Ontario Public Health Association
l'Association pour la santé publique de l'Ontario
Established/Établi 1949

The mission of OPHA is to provide leadership on issues affecting the public's health and to strengthen the impact of people who are active in public and community health throughout Ontario.

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Sent by fax: 905-704-2007

November 12, 2008

Dear Ms. Garbot:

RE: Metrolinx's Draft Regional Transportation Plan and Investment Strategy

The Ontario Public Health Association (OPHA) is a volunteer, non-profit organization that conducts research, education and advocacy on issues related to community and public health throughout Ontario. The OPHA Environmental Health Work Group has been very active on environmental health issues in recent years, including advocating for individual, community and government actions to reduce emissions of air pollutants that have an adverse impact on public health. The majority of members in this Work Group work full-time on environmental health issues in public health units across Ontario.

The OPHA supports the goals, objectives, strategic directions and action items outlined in the draft Regional Transportation Plan (RTP). These actions address the public health impacts of our transportation system and will help to improve health by reducing emissions of local air pollutants and greenhouse gases from single occupancy vehicles, and by encouraging physical activity.

The RTP goals complement the just released Ministry of Health and Long-term Care - Public Health Standards. Under the Ontario Public Health Standards, the Health Hazard Prevention and Management goal is to reduce exposures to health hazards. Several studies have estimated the significant burden of illness associated with exposure to emissions from vehicular traffic. In particular, the 2007 Toronto Public Health report *Air Pollution burden of Illness from Traffic in Toronto* estimated that air pollution from vehicles gives rise to 440 deaths and 1700 hospitalizations in the City annually.

Health units in Ontario have long recognized the need to address the built environment factors, including our transportation systems, that impact on human health. Several health units are currently developing public health criteria to be considered when planning new communities or intensifying existing communities. These criteria include indicators that measure access and availability of public transit systems.

The Challenge (Section 1.2.2.):

The OPHA agrees that the challenges facing our transportation system in the GTHA include: population growth, climate change, urbanization, aging populations, and public health. The OPHA also agrees that we need to transform how we travel around the GTHA to:

- address climate change and achieve greenhouse gas reduction targets;
- address the impact of vehicular air emissions on public health;
- address the obesity epidemic;
- address the morbidity and mortality from motor vehicle collisions; and
- provide safe, healthy and sustainable transportation options to our growing and aging populations.

Draft Regional Transportation Plan – Goals and Objectives (Section 2.2):

The OPHA supports the set of goals and related objectives outlined in the draft RTP and agree that these goals and objectives can improve public health by addressing the health and environmental impacts of the built environment – specifically our transportation systems. The OPHA supports the following goals and recognizes their importance in improving health:

- Transportation choices, including walking, cycling and transit access for all, regardless of age and ability;
- Active and healthy lifestyles that are enabled, not discouraged, by a variety of transportation choices;
- Smaller carbon footprint and lower GHG emissions to address global climate change;
- Lower emissions of smog forming pollutants to improve air quality and reduce negative impacts on human health;
- Reduced dependence on non-renewable resources by increasing the portion of trips taken by transit, walking and cycling, and increased use of clean fuels and green technologies; and
- Well planned regions that coordinate transportation planning and land use planning decisions so they are complementary rather than contradictory.

Strategic Directions and Priority Actions (Section 2.3)

The OPHA supports many of the Strategic Directions and Action Items identified in the draft Plan. In particular, we support the following:

SD#1 – Build A Comprehensive Regional Rapid Transit Network

Given that the transportation sector is the most significant source of air pollution and greenhouse gases in Ontario, we believe that long-term and sustained investment in public transit is key to addressing these issues in southern Ontario. We strongly support the intent to have express rail, with headways as low as 5 minutes, along the Lakeshore Rail Corridor. More frequent service will increase a modal shift away from single-passenger vehicles to public transit. We also support electrification of this rail system to reduce air pollution along this densely populated corridor.

Some areas of the GTHA have densities that are too low to support frequent transit provision. This condition has often been cited as a reason for increased auto use.
The OPHA supports Action 1.9 – augmenting public transit in low density areas by encouraging alternative service models such as outsourcing, jitneys, shuttle buses, and dial-a-bus. This action has the ability to shift some individuals onto transit. This action also offers opportunities for more physical activity and better air quality.

