



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.

November 30th, 2016

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Constituent Societies

Association of Ontario Health Centres

Association of Public Health Epidemiologists in Ontario

Association of Supervisors of Public Health Inspectors of Ontario

Canadian Institute of Public Health Inspectors (Ontario Branch)

Community Health Nurses' Initiatives Group (RNAO)

Health Promotion Ontario

Ontario Association of Public Health Dentistry

Ontario Society of Nutrition Professionals in Public Health

The Ontario Association of Public Health Nursing Leaders

*Charitable Registration
 Number 11924 8771 RR0001*

Arielle Mayer
 Senior Policy Advisor
 Ministry of Transportation, Policy and Planning Division
 Transportation Planning Branch, Environmental Policy Office (Toronto)
 777 Bay Street, Suite 3000
 Toronto Ontario, M7A 2J8

Dear Ms. Mayer:

Re: A Call for Comments on the Ministry of Transportation's Discussion Paper for the Next Regional Transportation Plan (EBR Registry Number: 012-8405)

The Ontario Public Health Association (OPHA) appreciates the opportunity to provide comments on the Ministry of Transportation's Discussion Paper for the Next Regional Transportation Plan.

Created in 1949, OPHA is a not-for-profit organization committed to providing leadership on issues affecting the public's health and strengthening the impact of people who are active in public and community health throughout Ontario. Our mission is achieved by providing professional development, timely information and analysis on public health issues, access to multi-disciplinary networks, advocacy on healthy public policy, and expertise and consultation.

There is increasing evidence that the way our communities are designed has a direct impact on factors such as: employment; social support networks; and, the physical and social environments that influence health and health equity. Research indicates that poorly designed communities adversely affect the health of residents, as shown by increasing rates of obesity, diabetes, cardiovascular diseases, respiratory illnesses, and exposures to environmental contaminants.

This was demonstrated, for example, by the findings from the 2014 report *Improving Health by Design in the Greater Toronto Hamilton Area* by the Medical Officers of Health for Peel Region, City of Toronto, Hamilton and Simcoe-Muskoka which showed that:

- The prevalence of diabetes among adults is projected to double in 25 years from 7.1% in 2002 to 16.4% by 2027. Current diabetes-related medical costs attributable to inactivity are over \$550 million in the GTHA each year.
- The annual costs of physical inactivity and obesity in the GTHA are now \$4 billion, including \$1.4 billion in direct medical costs.
- Traffic-related emissions in the GTHA are estimated to be responsible for 854 premature deaths and 2,812 to 3,939 hospitalizations each year.

Transportation and land use planning play an important role in creating healthy, sustainable and complete communities. Transit-oriented communities which support multi-modal trips and active transportation help promote physical activity, reduce transportation-related air pollutants, help mitigate climate change, and have reduced injury rates. Protection and access to greenspace is also critical and provides many health benefits, including opportunities for physical activity and recreation, improving air quality, reducing greenhouse gas emissions, preserving water quality, and addressing social and health inequities.

Public Health Units across Ontario are addressing the complex issues and impacts related to health and the built environment including: air quality, climate change, water quality, access to healthy foods, obesity, physical activity, traffic related injuries, falls, and general wellbeing across all ages and throughout a lifetime.

The OPHA's Health and Built Environment Workgroup has undertaken a review of the Discussion Paper for the Next Regional Transportation Plan and has provided the comments in the attached appendix for your consideration. Thank you for the opportunity to comment.

Sincerely,



Pegeen Walsh
Executive Director

About OPHA

Created in 1949, the Ontario Public Health Association (OPHA) is a non-partisan, non-profit organization that brings together a broad spectrum of groups and individuals concerned about people's health. OPHA's members come from various backgrounds and sectors - from the various disciplines in public health, health care, academic, non-profit to the private sector. They are united by OPHA's mission of providing leadership on issues affecting the public's health and strengthening the impact of people, who are active in public and community health throughout Ontario. This mission is achieved through professional development, information and analysis on issues effecting community and public health, access to multidisciplinary networks, advocacy on health public policy and the provision of expertise and consultation.

The Ontario Public Health Association's
Comments on
The Discussion Paper for the Next Regional
Transportation Plan
(EBR Posting # 012-8405)

November 30, 2016

Overview

Outlined below are OPHA's comments and recommendations related to the various questions posed by the Ontario Ministry of Transportation related to its *Next Regional Transportation Plan*.

Toward a Shared Vision of the Future

Do the Vision, Goals and Objectives resonate with you and the 2041 future you would wish for?

Vision

Pg 22: "Connect people to jobs, move goods and deliver services efficiently throughout the region, supporting a strong, prosperous and competitive economy."

