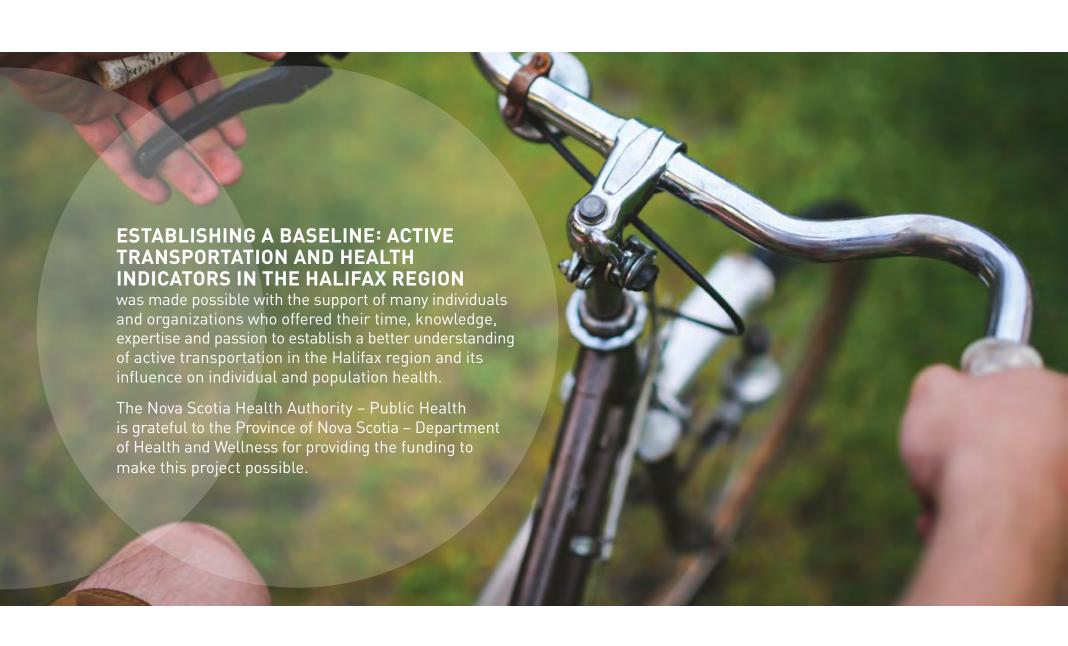


ESTABLISHING A BASELINE:

Active Transportation and Health Indicators in the Halifax Region







We are especially grateful to the members of the project Working Group and to those organizations that provided data for the project.

The Active Transportation and Health Indicators Working Group Members

Healthy Populations Institute, Dalhousie University Child Safety Link, IWK Ecology Action Centre Halifax Cycling Coalition Halifax Regional Municipality Halifax Regional Police Nova Scotia Health Authority – Public Health Province of Nova Scotia

Active Transportation and Health Indicators Data Holders

Healthy Populations Institute, Dalhousie University
Bicycle Nova Scotia
CarShare Atlantic
Child Safety Link, IWK
Dalhousie Transportation Collaboratory (DalTRAC)
Ecology Action Centre
Halifax Cycling Coalition
Halifax Harbour Bridges
Halifax Regional Municipality
Halifax Regional Police
Heart and Stoke Foundation
Nova Scotia Health Authority – Public Health
Province of Nova Scotia

EXECUTIVE SUMMARY HEALTH BENEFITS OF ACTIVE TRANSPORTATION

The way communities are designed has direct impacts on the ability of residents to engage in healthy activities, such as accessing nutritious food, supporting local businesses, participating in social gatherings, and choosing active ways of getting around. In the Halifax region, health and demographic data show an aging population, low physical activity levels across most age groups and growing rates of obesity. For residents of the Halifax region to achieve and maintain optimal health status throughout their lifespan, communities must be designed to protect the wellness of residents and to make healthy choices easier.

Building communities that better support active transportation (AT) for people of all ages and abilities is one key strategy for making healthy choices easier and supporting positive health outcomes in the Halifax region. Active transportation refers to any form of human-powered transportation such as walking, cycling, using a non-motorized wheelchair, and in-line skating or skateboarding.

Many of the health benefits from AT are the result of an increase in physical activity. These benefits include lower risks for heart disease, stroke, some cancers, diabetes, depression, and falls and fall-related injuries. Active transportation also supports population health by reducing the risk and severity of traffic injuries, reinforcing transit use, improving community cohesion through increased social interactions, and creating less air pollution. Other benefits of AT include economic benefits, such as reduced employee absenteeism through improved health, and environmental benefits, such as lower levels of greenhouse gas emissions.

Project Purpose and Approach

Despite the benefits of AT, there is a lack of basic information in Nova Scotia on active transportation. This lack of local data and analysis make it difficult to measure progress, develop policy, justify and prioritize investments, inform decision-makers, and plan effectively using timely, local evidence.

The Nova Scotia Health Authority (NSHA), Public Health-Central Zone, in partnership with a multidisciplinary team of stakeholders, initiated this project to respond to this clear public health potential and better understand what local AT data exists to support evidence informed decisions. The hope is that this report will inform actions and interventions, and raise awareness and understanding about the role AT can play in addressing population health.

