

REPORT Meeting Date: 2023-09-28 Regional Council

For Information

REPORT TITLE: Health and the Built Environment – Opportunities in Transportation

and Road Safety

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OBJECTIVE

To provide an update to Regional Council, as the Board of Health, on current and future health and built environment initiatives that integrate public health considerations into transportation projects to prevent injury and chronic diseases.

REPORT HIGHLIGHTS

- This report informs Regional Council, as the Board of Health, of Public Health's current and future built environment initiatives that integrate health evidence into transportation projects.
- Building communities with safe and connected active transportation infrastructure can help prevent injuries and chronic diseases related to physical inactivity.
- Peel Public Health provides health-supportive input to inform transportation infrastructure projects and improve health outcomes.
- In 2023, Public Health remobilized Built Environment Transportation and Road Safety programs. Since April 2023, Public Health has provided health-supportive recommendations on 100 per cent of applicable environmental assessments (EAs) and commented on six transportation-related policy documents.
- In addition, Public Health staff have advanced a data project about active transportation injuries and have facilitated data sharing among Vision Zero program partners.
- The dissolution of Peel Region through Bill 112, *Hazel McCallion Act* (*Peel Dissolution*), 2023, creates uncertainty about how Peel Public Health will continue to develop, maintain, and advance critical partnerships supporting transportation planning and road safety projects at the local level.

DISCUSSION

1. Background

The Ontario Public Health Standards mandate Public Health to act on the links between health, active transportation, the built environment, and injury prevention through the Chronic Disease and Well-Being and Substance Use and Injury Prevention Ontario Public Health Standards (see related report listed on the September 28, 2023, Regional Council agenda titled "Health and the Built Environment – Opportunities in Land Use Planning"). This report informs Regional Council, as the Board of Health, of Public Health's progress

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with integrating health evidence into transportation projects to prevent injuries and chronic diseases.

Creating a healthy built environment requires consistent efforts to design transportation-related infrastructure that promotes sustainable and safe modes of travel, including transit use, cycling, and walking. For over a decade, Public Health has worked with partners to improve the availability and safety of active modes of travel throughout Peel. Active transportation increases regular physical activity and can help to prevent chronic diseases that have a significant impact on Peel's residents, including type 2 diabetes.

While Peel Public Health participates in many collaborative forums that advance active transportation infrastructure, one of the most impactful has been Peel Public Health's unique partnership with Transportation, Public Works. This partnership has helped embed health evidence into infrastructure planning and design and facilitates Public Health's role in providing input in regional and local municipal transportation projects. Health evidence is embedded by using healthy design tools in the Regional Environmental Assessment (EA) process, applying health evidence to support transportation-related planning policies, and through the integration of high-quality data into road safety decision-making practices.

2. Incorporating Health Considerations into Transportation and Road Safety

Public Health has worked with several partners to advance road safety and active transportation planning and design. A list of projects below describes Public Health's role to support progress made by partners to improve conditions for active transportation. These efforts are reflected in increased walkability for Peel's local municipalities as measured by the Peel Walkability Composite Index (see the companion report "Health and the Built Environment – Opportunities in Land Use Planning").

a) Health Considerations in the Design of Transportation Projects

Public Health staff support the review of regional and municipal transportation projects by sharing evidence on how transportation planning policies impact health (e.g., Transportation Master Plans). Staff also provide health-related comments on infrastructure design through the EA process. These comments focus on the health benefits of active transportation infrastructure. Since resuming Public Health's role in EA commenting in April 2023, staff provided input into 100 per cent of applicable EAs (n=14) and six transportation planning and transit-related policies.

