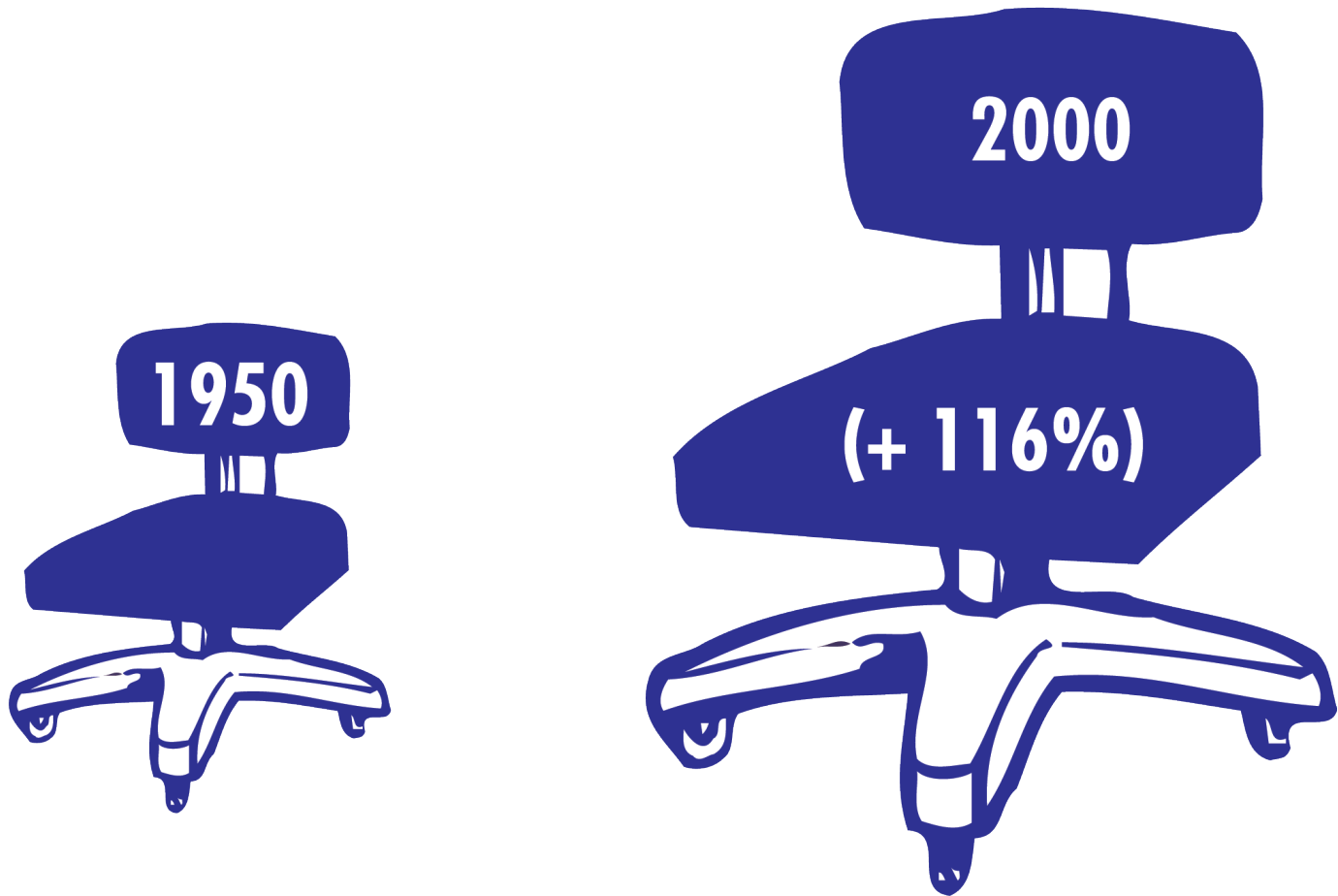


## 2000

Total caloric sweeteners:  
152.4 pounds, per capita, annually



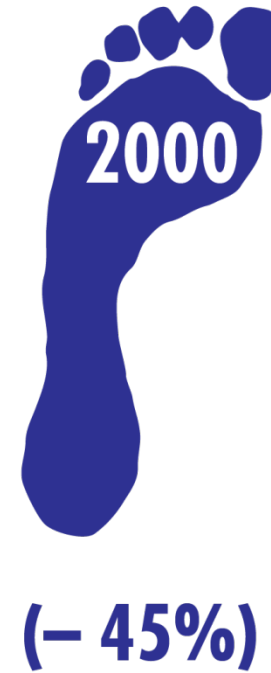
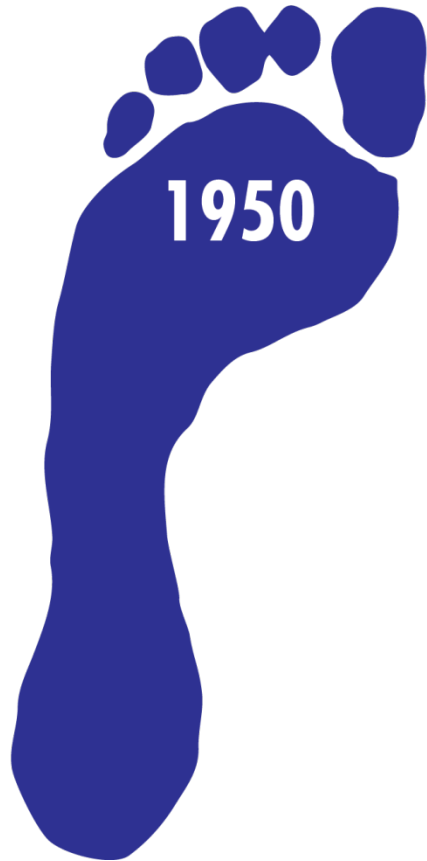
## Work in low physical activity occupation