SD#2 – Promote Active Transportation

Physical activity plays a major role in the health promotion portfolios of our membership. As a result, we strongly support Action 2.1 – plan and implement a complete, integrated walking and cycling network for the GTHA. We are especially pleased to see that the action acknowledges the need to remove the barriers to crossing the 400-series and other highways. We are also pleased that the Draft Plan includes a provision to bring every urban resident within one kilometre of a dedicated bicycling facility. The latter would encourage cycling in the GTHA.

Action 2.3 regarding the research, standardization, and promotion of best practices for integrating walking and cycling into road design should include consideration of separating bicycle lanes from both vehicular traffic and sidewalks for walking. Our review of the research suggests that in order to encourage a greater number of people to use cycling as a means of transportation, we need to address both actual and perceived safety.

An examination of bicycle-friendly environments in the Netherlands, Denmark and Germany highlighted the importance of providing separate cycling facilities because they are designed to feel safe, comfortable and convenient for every user and for all levels of cycling ability. Roads with traffic speeds greater than 60 km/hour, roads with a high volume of traffic and roads with a high volume of truck traffic should have separated lanes that are part of the road, not sidewalk infrastructure. Consideration should also be given to ensuring that cyclists have priority in intersections.

Several public health units in Ontario are involved in the Active and Safe Routes to School (ASRTS) program. Our experience tells us that the current design templates for elementary schools present many challenges for walkability, particularly because they cater to buses, and parents' parking and drop-off areas. We are pleased to see Action 2.8 – define school catchment areas on the basis of maximising walking and cycling as the primary means of school travel - included in the Draft RTP. This is a good starting point in the discussion on school design, and a good starting point to counter the current trend of large or warehouse schools that restrict walking and cycling to school. Metrolinx would need to engage the Ministry of Education in discussions on this matter.

SD#4 – Consider All Modes of Transportation

Action Item 4.1: on "…establishing a passenger transportation hierarchy to be used as the basis for planning, designing, financing and operating of the transportation system…" where trip reduction/avoidance, active transportation and transit are highest on the hierarchy, and the single occupancy vehicle is lowest, would benefit public health as it would reduce emissions by having fewer vehicles on the road, and increase physical activity.

The OPHA is pleased to see Metrolinx's commitment to walking and cycling through Action 4.2 by broadening the scope of traffic impact studies for new developments to include transit, walking, and cycling. This effectively broadens the spectrum of transportation comments which should reach beyond road patterns and vehicular efficiency alone. Identifying the full spectrum of transportation infrastructure needs would also serve to "even" the playing field for active transportation. It is important that communities are planned with consideration of the transportation needs (e.g. infrastructure such as public transit and cycling and walking trails) and the transportation impacts of that development (e.g. potentially more vehicular traffic). Collectively, this will boost the areas of public health's interest in physical activity and air quality.

We concur with Action 4.3 that the environmental assessment process should be broadened to include an assessment of all transportation modes. By including an analysis of transit, active transportation, and other transportation options, we gain the ability to assess opportunities to reduce single occupancy vehicle use and the air and greenhouse gas emissions associated with vehicle use. The latter would also provide for a complete transportation picture.

The OPHA is particularly pleased with Action 4.4 which proposes that municipalities to establish protocols to obtain input from transit agencies and public health departments on all major planning and transportation matters. We see this as a key and missing link in the development approvals process, as it affords a more complete assessment of a development proposal.

Several health units in Ontario are exploring opportunities to address the health impacts of the built environment. This will be a requirement of the new Ontario Public Health Standards. This action allows public health impacts from developments to be identified and addressed during the decision-making process. It also offers opportunities for educating planners and other professions on the health concerns associated with transportation options.

Meet the Needs of the Traveller

SD#6 – Create a Customer-First Transportation System

As noted, transit service in the GTHA is largely focused on the transit provider. The
OPHA concurs with the need to re-focus transit to a customer-focused service. The
social marketing campaigns identified in Action 6.10 are necessary to inform, educate,
and influence societal behaviours. In addition to directing social marketing campaigns
to households near rapid transit, Metrolinx could engage in a broad social marketing
campaign that could inform and influence the general population about the public transit
options. When the RTP is approved, public service announcements could be used to
inform the public about the Plan and disseminate information about transit service in the
GTHA.

Build Communities That Make Travelling Faster

SD#8 – Build Communities That Are Pedestrian, Cycling, and Transit-Supportive.

Research shows that 400 metres is a walking distance that would support transit use.
We suggest that distance criteria for walkability be stated and included in 8.3 as this would provide for consistent implementation of the policy across the GTHA.