Public Health supported the use of multi-modal level of service (MMLOS) assessments alongside vehicular level of service for relevant Regional EAs. MMLOS assessments use a grade-system to standardize how a proposed road design supports each of the following road users: pedestrians, cyclists, and transit users. These assessments take the surrounding land-use into consideration to enable context-sensitive approaches to the development of walking, cycling and transit-supportive infrastructure, which are linked to increased levels of regular physical activity. Public Health continues to collaborate with Public Works to increase capacity for integrating health evidence into existing practices.

b) Application of World Health Organization - Health Economic Assessment Tool (HEAT)

Public Health staff have applied the World Health Organization's HEAT to communicate the health and economic impacts of meeting Peel's Sustainable Transportation Strategy

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(STS) goal to achieve a 50% sustainable mode share by 2041. The tool estimates costs and benefits related to physical activity and crash risk.

Using local data and 2041 targets from the STS, Public Health's estimates suggest that reaching the Region's goal of 50 per cent sustainable mode share by 2041 would result in the following costs savings and health impacts for Peel:

- an estimated cost savings of \$319M each year, and a total of \$7.97B cost savings over a 30-year time-period (2011 – 2041), and
- an estimated 69 premature deaths per year prevented and 2085 premature deaths prevented in total over a 30-year period (2011 2041).

These figures are likely an underestimate of full health impacts because air pollution and carbon emissions were not included. Please refer to Appendix I for additional details on assumptions, limitations, and data for this estimate.

c) Vision Zero Task Force Fatal Collision Working Group

Through the Vision Zero Task Force, Peel Public Health co-facilitates Peel's Fatal Collision Working Group (FCWG). This multidisciplinary group provides a forum for Public Health, Peel Paramedics, Peel Regional Police, Ontario Provincial Police, Regional and Local Municipal Transportation staff to support the goals of Vision Zero. In this forum, Public Health creates links to health resources for the FCWG, including providing expertise in health data and evidence. In 2023, the FCWG incorporated quarterly collision reports produced by Peel Police into their work to support Vision Zero. This demonstrates how the FCWG enables partners to build on emerging road safety related practices, incorporate new data and share strategies that can improve coordination of fatal collision response.

d) Pedestrian, Cyclist and E-Scooter Collision Data Project

Public Health staff are also leading an active transportation and e-scooter collision data project, which is expected to be completed by Q1 of 2024. Through a health data request supported by the Institute of Clinical and Evaluative Sciences, Public Health will examine pedestrian, cycling and e-scooter injuries across Peel. This project enables us to support the City of Mississauga and City of Brampton's reporting requirements for provincially approved e-scooter pilot projects. Further, this will support decision makers with relevant and reliable data to inform future efforts related to road safety, active transportation, and micro-mobility.

BILL 112 RISKS AND IMPLICATIONS

The passing of the *Hazel McCallion Act* (*Peel Dissolution*), 2023, on June 8, 2023, will dissolve the Region of Peel effective January 1, 2025. Details on the transition are unknown. The *Act* generates uncertainty with how Public Health can continue to collaborate with Transportation departments beyond dissolution. Further, due to statutory changes brought about by *Bill 23 More Homes Built Faster Act, 2022 (Bill 23),* the Region's responsibilities related to land use planning are to be removed on a date to be proclaimed by the Lieutenant Governor. When changes from Bill 23 are proclaimed, the Region of Peel Official Plan will be deemed to be an official plan of each local municipality in conjunction with their own official plans. To mitigate the potential risk of interrupting public health programs that enhance road safety and active transportation, partnership agreements with local municipal transportation planning departments

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are one mechanism that can support maintained Public Health contributions in transportation planning and road safety projects.

FINANCIAL IMPLICATIONS

There are no financial implications as a result of this report. Associated financial implications will be managed within the existing budgets of Public Health and Public Works.

CONCLUSION

Peel Public Health will continue to support the Region's efforts to create health-supportive transportation infrastructure. Strengthening partnerships between Public Health and local municipal transportation departments can prevent interruptions to Public Health's input in transportation planning as Peel Region and the local municipalities transition to a future state. Public Health's continued involvement in transportation planning and design will enable future progress on infrastructure that supports regular physical activity for Peel's residents to reduce the burden of chronic diseases, injuries, and associated health care costs.

APPENDICES

Appendix I – Health Economic Assessment Tool (HEAT) data, limitations, and assumptions.

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