

**Healthy Environments**

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6 August 2007

**AUCKLAND REGIONAL PUBLIC HEALTH SERVICE**

**SUBMISSION ON THE AUCKLAND CITY COUNCIL PROPOSED BUS  
LANES FOR QUEEN STREET 2007**

**To:** Auckland City Council  
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**From:** Auckland Regional Public Health Service  
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1. Thank you for the opportunity for the Auckland Regional Public Health Service to provide a submission on the Proposed Bus Lanes for Queen Street 2007.
2. This submission represents the views of the Auckland Regional Public Health Service (ARPHS). ARPHS provides public health services for the three district health boards in the Auckland Region (Auckland, Counties Manukau and Waitemata District Health Boards), with the primary governance mechanism for the Service resting with Auckland District Health Board. This submission represents the views of the Service and does not necessarily represent the views of the three District Health Boards.
3. ARPHS understands that all submissions will be available under the Official Information Act 1982, except if grounds set out under the Act apply.

4. The primary contact point for this submission is:

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### **Executive Summary and Key Recommendations**

5. Transport is a key issue in the Auckland region with a significant impact on many issues including economic development, safety and security, mobility and accessibility, land use patterns, environmental sustainability and the protection and promotion of public health.
6. Transport is one of the key elements in achieving the sustainable vision outlined in the Auckland Sustainability Framework. An increase in low emission or emission free public transport combined with a reduction in traffic volume will contribute to a reduction in Auckland City carbon footprint.
7. ARPHS believes that consideration for population health and wellbeing should be paramount in any development within the Auckland region, especially planning with regards to accessibility within a safe environment.
8. ARPHS applauds the Council's decision to create a safer more environmentally friendly heart to the CBD, and believes that the proposal to encourage walking and cycling will lead to significant health benefits.
9. ARPHS believes that improved public health outcomes will also contribute to making Queen Street a more attractive shopping destination. Whilst ARPHS commends Auckland City Council on progress towards prioritising pedestrians and cyclists, consideration must be given to the health and safety risks resulting from exposure to air pollution and shared vehicle spaces.
10. ARPHS recommends Council considers building on the potential health benefits resulting from improved attractiveness of Queen Street that would encourage people to the area and to linger longer when they get there. This would mean creating an even healthier and safer environment for pedestrians and cyclists by:
- Working with ARTA and bus operators to introduce emission free buses.
  - Introducing a Queen Street restriction on all vehicles except, public transport, taxis, cycles and motor cycles, service, emergency and disability vehicles.
- Private motor vehicles would still be able to cross Queen Street without the option of turning left or right into Queen Street.
11. ARPHS proposes that local government undertake monitoring of emissions, especially in areas of acceleration such as intersections and steeper incline.

12. The Service recommends extension of this concept to include the unfriendly pedestrian and cycling environment on Karangahape Road.

## **Introduction**

13. Auckland Regional Public Health Service (ARPHS) has a statutory obligation under the Health Act 1956, to improve, promote and protect the health of people and communities in particular for the Auckland Region. ARPHS primary concern is to improve population health rather than deliver personal health services. It actively seeks to influence any initiatives or proposals that may affect population health in the Auckland region to maximise their positive impact and minimise possible negative effects on population health.
14. The Auckland Region faces a number of public health challenges through changing demographics, increasingly diverse communities, outstanding infrastructure needs, transport needs and urban design and urban intensification issues.
15. Policy to affect health gain is often marginalised to medical care. However, health is influenced by a broad range of policy decisions and is not solely the responsibility of the health sector. Planning and policy decisions by central government, local government, non-government agencies and the commercial sector can have a large impact on health outcomes.
16. ARPHS believes that public health issues are inseparable from, and integral to, Council's cultural, economic, environmental and social wellbeing processes, which are mandated through the Local Government Act. In addition, Council has a duty to consider health and wellbeing under other legislation such as the Health, Building and Resource Management Acts.
17. To assist councils in providing for the social, economic, environmental and cultural wellbeing of their communities, the Service produced the second in its State of Public Health Reports entitled "Improving Health and Wellbeing: A Public Health Perspective for Local Authorities in the Auckland Region"<sup>1</sup> (SOPHAR Report) in 2006. This report clearly sets out the areas where Council decision-making will have wide influence and impact on the wellbeing (including health) of its community.
18. Public health typically focuses on 'upstream' approaches to prevent disease and promote health.<sup>2</sup> Action is needed at all levels, but 'upstream' strategies should receive particular emphasis. ARPHS acknowledges the 'upstream' approach taken within the Bus Lanes for Queen Street proposal, in particular the reduction of exposure to vehicle emissions for those who regularly spend time in Queen Street.

