

### **ORIGINAL RESEARCH**



## Moving towards better health: A survey of transport authorities and primary care trusts in South West England

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<b>KEYWORDS</b> Transport; Partnerships; Health inequalities	Summary Objective: Transport, the way we travel and our ability to access amenities, is an important determinant of health. A survey was conducted to: (1) identify past and present joint working arrangements between transport authorities and health authorities; (2) understand the role and impact of transport themes in health improvement programmes (HIMPs) and health themes in local transport plans (LTPs); and (3) raise awareness of transport and health issues. Study design: A questionnaire survey of directors of public health of primary care trusts (PCTs) and local authority transport managers was undertaken in the South
	<ul> <li>West of England, a region of 5 million people with 32 PCTs and 15 transport authorities.</li> <li><i>Results</i>: All the transport authorities and 66% of PCTs responded. Consultation with the health authority on the LTP had been full in 67% of transport authority areas and more limited in the remainder. Common targets in the LTP and HIMP had been agreed in 33% of transport authority areas, shared programmes or themes in 40%, and a single shared theme in 13%.</li> <li>LTP and HIMP shared themes included walking and cycling initiatives, road safety, school travel and rural access. LTP themes identified as best practice to deliver health gain included walking initiatives, rural access, school travel and road safety. Ongoing links with PCTs were in place in 73% of the transport areas. Of the PCTs that responded, 33% reported that they were working on a travel plan.</li> <li><i>Conclusions</i>: The responses in this survey identified strengths and concerns in the way that health and transport issues are handled locally and are reflected in the LTPs and HIMPs. Recommendations were produced by public health and transport managers in government office South West to improve partnership working.</li> <li>© 2006 The Royal Institute of Public Health. Published by Elsevier Ltd. All rights reserved.</li> </ul>

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#### Introduction

Transport, the way we travel and our ability to access amenities is an important determinant of health.<sup>1</sup> Despite this obvious link, there has been no requirement for primary care trusts (PCTs) in England to engage in partnership work with their local transport authority (the county or unitary authority responsible for transport planning in each area). Without this partnership work, the transport authority, whilst sensitive to the health and wellbeing implications of transport, is unlikely to maximize the potential opportunities for heath gain, accessibility to essential services and the reduction of transport-related inequalities.

Transport influences many aspects of health. For most people and families, their lifestyle depends on the car; driving increasing distances to work, driving children to school, driving to large supermarkets and edge-of-town shopping centres, and driving to sports and leisure facilities. As a result, congestion on our roads is getting worse, car parking is insufficient, and air and noise pollution is increasing. The perception is that healthy alternatives such as walking and cycling are unsafe due to the volume of traffic on the streets. Public transport alternatives are often perceived as being inadequate, with unreliable, overcrowded trains and infrequent bus services. This vicious spiral of increased dependence on the car leading to increased congestion and a perception of alternatives being impractical or unsafe needs to be reversed.

Within a car-dependent society, the large minority of non-car owners, which includes a large proportion of low-income families, single mothers, the elderly and the disabled, and those, often women, without access to their household's car are increasingly disadvantaged by the increasing inaccessibility of services.<sup>2,3</sup> Adding to this inequality is the observation that disadvantaged groups, as well as being non-car owners, are often more likely to experience the harmful consequences of a cardependent society; child pedestrian accident rates are higher in disadvantaged areas.<sup>4</sup> Corner shops and village shops, where they still remain, charge more for basic food and household products and provide less choice than the large edge-of-town supermarkets.<sup>5</sup> Access to health, education, employment and leisure is often more difficult for people living in deprived communities.<sup>2,3</sup>

In England, planning changes to transportrelated initiatives and the transport infrastructure in a local area is done through the local transport plan (LTP). The LTP is the transport authority's strategy document to meet the requirements for an integrated transport policy over a 5-year period (2001/2-2005/6) to show how the authority will deliver national policy as set out in 'A New Deal for Transport: Better for Everyone'.<sup>6</sup>

One of the innovative requirements of LTP planning was the need for wide consultation, including public consultation on the strategic vision for each locality.<sup>7</sup> As part of the consultation process with local partners, the guidance for drawing up the LTPs included the option to involve health authorities (replaced by PCTs from April 2002) in consultation and partnership working to deliver transport-related health benefits and to tackle health inequalities. Health authorities were encouraged to participate fully in the consultation and to develop joint programmes and targets for the delivery of sustainable transport solutions that would benefit health.<sup>8,9</sup> Partnership working remains the way forward for PCTs to address the wide-ranging transport-related aspects of health inequalities.<sup>10</sup>

Transport authorities are encouraged to follow the principles of sustainable development, balancing environmental, economic and social considerations' when developing their LTPs. In the context of transport planning, social considerations could and should include the wide range of public health concerns related to aspects of transport, such as access to services, the effects of social isolation and the promotion of walking and cycling as transport modes that provide physical activity opportunities. There is a particular need to address population health issues through transport interventions in the areas where interventions have been shown to be effective, such as health promotion campaigns, traffic calming measures and legislation.<sup>11</sup> Many transport-related health issues such as road safety, <sup>12</sup> cycling<sup>13</sup> and air pollution<sup>14</sup> have specific national strategies to be addressed and targets to be met within LTPs.

As a means to facilitate joint working, the public health and transport teams of the government office for the South West (GOSW) surveyed all transport authorities and PCTs in the region. The South West is a region of just under 5 million people, with 15 transport authorities (six county and nine unitary authorities; Fig. 1) and eight former health authorities now re-organized into 32 PCTs (Fig. 2).

The aims of the survey were:

- identification of past and present joint working arrangements between PCTs and transport authorities;
- understanding the role and impact of transport themes in health improvement programmes (HIMPs) and health themes in LTPs; and
- raising awareness of transport and health issues.

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