Evidence to back up the letter:

**The UK Faculty of Public Health (FPH)** recommends a "major shift away from cars in favour of active travel: walking, cycling and public transport" in order to reduce the health harms of road transport and improve the health of the population and individuals.

**The West Sussex draft Walking and Cycling Strategy** says that "walking and cycling have numerous health benefits including: reducing levels of obesity and related conditions such as diabetes and coronary heart disease, improving poor air quality which is estimated to hasten around 40,000 deaths per year in the UK, reducing stress, contributing to mental wellbeing, and improving healthy life expectancy."

There is a clear and well established medical evidence base from the **National Institute for Health and Care Excellence (NICE)** for the effective measures needed on streets to improve health. These measures include:

- Re-allocating road space to support active travel (reducing on-street parking, widening pavements, introducing cycle lanes).
- Restricting motor vehicle access eg by closing or narrowing the carriageway and blocking roads to through traffic except cycles.
- Introducing road-user charging.
- Introducing traffic-calming schemes, 20mph limits etc.
- Providing a comprehensive network of routes for walking and cycling to offer everyone (including people whose mobility is impaired) convenient, safe and attractive access to workplaces, homes, schools, shops etc.

## The role of health organisations in promoting change:

The Academy of Medical Royal Colleges (AoMRC) has recently recommended that "a change in culture is needed so that it is no longer considered 'normal' to spend a large amount of time sitting in cars".

The AoMRC's report *Exercise: The miracle cure and the role of the doctor in promoting it* highlights the need for changes in infrastructure to support more active travel. The AoMRC recommends that NHS organisations, including clinicians on Health and Wellbeing Boards, should be advocates for action at local government level to improve facilities for active travel and improve health through changes to the built environment.

Public health practitioners "are well placed to lobby for change in transport appraisal practices, challenging the assumption that saving extra seconds on motorists' journeys should be equated with and prioritised over public health gain.....Transport practitioners who want a different approach need the help of a strong public health voice." **Rachel Aldred, Reader in Transport, University of Westminster** 

## The views of health experts on the health impacts of cars:

The Chief Medical Officers of England, Scotland, Wales and Northern Ireland have advised that: *"For most people, the easiest and most acceptable forms of physical activity are those that can be incorporated into everyday life. Examples include walking or cycling instead of travelling by car."* 

The British Medical Association has stated that: "Walking and cycling are also effective ways of integrating, and increasing, levels of physical activity into everyday life for the majority of the population, at little personal or societal cost."