## Proportion of Trips to Work by Public Transit

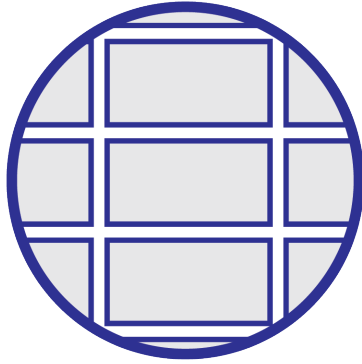


## Proportion of Trips to Work by Walking

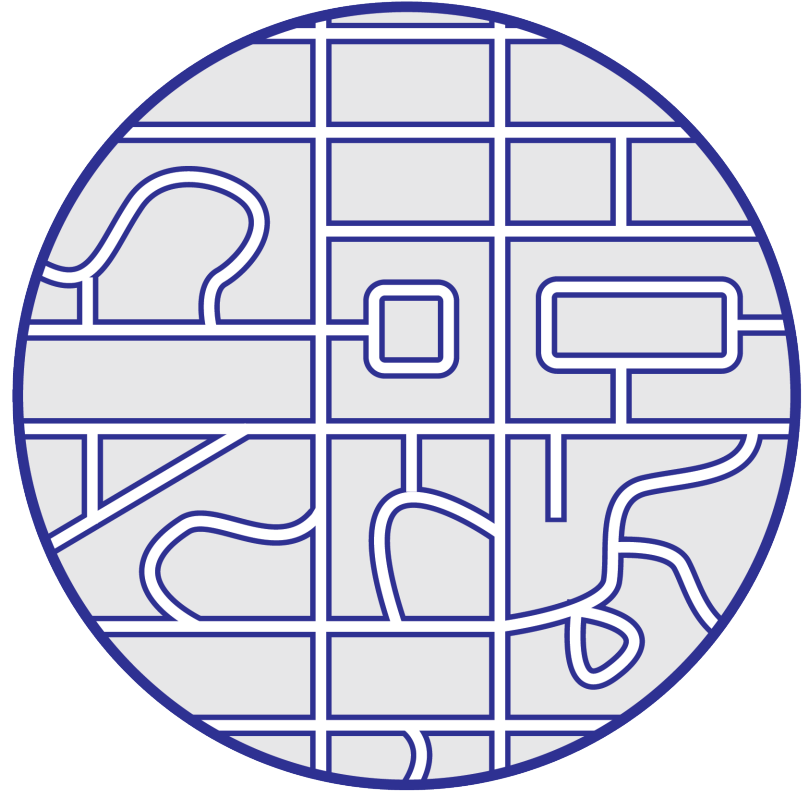


# Average Daily Vehicle Miles Traveled Per Person

**1950**



**2000**



**(+224%)**

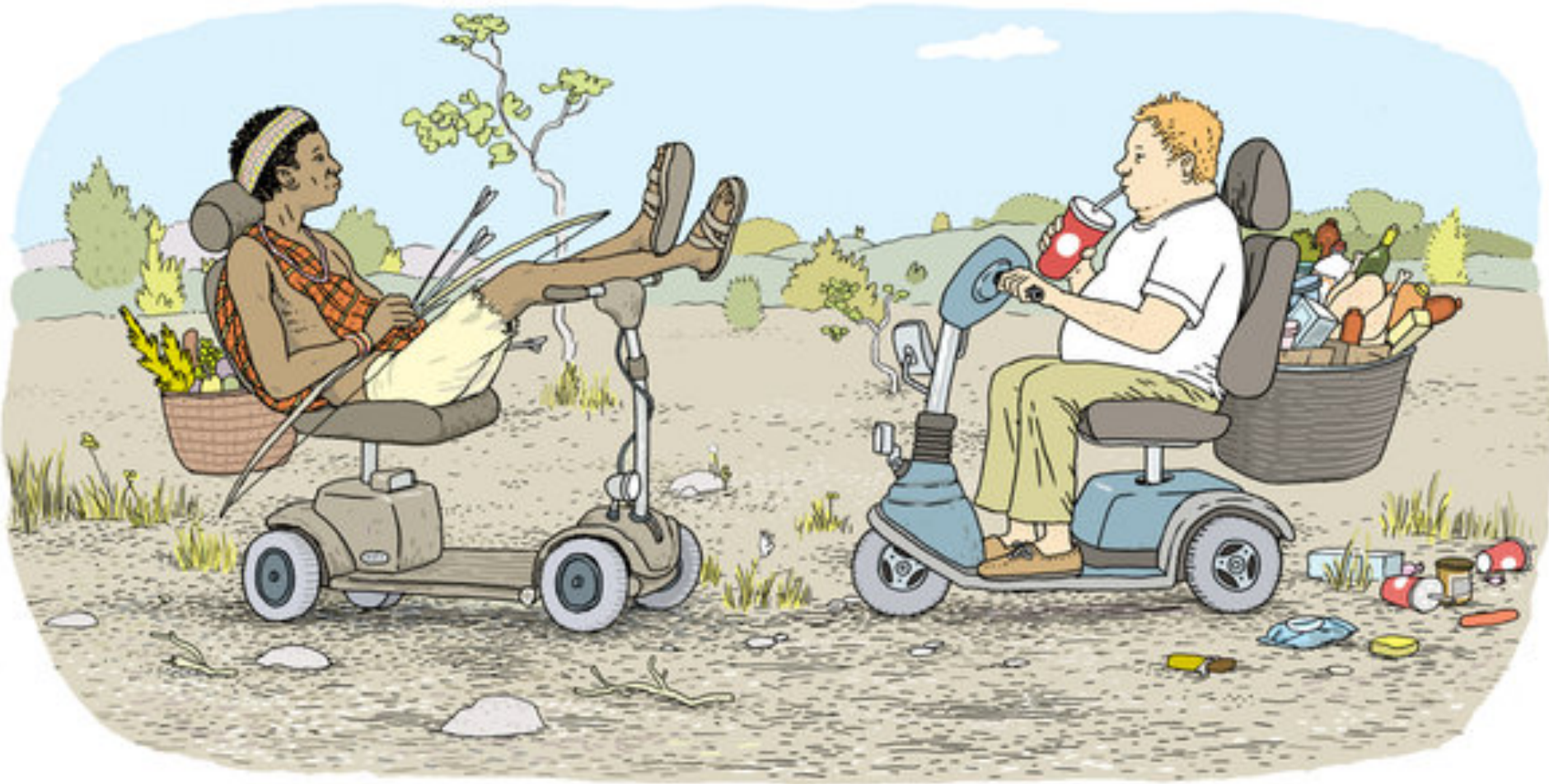




# GAINS IN HEALTH OFFSET BY LIFESTYLE

**reductions in smoking, high cholesterol and high blood pressure since 1988 have been offset by weight gain, diabetes, and pre-diabetes.**

# Daily energy expenditures of hunter-gatherers same as Westerners



Pontzer H, Raichlen DA, Wood BM, Mabulla AZP, Racette SB, et al. (2012) Hunter-Gather Energetics and Human Obesity. PLoS ONE 7(7)

# Built Environment Influences Obesity Rates



Obesity and walkable neighborhoods correlated

Researchers found that children living in neighborhoods with favorable neighborhood environment attributes had 59% lower odds of being obesity

Saelens et al. "Obesogenic Neighborhood Environments, Child and Parent Obesity The Neighborhood Impact on Kids Study" American Journal of Preventive Medicine, April 2012

[www.pedbikeimages.org](http://www.pedbikeimages.org) / Dan Burden

# Physical Inactivity Worldwide on Life Expectancy



**10% of colon and breast cancer**

**7% of type 2 diabetes**

**6% coronary heart disease**

**If inactivity decreased by 25% - 1.3 million deaths would be averted**

I-Min Lee, Eric Shiroma, Felipe Lobelo, Pekka Pushka, Steven Blair, Peter Katzmarzyk, Effect of physical inactivity on major non-communicable diseases worldwide: an analysis of burden of disease and life expectancy, *The Lancet*, July 2012