The project relied on a collaborative process led by a working group and supplemented by additional data partners (see Acknowledgements). While 40 key indicators were identified for ongoing monitoring, this project was also used as an opportunity to capture as much local AT-related data as possible. The intent of this was to provide additional context for the discussion on AT and health in the Halifax region and better inform the key indicators and associated data gaps. The indicators fall into five categories:

- 1 Health/Physical Activity (11)
- 2 Transportation (12)
- 3 Investment (4)
- 4 Infrastructure (9)
- 5 Information (4)

Of the 40 key indicators identified, baseline data was established for 28 of these indicators, including 12 which allowed for comparison with other municipalities. The decision to still identify a specific indicator for future monitoring even though baseline data was not available recognizes that this project was viewed by the project team as a starting point for future work and collaboration moving forward.

KEY FINDINGS – HALIFAX REGION PROFILE

Demographics, Physical Activity, and Health

- The Halifax region has an aging population with a high proportion of seniors. This trend will increase in the future as currently the largest age group is people in their fifties. Young adults aged 20–29 make up the next largest demographic.
- The population of the Halifax region has lower rates of chronic disease than the rest of Nova Scotia however rates are generally higher than the national average.
- It is estimated that over one third of youth (12-17 years old) in the region have overweight or obesity. While lower than the rest of Nova Scotia, the proportion of both youth and adults who have overweight or obesity is increasing and above the national average.
- When compared with Canadian cities of a similar size the Halifax region
 has a high rate of self-reported physical activity levels and ranks the
 highest in Atlantic Canada. These self-reported rates have increased for
 adults in recent years.
- Residents report high levels of overall life satisfaction.

Transportation and Safety

- The top-three factors influencing a person's decision to walk or cycle were:
 - Heat and humidity;
 - Having to transport items or passengers; and,
 - The presence of separated bicycles lanes along the route.

- Two-thirds of Halifax region residents would like to walk more and 50% would like to bike more.
- The proportion of people commuting to work in a vehicle is increasing.
- Approximately 80% of commuter trips are shorter than 3km for walking and than 5km for cycling.
- When considered against other mid-sized Canadian cities, the Halifax region has a high proportion of people using AT modes for commuting to and from work.
- Almost 30% of people living in the Regional Centre commute using AT. When transit is also included, this value reaches almost 50%.
- Walking is the most common form of AT (8% for walking vs. 1% for cycling).
- Outside of commute-to-work data, AT is used most frequently for 'household work and activities' and 'school and education' purposes.
- Few women choose cycling as a form of transportation.
- Half of people injured while cycling are under 30 while three-quarters are male.
- People who walk and cycle are disproportionally impacted by road-related collisions.
- Over 60% of vehicle-pedestrian collisions involve a crosswalk.
- There were over 240,000 crossings of the Macdonald Bridge by people walking and biking in 2014.
- Ferry ridership experienced a significant increase when additional services were added.
- Halifax Transit sold over 400,000 transit passes in 2015/2016. Of these, almost 9,000 were passes sold through its Smart Trip Employee Transit Pass program operated in partnership with Halifax region employers.

Investment

- AT is gaining increasing focus in Halifax Regional Municipality (HRM) strategic plans and operational decisions.
- There are eight adopted/endorsed HRM strategic plans that address AT issues and three under development. Of these, nine explicitly make the link between AT and positive health outcomes.
- HRM has seven full-time staff dedicated to AT project planning.
- Snow-clearing policies for walking and cycling infrastructure are under review for HRM.
- HRM's Capital Budget highlights:
 - Four percent is allocated for AT-Related Projects;
 - AT capital spending is projected to more than double over ten years from 2012/13 levels; and,
 - Projected new capital spending for AT-related projects over 5-years is \$54.7 million.
- The Province of NS has been developing a provincial active transportation framework and a new Traffic Safety Act to replace the outdated Motor Vehicle Act.

Infrastructure

- 1271 km of AT-infrastructure exists in the Halifax region.
- Local online crowd sourcing tools, such as Cycle snAPP and the Bicycle Nova Scotia Incident Reporting System, help planners and AT users better understand the local bike network
- Significant additions to multi-use pathways and other biking infrastructure have been completed since 2006.
- Accessibility factors are increasingly considered however further work is needed, including developing meaningful indicators to monitor progress in this area.

- Annual transit service hours (i.e. the total number of hours of service provided to residents every year) have increased by 44% per capita since 2006/07.
- 59% of transit stops meet Halifax Transit's Accessibility Standards.
- Over 1400 people are members of a local car sharing service.
- Opportunity exists to incorporate equity considerations into planning and infrastructure decisions.

Information

- The Halifax region has a very active civil society playing the role of educators and advocates.
- Nine community and institutional 'Sustainable Transportation Champions' were identified, two with a direct link to health.
- Bike Week has grown significantly since 2006 with 60 events and over 7000+ participants in 2016.
- Between 2015 and 2017 the Making Tracks/Try a Ride and Welcoming Wheels cycling programs reached over 5000 people, including 160 new Canadians.
- 5600 people participated in Winter Walk Day and International Walk to School Day in 2017 through Halifax area schools.

Knowledge Transfer and Next Steps

When this project was initiated, it was viewed as a first step in a discussion around AT and health that few were talking about in Nova Scotia. Over the course of this project however, the team observed a significant local shift in momentum with AT gaining increasing support as a valid transportation option that supports positive, sustainability and economic health outcomes. The knowledge transfer component of this project is designed to support and build on this momentum. This includes sharing project learnings with other communities and stakeholders, identifying information gaps and supporting efforts to fill these gaps, and building on other indicator work to complete the baseline data and monitor trends moving forward.