- Recommendation: Complete communities also contribute to a strong economy, therefore we suggest enhancing the statement to be inclusive of other amenities/destinations and not only connecting people to jobs.

Pg 22: "Offer a variety of options for getting around reliably, comfortably, conveniently and safely, contributing to a high quality-of-life;"

- Recommendation: In the previous RTP, the overall vision explicitly supported "healthy and active lifestyles". The new proposed vision now speaks to "high quality-of-life" instead. Although this can be interpreted as a more inclusive term, we suggest that references to "health" be re-incorporated in the new vision.

Goal B: Equity and Accessibility

Pg 23: "5. Transit offers affordable access to jobs, services and major destinations, and is competitive for most trips."

- Recommendation: Consider replacing the term “transit” with “transportation system” to be more inclusive.

Goal C: Health, Comfort and Safety

Pg 23: “7. Walking and cycling are attractive and realistic choices for most trips”

- Recommendations:
 - Although walking and cycling are primary forms of active transportation, we suggest using the term active transportation throughout the document/future plan as it is more inclusive of all forms.
 - The previous RTP also had “8. Increased share of trips by walking and cycling” as an objective and we suggest this be included in the new plan.

Pg 23: “9. People feel safe and secure when travelling, with continuous progress toward eliminating injuries and deaths from transportation.”

- Recommendation:
 - We suggest more explicitly referencing “improving safety” in this objective (as in the previous RTP).

Goal D: A Well Planned Region

Pg 23: “12. Integrated transportation and land use planning reduces the need for travel and encourages walking, cycling and taking transit.”

- Recommendation: Suggest rewording and including the terms “complete communities” and “active transportation”. For example: 12. Integrated transportation and land use planning supports complete communities, reduces the need for travel and encourages active transportation and taking transit.

Goal E: An Exemplary Environmental Footprint

Pg 23: “14. The transportation system is adaptive and resilient to the stresses of a changing climate, uses resources efficiently, and fits within the ecosystem’s capacity.”

- Recommendation: In the previous RTP, “13. Improved air quality, and reduced impacts on human health” was included as an objective. We suggest this be included in the new plan.

Pg 23: Objectives

- Recommendation: Consider further developing the objectives (e.g., SMART objectives) to better define the concepts in a way that lend themselves better to measurement (i.e., how will you know when this objective has been met) and inform the development of a more effective screening tool (described on page 24). Some examples of concepts that could be better defined include “competitive” (B5), “attractive” (C7), and “ecosystem capacity” (E14).

Did we (i.e. Metrolinx) miss anything?

- Recommendations: A challenge for transit and other alternatives to single occupancy vehicles is that it usually requires residents to dedicate more time to traveling and pay more than they perceive its value to be. Consider highlighting the idea of increasing the perceived value of alternative modes by making it 1) faster and 2) cheaper. As it is now, these two points seem a bit hidden or included within other language across several goals and objectives. If this is a vision/goal/objective that Metrolinx is interested in, it may resonate better with the public if it stands out on its own. Increase the visibility and prominence of active transportation to school by making it its own entity.
 - Page 21, under More than Just Transit; add active transportation to and from school as its own entity along with what is already written (active transportation, road efficiency, congestion management, goods movement, transportation demand management and supportive land uses).
 - Page 23, under Goal C: Health, Comfort and Safety add Active Transportation to School as a separate numbered objective.

Opportunities for Better Transit & Transportation

Pg 35: Managing Congestion

- Recommendation: The RTP should recognize that traffic volumes not only result in traffic congestion but also add a significant public health burden from vehicle emissions.

Pg 44: Vehicle Fuel-Efficiency and Electric Vehicles (EVs)

- Recommendation: We would like to see “reducing air pollutants” added to this section. For example, “VEHICLE FUEL-EFFICIENCY AND ELECTRIC VEHICLES (EVs) continue to represent an opportunity for the transportation sector to make a big impact on reducing greenhouse gas emissions (GHGs) and air pollutants.”

Pg 37: Background Research: “Background research to support the RTP review identified three key issues in the GTHA: congestion, managing land use compatibility, and reducing the environmental impact of goods movement.”

- Recommendation: It is important that incompatible land uses do not negatively impact sensitive populations in terms of air quality, noise and other environmental health issues. Health impact assessment tools/guidelines should be developed as part of the RTP in order to assess the human health impacts arising from transportation infrastructure.

Pg 61: Climate Change: “What is the impact on the climate?”

- Recommendation: It is important that the RTP is designed to protect and support natural heritage areas through Low Impact Development and Green Infrastructure as they contribute to carbon sequestration and storage. They also combat climate change impacts by providing natural shade and addressing urban heat islands and help buffer against the damaging effects of flooding during storm surges.