# **BayArea Plan**

Building on a Legacy of Leadership

**Links land use and housing to transportation**

**Region must show how it can house all the population in the next 30 years**

**Preservation of open space and agricultural land**

**Show how development pattern and transportation network can reduce greenhouse gases**

**Plan Bay Area to achieve a**

**15%**

**CO<sub>2</sub> reduction per capita by  
2035**



**House 100% of  
growth without  
displacing low  
income  
residents by  
2035**

**700**  
**Projects**  
**analyzed**



# BENEFITS & COSTS

## PERSONAL CHOICE

Travel  
Time



Vehicle  
Operating Costs



Health  
Costs



## EXTERNALITIES



CO<sub>2</sub>/PM  
ROG/NOX



Fatal and Injury  
Collisions



Noise

**100** Projects with benefit/cost analysis



**Activity-Based Travel Model**



# Active Transportation Target Development

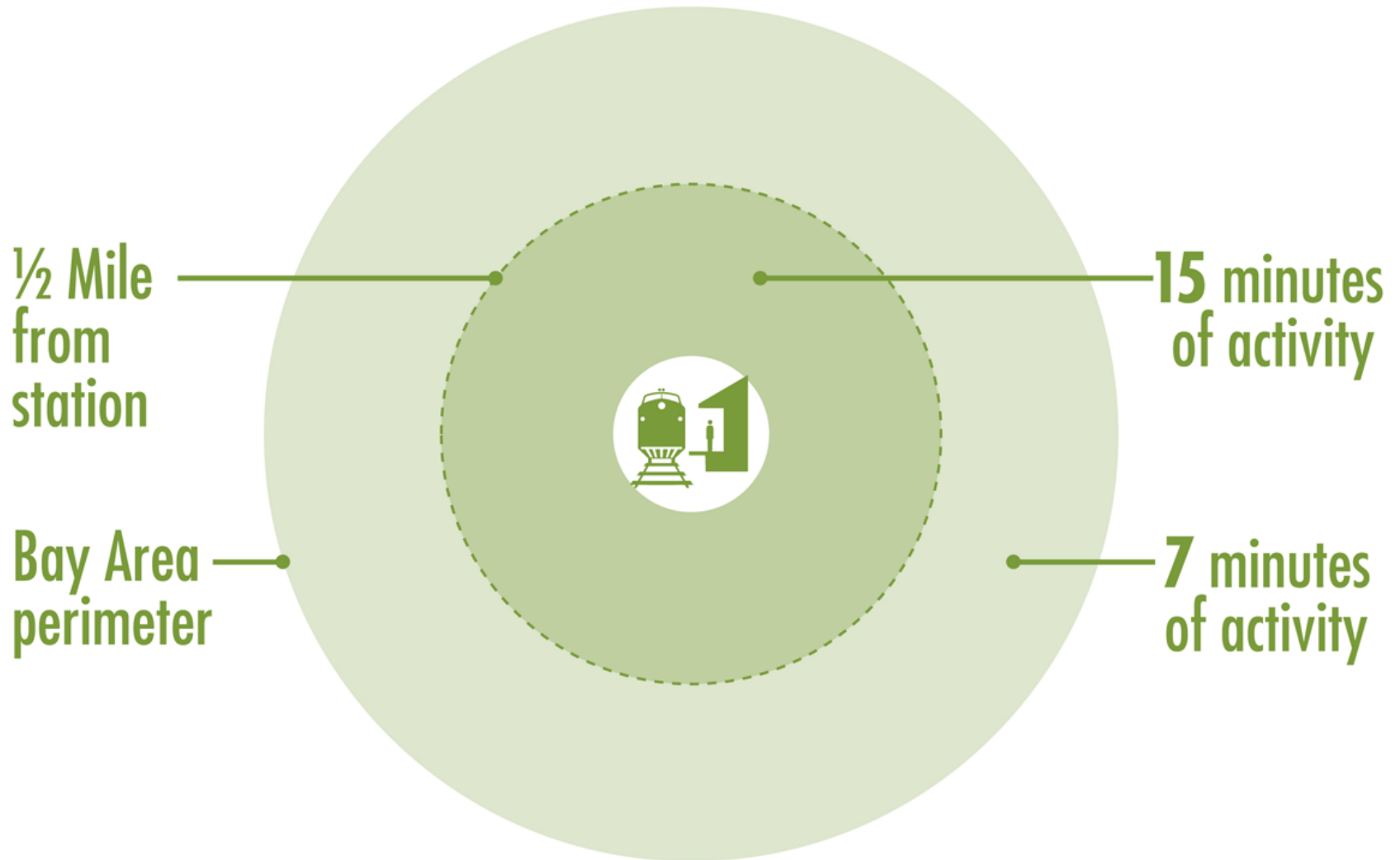
Where does walking and cycling fit within the 30 min/day of moderate to vigorous activity?

**No metrics for active transportation**

No performance standards from the CDC Community Guide – insufficient evidence that transportation policies increase physical activity

What is the expected increase in active transportation in 30 years?

# How much physical activity should transportation take credit for?



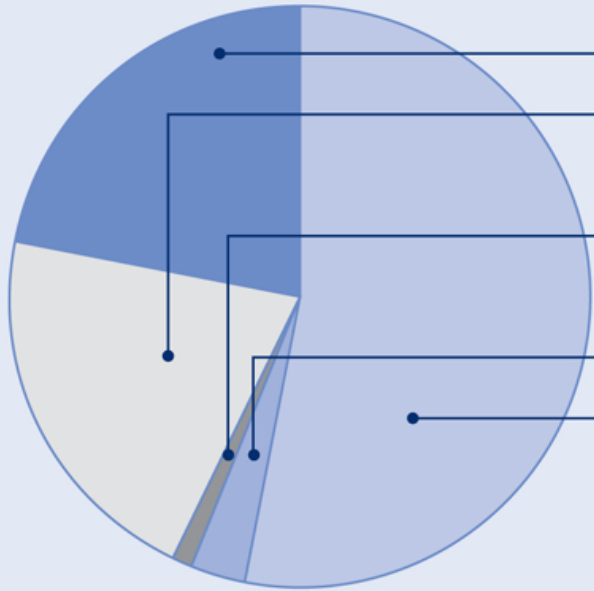
# Methodology of Evaluating Active Transportation