The OPHA suggests that a transit-first approach be taken for new developments. This means including a policy on the early introduction of transit service, from the occupancy of the first residential units. We concur with the perspective that the early provision of transit in a residential development is critical in capturing riders.

The OPHA supports Action 8.5 which calls for locating human services in areas that maximize access to transit service and active transportation and adopting pedestrian friendly and transit-oriented design

Active transportation could receive a real boost by Action 8.6 on the updating of municipal parking and zoning by-laws to provide the option of alternatives to free on-site parking. These kinds of novel approaches to development are needed to break the dominance and reliance of the car by offering more tangible alternatives to it.

SD#10 – Focus Growth and Development Along Transportation Corridors

Action 10.3 identifies the importance of having enforceable design standards and
streetscape guidelines. Research indicates that attractive design has the potential to
increase the desirability of walking and cycling as an option by enhancing the quality of
the pedestrian and cyclist experience. In addition to the elements listed we would also
encourage consideration be given to the placement of windows and entrances.
Although this was alluded to in Action 10.2, it would be beneficial to explicitly state that
functional front entrances should be directly accessible from sidewalks located on the
road network and that windows should face streets and non-residential windows that
face a public space, such as a sidewalk or road, should have transparent glass.

Commit to Continuous Improvement
SD#11 – Improve Transportation Understanding Through Research and Innovation

The impacts of transportation on the environment have generally been established. What remains to be explored and ascertained are the range of impacts on human health. As a result, the OPHA concurs with Action 11.3 to expand the body of research into such.

Results – Key Indicators of Success (Section 2.4)

The OPHA supports the key indicators of success outlined in the RTP. These built environment and other indicators are also a measure of improvements in public health related to transportation, for example:

- percent of people who live within 2 km of rapid transit;
- total number of transit trips taken every year;
- annual GHG emissions from passenger transportation per person;
- annual fuel and electricity consumption from passenger transportation per person; and
- average distance travelled by car each day per person.

In addition to the above indicators, the OPHA recommends that Metrolinx work with public health agencies in the GTHA and Health Canada, to benchmark and monitor/model impacts on air quality and improvements to public health, as the RTP is implemented.

Key Indicators of Success – Table 4:

Not surprisingly, a number of indicators included in this table are sometimes used by public health units as indicators (amount driven, use of transit, walking and cycling, and environmental impact). Given the emphasis to improve live/work relationships and to increase physical activity from walking and cycling, we respectfully suggest that the proportion (12.5%) of morning rush hour trips taken by walking or cycling in 25 years is too conservative. It is unclear whether this measurement applies to 100% for all trips, or trips that connect to transit, or trips that involve 100% cycling only.

In addition, a potentially important indicator would be to measure the capacity of the network to support walking and cycling. If the network can support 25% of the population, for example, taking their morning rush hour trips by walking or cycling this becomes a target to work towards. Another indicator could be vehicle kilometres travelled by single passengers over time as this is an indicator of alternative modes of transportation as well as technology employed.

Currently, many of the indicators refer to population-level measures such as “the average distance driven by car each day per person”, and the “percent of people within 2 km of transit”. It is possible for the quality of life for particular groups of people to decline while these indicators show overall improvements for the region. For example, people who live near busy highways may be exposed to high levels of pollution and noise, have limited access to pedestrian and bicycle infrastructure, and a high concern for safety. Increased noise and air pollution could accompany densification of neighbourhoods. Identifying such issues early on will ensure that strategies to minimize such adverse impacts are identified and implemented.

Implementation – Roles and Responsibilities (Section 3.4):

The OPHA agrees that it is important to get transit projects built and operating as soon as possible, in order to support new development and to reduce the current traffic load and resultant emissions from single occupancy vehicles. However, we feel that the new EA process for transit should identify the human health and environmental impacts of the projects and include the positive public health impacts of displacing the single occupancy vehicle

Draft Investment Strategy

The OPHA does not have specific comments to make on the Draft Investment Strategy, but, suggest that criteria be developed, and perhaps consulted on, to guide decision-making on the Metrolinx’s investment priorities.

In conclusion, the OPHA would like to congratulate Metrolinx for taking the next step in ensuring that our residents, visitors and businesses in the GTHA will have the travel options that can improve their personal health and the health of the community. The multiple benefits of improved air quality, reduced greenhouse gases, increased physical activity, and safer transit, pedestrian and cycling routes, along with the many environmental and economic benefits, is the key to success for the Regional Transportation Plan.

Sincerely,

Carol Timmings
President