Pg 73: Indicators to Measure Goods Movement: “The Regional Transportation Plan will involve creation of a new indicator to measure goods movement”

- Recommendation: The paper discusses the need for metrics to evaluate actions and the broader performance of the transportation system. The RTP should consider a performance measurement that estimates the health benefits, in terms of air quality improvements and GHG reductions, of shifting to sustainable modes of transportation. This could be illustrated as to how future reduction in emissions can provide benefits to health. The impact of traffic related air pollution in terms of health care cost and resulting health outcomes has been estimated by health units using different methods. For example the recent Greater Toronto and Hamilton Area (GTHA) report Improving Health by Design provides information on the impact of traffic related air pollution on the health outcomes for the greater Toronto and Hamilton Area. Also, VKT metrics (discussed on page 60 of the discussion paper) should also estimate air pollution impacts in addition to GHG emissions.

Pg 34, 38: Active Transportation to School

- Comment: When applying the ASST lens, the report lacks any clear direction or action to be taken towards getting children to use AT to and from school. There is no formal mention of the ASST Regional Hub and its work and if it will continue in its work and efforts. The only mention of the ASST Hub is within the section on Smart Commute. Although the report extols the virtues of AT to school, the information provided is limited. Please note: on page 34 under Supporting Active Transportation –Promoting Active Transportation by Children and Youth section, it is good to see the trip to and from school highlighted. On page 38, Reducing the Demand for Travel - Increasing Effectiveness section - ASST strategies and programs are used as examples, but are under the veil of Smart Commute- consideration should be made to allow ASST be its own entity and not a section of Smart Commute.

Pg 70: Travel by Seniors

- Recommendation: Consider taking actions to accommodate the needs of older adults or those with mobility limitations in terms of the speed at which they are able to make transfers, the need for places to rest, and the need for smooth surfaces for wheeled mobility devices. It may be helpful to elaborate on the importance of having strong alternatives for older adults who may have health challenges that affect their ability to drive. For example, a health issue may require an unplanned transition from driving to using alternative modes. Strong alternatives are important to support the safe travel of everyone. In addition, this local data also illuminated several factors that encouraged older adults to use transit. These factors included: traffic

congestion, difficulty finding parking and negative attitudes about paying for parking, and having familiarity (i.e., previous experiences) with transit. Many of these factors can inform Metrolinx policy and programming.

Pg 25: Parking at GO Stations

- Recommendation: On Page 25, Metrolinx is described as being the largest parking provider in North America with a high number of parking spaces. It's important to consider a comprehensive set of initiatives that mitigates the demand for car parking. It's positive to see some discussion of supports for carpooling, car-sharing, and pedestrian, cyclist, and transit rider navigation to the GO stations, including 1) the parking pricing mentioned in Figure 7 and 2) the travel behaviour change programming, campaigns, awareness and support mentioned on page 27. Further development of a comprehensive set of initiatives is encouraged.

Opportunities for Regional Integration & Collaboration

Are there other areas where local and regional connections and integration need to be addressed?

- Recommendation: Ensure planning for active transportation networks (e.g. sidewalks, bicycle networks etc.) are coordinated across and within the Province. Regional and local municipalities, conservation authorities and other levels of government need to coordinate planning activities to ensure existing and planned infrastructure are efficient and well connected. For example, a variety of cycling facilities and traffic calming measures are needed to encourage cyclists of all ages and abilities. Facilities should be context sensitive and work to create a comprehensive cycling network that meets both recreational and utilitarian needs. In order to increase cycling mode share and reduce injuries, dedicated and separated facilities are encouraged where possible.

How should regional equity be addressed in the next RTP and subsequent Implementation Plan? How should issues of transit equity and access be addressed?

- Recommendation: Incorporating transit access and affordability for people on a low income into the next RTP reduces inequities in access to employment and services. Consider allocating funding to improving transit affordability for people on a low income.

Opportunities for New Mobility

How should the RTP focus on emerging influences including carsharing, on-demand services and autonomous vehicles?

Pg 42-45: Section 3.4 – The Next Generation of Mobility: “Metrolinx and municipalities can monitor the progress of related technologies and the impacts of pilot testing, support research and development that advances the public interest (e.g. in areas such as congestion, safety and accessibility), and, in conjunction with the Province, enact timely legislation and regulation.”

- Recommendation: It is important to use the wealth of data that will become available to monitor the performance, benefits and risks of new mobility technology, including the public health benefits (e.g. reductions in air pollutant emissions, improvements in safety, and increases in active transportation). It is also important to support research that will help identify these benefits and risks and support policies to increase the uptake of new technologies that have the potential to improve health and acknowledge other areas that advance the public interest (e.g. in areas such as congestion, safety, air quality, climate change and accessibility).