**% of Active  
Individuals**

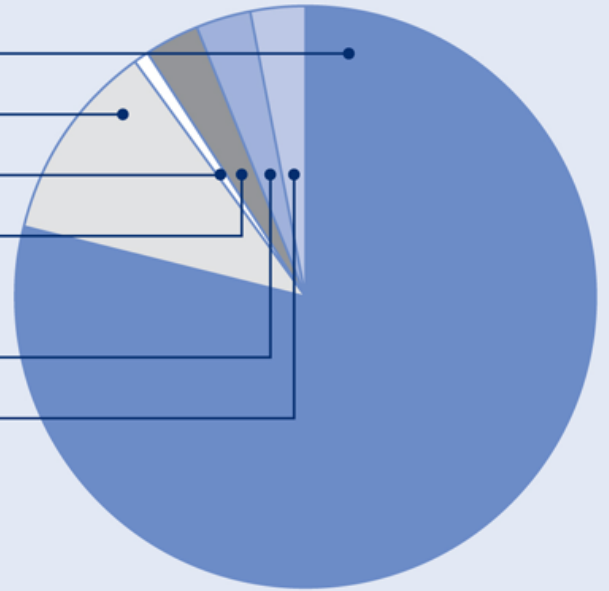
$$\frac{(\text{Change in minutes/person/day}) * (\text{inactive population } 62\%)}{(\text{Minutes to become active } -30)}$$

**Active  
individuals from  
the project**

$$\frac{\text{Percent of active or inactive individuals}}{\text{Projected Bay Area Population}} *$$



22%	Travel Time	79%
21%	Auto Travel Costs	11%
0%	PM	1%
1%	CO2	3%
0%	Other Pollutants	0%
3%	Collisions	3%
53%	Active Transportation	3%
0%	Noise	0%



**Regional Bicycle Network**

**Summary of Total Benefits**

**62%**

**Bay Area Inactive**

California Health Interview Survey

< 30 minutes  
of activity

**\$717**

**Savings From Lost Productivity**

Per person

**\$326**

**Health Care Cost Savings** Per person

(Disease types attributable to physical inactivity)

# Physical Activity Benefits

**Coronary heart disease**

**Type 2 diabetes**

**Colon**

**Depression cancer**

**Breast cancer**

**Dementia**



# What happens when everyone meets the 15 minutes per person per day target?

**\$1.1 Billion**

Lost productivity and health care cost savings

**10.6%** Become active



**\$3.2 Billion**

Saved based on the Value of Statistical Life (VSL)

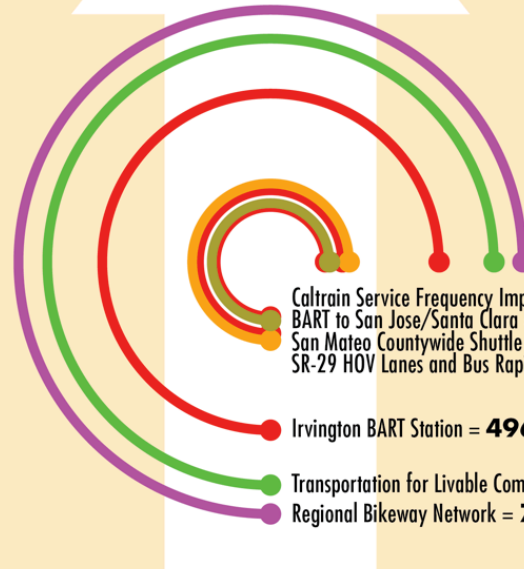
**650 LIVES SAVED**



# Most Physically Active Persons per Dollar

Project Name = **Additional Active Individuals/Million \$**

- Transit Efficiency
- Pricing
- Road Efficiency
- TLC
- Bike/Ped
- Transit Expansion
- Express Lanes
- Arterial Expansion