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<sup>1</sup> [http://www.arphs.govt.nz/publications/Sophar06/Sophar\\_report06.asp](http://www.arphs.govt.nz/publications/Sophar06/Sophar_report06.asp)

<sup>2</sup> Wilson N, Watts C, Signal L, Thomson G. Acting upstream to control the obesity epidemic in New Zealand. New Zealand Medical Journal 2006;119(1231).

## General Comments

### Health and Wellbeing

19. ARPHS strongly supports the intention of the Bus Lanes for Queen Street proposal to prioritise increased opportunity for walking and cycling in a **safe** and **less** polluted environment. Encouraging physical activity is paramount to public health and wellbeing.
20. The SOPHAR Report states “If more people were physically active, there would be a reduction in the rates of chronic diseases and overall morbidity. Regular physical activity is linked with reduced rates of obesity, cardiovascular disease, certain cancers and diabetes.”
21. The current obesity epidemic is a major public health issue, any measures that contribute to reversing the declining levels of physical activity will assist reduction in obesity. In her opening address to the New Zealand Walking Conference 2006, the Hon Annette King stated “the benefits of walking for individuals and for the country are very clear. The economics alone make great sense, in terms of our health system, as walking is the cheapest way to beat obesity.”
22. The service acknowledges that this initiative will help support the Auckland City – Walking and Cycling Strategy, City Safe and Active Auckland Plans.

### Air Quality

23. The Service strongly supports the council’s intention to work with ARTA and bus operators towards the introduction of quieter, environmentally friendly buses that will produce 70 to 90 per cent less emissions. As is well known carbon emissions and other contaminants released from vehicles impact negatively on people’s health and wellbeing. The SOPHAR Report identifies air pollution as a health issue. “There is increasing evidence that exposure to unacceptable levels of pollutants in air can shorten life expectancy and contribute to a range of health problems.”
24. The recently released four year study of health and air pollution in New Zealand - Health and Air Pollution in New Zealand,<sup>3</sup> found air pollution associated with 1079 cases of premature death across the country. Most were associated with fine particulate emissions. The pollution increased the national mortality rate by 4.8% implying that nationally one in twenty people died earlier than they would have because of air pollution. Based on this evidence, all active transport plans should seek to remove the pedestrian and cyclist from vehicle emissions. Furthermore the HAPiNZ study is acknowledged to be highly conservative, for example: only includes adults >30 years and does not include young children who are the most vulnerable group, does not include the entire population (73% only), employs an outdated and overly conservative dose-response relationship, and does not include the independent effects of nitrogen dioxide exposure.

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<sup>3</sup> Fisher G, Kjellstrom T, Kingham S, Hales S, Shrestha R, et al. Health and Air Pollution in New Zealand. A Research Project Funded by: Health Research Council of New Zealand for the Ministry for the Environment and Ministry of Transport. June 2007

25. The proposal states that “20 quieter, environmentally friendly buses are planned to be in operation for the Link service that uses Queen Street later this year”. ARPHS would like to see the council encourage ARTA and the bus operators to prioritise transition of all buses using Queen Street to quieter, environmentally friendly buses, preferably emission free buses.

## Safety

26. ARPHS applauds the Councils commitment to prioritise **pedestrians** and acknowledges the plan to introduce measures that will slow traffic. The service recognises that traffic calming is one of the most important solutions to this end. The City of Hull in the UK has achieved impressive reductions in road traffic injury with widespread traffic calming (reducing speed to under 30km/h) – for further information on Hull’s experience, see following link <http://www.hullcc.gov.uk/pls/portal/docs/PAGE/HOME/TRANSPORT%20AND%20STREETS/TRANSPORT%20PLANNING/LOCAL%20TRANSPORT%20PLAN/LTP%202006-2011%20DOWNLOADS/HULLLTPCHAPTER5.PDF>  
The increase in safety for pedestrians and cyclists – including better perceived safety – will help to promote more walking and cycling. Traffic calming will also significantly contribute to “making the city a more attractive place for businesses, workers and students”; and to transforming the city “into a truly world-class pedestrian environment”
27. Whilst ARPHS commends the council for raising the pedestrian priority in the current proposal, in future development ARPHS would like to see pedestrians given the “highest priority”. This would involve removing all private vehicles from Queen Street and ideally replacing buses with emission free public transport. “If we plan for cars we get cars, if we plan for people we get people.”
28. ARPHS recommends that a formal 30km/h speed restriction be introduced on Queen St. The risk of pedestrian death in crashes at 30km/h is less than 5%. In comparison, at 50km/h the risk is close to 50%. Accordingly, a 30km/h limit will increase safety and amenity for pedestrians and cyclists. It may also decrease noise and emissions from buses and cars on Queen St as they may accelerate less rapidly, since their target speed is lower.
29. Research indicates that an increase in pedestrian and cycling numbers has an effect on driver behaviour, thereby increasing safety. The article ‘Numbers: more walkers and bicyclists, safer walking and bicycling’<sup>4</sup> concludes “A motorist is less likely to collide with a person walking and bicycling if more people walk or bicycle. Policies that increase the numbers of people walking and bicycling appear to be an effective route to improving the safety of people walking and cycling.”
30. With regards to **cyclists** sharing bus lanes, ARPHS recognises this to be an improvement for cyclists, however does not consider this to be the perfect solution. Ideally cyclists deserve dedicated cycle lanes. ARPHS also has concerns about motorist visibility of cyclists when moving left-ways across the bus lanes to reach the parking bays.

