

Public Transportation and Health

POSITION STATEMENT
Oklahoma Health Equity Campaign

*"Even if you are on the right track, you will get run over if you just sit there."
~Will Rogers*

Public transportation supports healthy communities by...

- Allowing people to get daily exercise by walking or biking to transit stops
- Reducing air pollution and pollution-related respiratory ailments, like asthma
- Providing access to jobs which is crucial to long term health especially for those without a car
- Directly, some people can take the bus instead of driving. Indirectly, when people take the bus, bike, etc, there is less traffic and stress for those who do drive reducing road rage, long commutes, and traffic jams
- Boosting mental health by building a sense of community cohesion and connection to neighbors

Comment [sz1]: Is it the access to jobs or the jobs themselves that are the key determinant of health? I think I'd reword this: Providing access to jobs, which are crucial to long term health

Comment [sz2]: You might want to note that public transit does this in two ways – directly, because some folks can take the bus instead of driving, and indirectly, b/c when people take the bus, bike, etc, there is less traffic and stress for those who do drive. In all active transportation related arenas I think it is key to emphasize the benefits for the indifferent majority who have no intention of getting out of their cars... yet...

Public transportation can provide access to healthy community resources such as ...

- Life-sustaining medical treatments and doctor's appointments
- Healthy food outlets like grocery stores and farmers' markets
- Places for play and being physically active, such as parks and walking/biking trails

Transportation is a Public Health Issue

Oklahomans face a number of chronic health problems such as obesity, heart disease and diabetes. In fact, Oklahoma ranks 48th among all states for overall health according to the United Health Foundation. Stress and lack of exercise contribute to our poor health. One way to counter these problems is by using and investing in public transportation. Public transportation is linked to many aspects of good health – access to food, safety, exercise, lower stress levels, healthcare access and employment. The public transportation system is especially important to households without automobiles, the elderly, and those unable to drive. For these people, transit is the lifeline to medical care, grocery stores, employment, recreation, and everyday activities that others take for granted. Many suffer negative health consequences from lack of access to these basic necessities because public transportation isn't affordable or available.

Comment [sz3]: Delete the word "would"? Or rephrase to make it clear that some do and some do not currently have this access?

Public transportation also plays an increasing role in the daily lives of many commuters, students, urban dwellers, and even rural residents. Given the opportunity to get around without a car, many find the advantages of lower stress, more exercise, and pedestrian-oriented communities to outweigh the benefits associated with the traditional car-dependent culture.

And cars are expensive. Transit helps many households save part of the \$7,000 or more annual cost of a car, and thus better afford health insurance, dental care, good diet, housing, and even health club memberships.

How We Stack Up

Metro Tulsa and Oklahoma City are only able to provide relatively infrequent transit service when compared with American metropolitan areas of similar size. Transit in suburban and rural areas is no

better off, especially for travel between cities. Yet the state’s urban road and highway systems provide a relatively high “level of service” compared to American cities of similar size. This contrast of road/transit service levels illustrates the need for increased transit funding.

Transit in Oklahoma’s urban areas is definitely underfunded when compared to similar-size cities in our region. Oklahoma City and Tulsa operate on less than one-third the amount of local funding typical for metros of their size according to the National Transit Database.

The lack of transit funding is not solved by increasing fares: the best bus and rail systems in America tend to receive less than 15% of costs back through the farebox collections. Adequate funding means a dedicated funding source and most comparable-size cities outside Oklahoma have that, usually through a transit-dedicated sales tax of at least a half cent.

A recent summer 2010 Transit Equity Network national report found that nearby metropolitan cities like Kansas City, St. Louis and Denver had a modest average of 20% of their federal funds allocated to public transportation. In the Oklahoma City metropolitan area, available federal funds were just under 10% according to the Transportation Improvement Program for the Oklahoma City Area Regional Transportation System, FY 2011-2014.

The Solution

Both Oklahoma City and Tulsa metropolitan areas need a dedicated local funding source. More state funds are needed for urban and rural transit. Bus, streetcar, ADA paratransit, senior van, discount senior taxi ride, bike and bus, commuter express bus, bus rapid transit, commuter rail transit, and other rail, are all part of transit’s contribution to better health. The Oklahoma Health Equity Campaign, Turning Point Partnerships across the state, and other groups including AARP Oklahoma, the county health departments, Oklahoma Alliance for Public Transportation, and METRO Transit, recognize the connections of health and transit. These groups, along with others, are joining in the call for adequate funding for public transit.

POLICY RECOMMENDATIONS

Goal: Increase access to healthcare and jobs through reliable, low-cost public transit

- Provide adequate funding for a first-class transit system through dedicated state and local funding
- Increase coverage area and route frequencies of public transit systems
- Connect rural and outlying communities with timely, affordable public transit

Comment [HMW4]: These are great

Goal: Build healthy cities and communities that give people cleaner, safer options for active transportation

- Encourage “green” development and pedestrian-friendly planning
- Discourage sprawl, and invest in enhancing our existing communities through infill development
- Create “complete streets” that serve all users by incorporating safe sidewalks, proper bus stops, bike lanes, and crosswalks in design and construction
- Provide safe crossings and sidewalks near transit stops

Comment [HMW5]: Not sure if the phrase “active transportation” is widely recognized, but we use it quite a bit

Comment [HMW6]: I took out “incentives and restrictions” – it didn’t seem to be in keeping with the tone of the other bullets.

Comment [HMW7]: You may want to delete this phrase – I added it, but “infill” is also a bit jargon-y.

Conclusion: Better transportation is about choices.

Better health is often about equitable transportation choices.

Comment [sz8]: I really like this, but it doesn’t really feel like a conclusion, but rather a new point. I wonder if you might want to incorporate the health equity points a little more into your discussion above.