Caltrain Service Frequency Improvements = **170**

BART to San Jose/Santa Clara = **173**

San Mateo Countywide Shuttle Service Frequency Improvements = **211**

SR-29 HOV Lanes and Bus Rapid Transit = **231**

Irvington BART Station = **496**

Transportation for Livable Communities = **658**

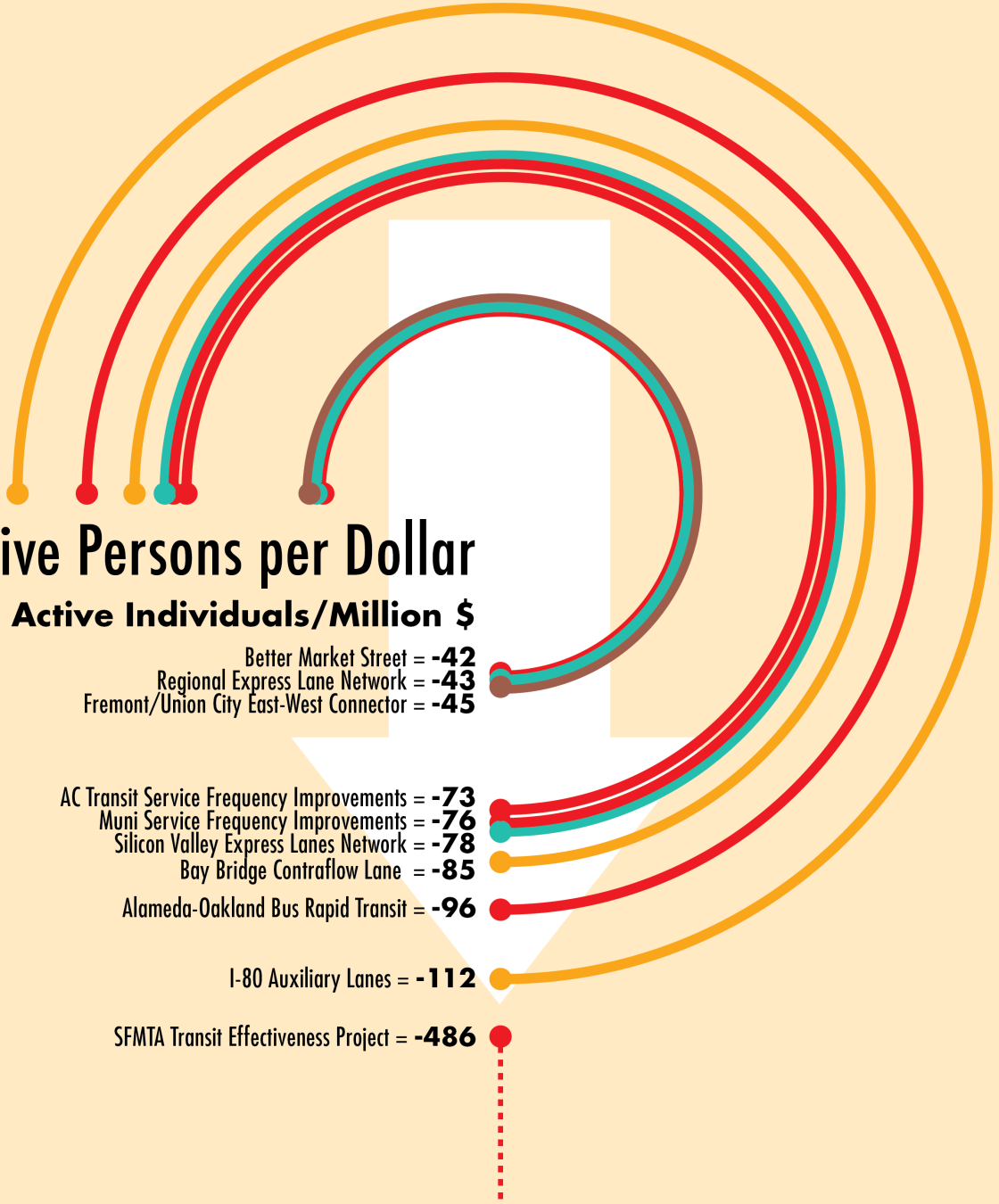
Regional Bikeway Network = **743**

Treasure Island Congestion Pricing = **2,108**

Congestion Pricing Pilot = **2,338**

BART Metro Program = **>2,338**

- Transit Efficiency
- Pricing
- Road Efficiency
- TLC
- Bike/Ped
- Transit Expansion
- Express Lanes
- Arterial Expansion



# Fewest Physically Active Persons per Dollar

Project Name = **Fewer Active Individuals/Million \$**

Better Market Street = **-42**  
 Regional Express Lane Network = **-43**  
 Fremont/Union City East-West Connector = **-45**

AC Transit Service Frequency Improvements = **-73**  
 Muni Service Frequency Improvements = **-76**  
 Silicon Valley Express Lanes Network = **-78**  
 Bay Bridge Contraflow Lane = **-85**  
 Alameda-Oakland Bus Rapid Transit = **-96**

I-80 Auxiliary Lanes = **-112**

SFMTA Transit Effectiveness Project = **-486**

**Transit projects that  
compete with  
bicycle trips can  
make people less  
active**

**Transit projects that  
have travel time  
savings make  
people more active**

# Limitations

- **Travel models don't capture all bike and pedestrian trips**
- **Land use changes as a result of transportation investments not captured**
- **Premature mortality benefit not quantified**
- **Other physical activity not considered**

How can this be applied?

Individual projects evaluation

WHO Health Economic  
Assessment Tool (HEAT)



What's Next?





# Integrated Transportation Health Impact Model (ITHIM)



# Groundbreaking Health Co-Benefits Research

- **2009 London Study: health impacts of alternative strategies to reduce carbon dioxide emissions from transport.**
  - Lower carbon emission motor vehicles/fuels
  - Increased active travel
    - Replacing urban car and motorcycle trips with walking or bicycling

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Woodcock J, Edwards P, Tonne C, Armstrong BG, Ashiru O, Banister D, et al. Public health benefits of strategies to reduce greenhouse-gas emissions: urban land transport. *The Lancet* 2009;374:1930-1943.