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<sup>4</sup> Jacobsen P L. Safety in numbers: more walkers and bicyclists, safer walking and bicycling. Injury Prevention 2003; 9:205-209. [www.injuryprevention.bmj.com](http://www.injuryprevention.bmj.com)

31. In the best interests of cyclist safety ARPHS recommends that the Queen Street cycle lanes are a part of an integrated network within the surrounding environs.

### **Economic Benefits**

32. Evidence shows that promoting pedestrian priority and environmental quality can enhance the business economy. In 1988/89 with the Birmingham International Convention Centre under construction attention focused on the need for a detailed vision of the future Birmingham city centre. This urgency came about due to a local economic crisis in the 1980's.
33. Rodney Tolley, Honorary Research Fellow at Staffordshire University, Director of Walk 21 and author of 'Providing for Pedestrians: Principles and Guidelines for Improving Pedestrian Access to Destinations and Urban Spaces'<sup>5</sup> cites Birmingham as an example to demonstrate that a good environment is good for business. "The evidence of this has been in the number of national awards won by Victoria Square. More significantly, the scheme has effected change that is now increasingly being carried out through the private sector, which now unreservedly supports the scheme, having recognised that a high quality environment is good for business"
34. "Secondary evidence for Birmingham city centre substantiates the conclusion that the Highbury Initiative has had a positive effect on the economy and environment. Prime retail rents and office rents have improved."
35. Todd Litman, author of 'Economic Value of Walkability'<sup>6</sup> states "Sometimes contrary to local traders' expectations, improvements for walkers in town and city centres can lead to higher levels of business, since people on foot tend to be more relaxed and are likely to spend more time browsing and enjoying food and drink. A study in Bristol found that over half the customers in local shops arrived on foot, and only 22% by car, though retailers estimated 41% arrived by car. Furthermore those on foot visited more shops in a single trip than those who arrived by car (Sustrans 2006). In some areas 75% of shoppers arrive on foot (Transport for London 2003). Creating good access on foot to shops and services has played a vital role in many regeneration schemes, for example in Birmingham (Transport 2000 - 2003)."

### **Recommendations**

36. While it is anticipated bus patronage, travel times and improved economy will be measured, ARPHS recommends that the council evaluate and promote other success factors resulting from the installation of the bus lanes within twelve months.

Evaluation measures might include:

- Monitoring of air pollution and noise levels
- Pedestrians' perception of safety, including air quality and noise.
- Cyclists' perception of safety, including air quality and noise.
- Increase in numbers of pedestrians and cyclists.
- Vehicle speed and driver behaviours.

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<sup>5</sup> Tolley R. Providing for Pedestrians: Principles and Guidelines for Improving Pedestrian Access to Destinations and Urban Spaces - July 2003. Walk 21, Department of Infrastructure, Victoria.

<sup>6</sup> Litman T. 'Economic Value of Walkability' October 2004. Victoria Transport Policy Institute, Canada <http://www.vtpi.org/walkability.pdf>

## **Conclusion**

37. ARPHS strongly supports the 'Bus Lanes for Queen Street Proposal'; that the bus lanes operate 24 hours a day, 7 days a week, that the lanes available for private vehicles be reduced from four to two lanes and that measures be taken to slow traffic.

38. ARPHS believes that likely significant benefits to health and wellbeing resulting from the opportunity for increased physical activity, social interaction and reduced exposure to air pollutants outweigh any possible disadvantages.

Thank you for the opportunity to make this submission.

Yours faithfully

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