# Shift from ten to thirty minutes/day of walking and bicycling

## REDUCTIONS

**19%** **Cardiovascular Disease**

**15%** **Diabetes**

**13%** **Breast Cancer**

**8%** **Dementia**

**38%** **CO<sub>2</sub> Emissions**

# The ITHIM Model Integrates Data on Health and Travel

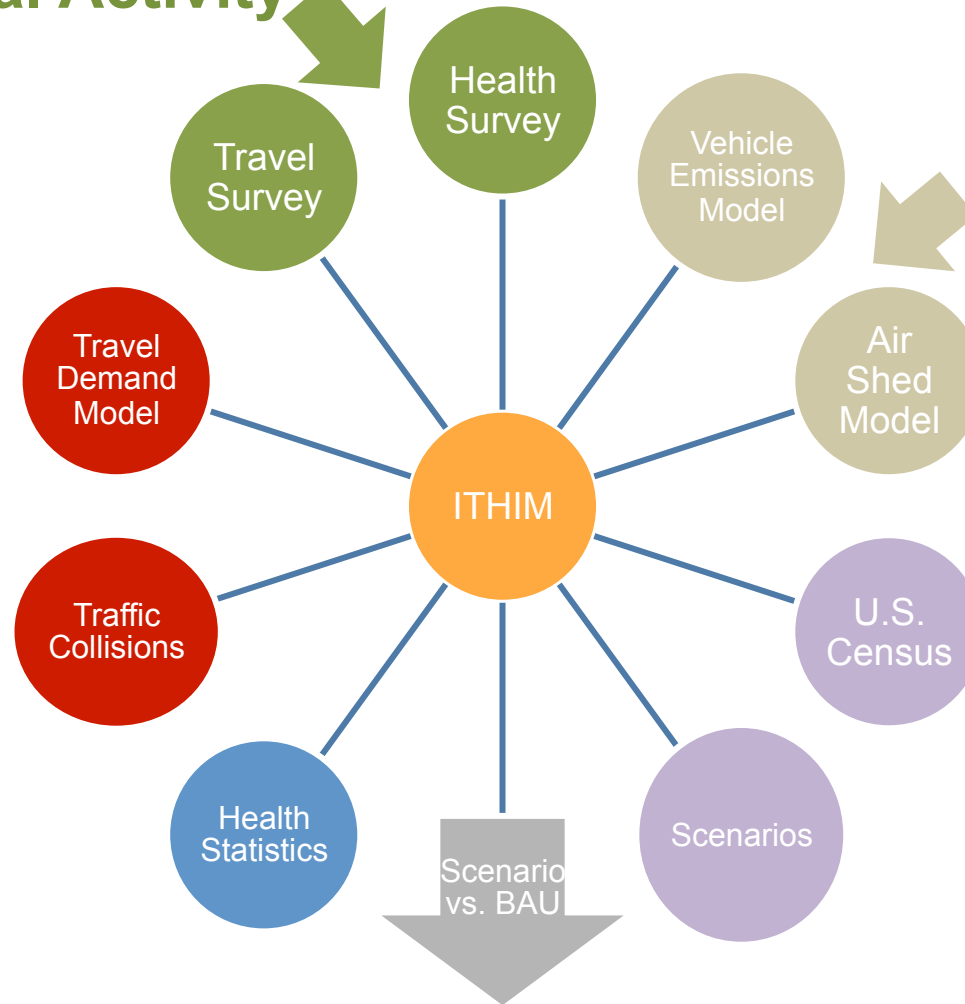
Physical Activity



Air Pollution



Traffic Injuries



Health Outcomes

# Active Transport and Low Carbon Driving Scenarios

## **1. Bay Area Benchmarks**

- Scenario: All Bay Area cities achieve by 2035 the walking and biking levels of the 2009 Bay Area leaders (SF, Oakland, Palo Alto, Berkeley, Mtn. View, Rohnert Park, Morgan Hill)

## **2. Replace short car trips with active transport**

- Scenario: 1/2 of trips <1.5 miles walked and 1/2 of trips 1.5 to 5 miles bicycled

## **3. Attaining Carbon and Physical Activity Goals**

- Back cast the amount of active transport time and distance to reduce car VMT and increase active transport to optimum levels (no more than average commute time to work ~25 minutes); land use and infrastructure exist to support changes

## **4. Low Carbon Driving**

- Fuel efficiency increases, low carbon fuels and low/no emissions cars and light trucks become more widespread, but there are no changes in physical activity or driving patterns

# Comparative Risk Assessment

## Population Attributable Fraction

How much would the disease/injury burden change if the risk factor were eliminated?

## Comparative Risk Assessment

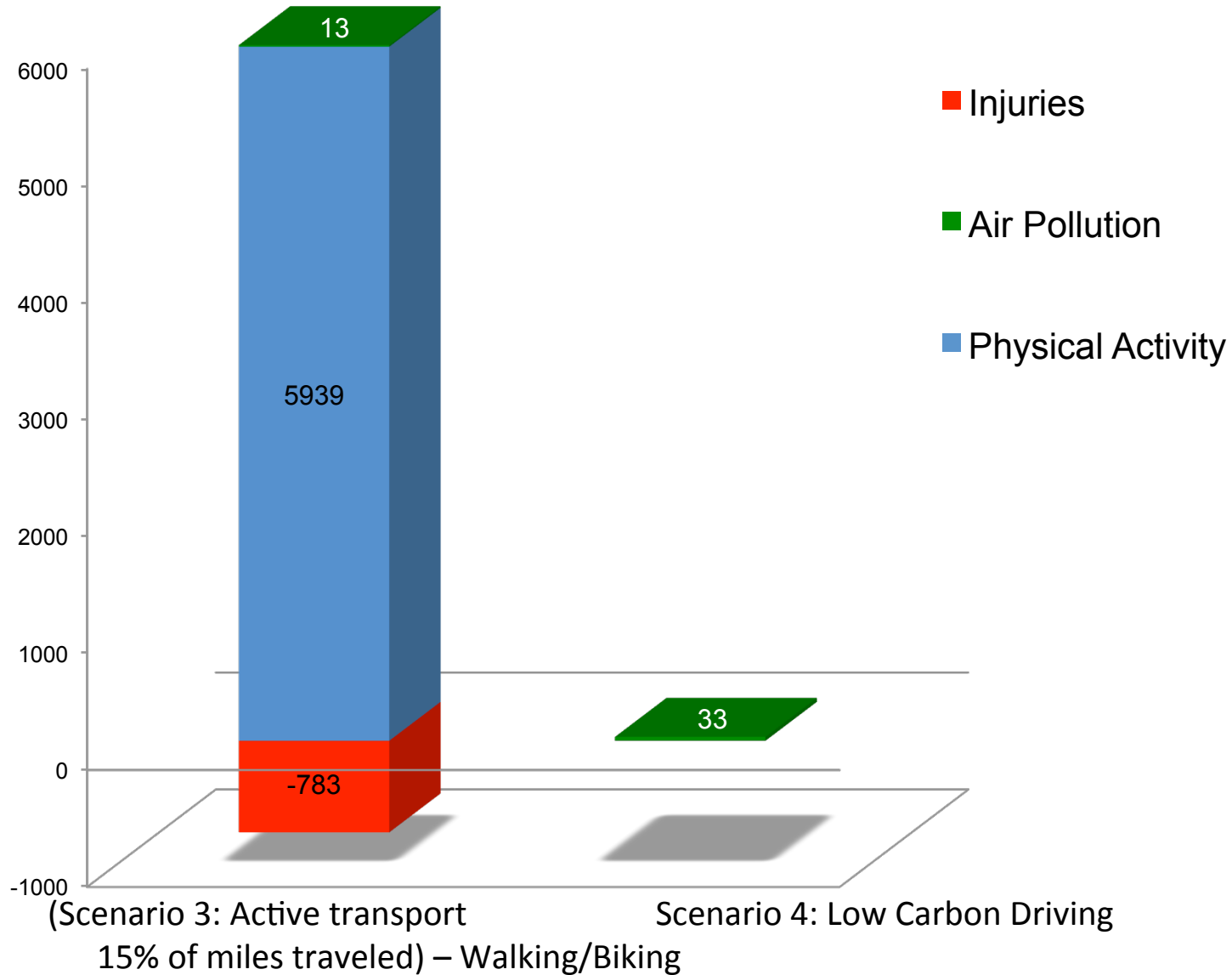
How much would the disease/injury burden change if exposure distribution were altered?

# Health Impacts of Active Transport Scenarios

	Change in disease burden		Change in premature deaths
Cardiovascular Dis.	6-15%	↓	724-1895*
Diabetes	6-15%	↓	73-189
Depression	2-6%	↓	<2
Dementia	3-10%	↓	63-218
Breast cancer	2-5%	↓	15-48
Colon Cancer	2-6%	↓	17-53
Road traffic crashes	10-19%	↑	60-113

\* Range reflects range of physical activity in scenarios

# Annual Health Benefits of Active Transport and Low Carbon Driving in the Bay Area: Predictions from the ITHIM Model





# Summary & Conclusion

**A shift in active transport from 4.5 to 22 minutes/day:**

- **Major reductions in chronic disease**
- **Major public health impact**
  - \$1.4-21.8 billion annual Bay Area health cost savings
  - Adds about 9.5 months of life expectancy
- **Injuries to pedestrians and bicyclists significant concern**

**15% reductions in CO<sub>2</sub> emissions**

**Low carbon driving is not as important as physical activity for generating health co-benefits**


**★ Together, low carbon driving and active transport can achieve California's carbon reduction goals and optimize the health of the population**

**Daily walking or  
cycling is essential to  
meet the  
recommended  
physical activity levels**

Sean Co

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